

2021 Commercial Prior Authorization Requirements Summary

(Updated December 2020)

This document provides an **overview of services/care categories** for which prior authorization may be required for **some commercial**, **non-HMO** Blue Cross and Blue Shield of Illinois (BCBSIL) members. **Always check eligibility and benefits first** via the <u>Availity® Provider</u> <u>Portal</u> before rendering services to determine prior authorization requirements and utilization management vendor information, if applicable.

Outpatient Medical/Surgical Services

- Artificial Intervertebral Disc
- Autologous Chondrocyte Implantation (ACI) for Focal Articular Cartilage Lesions
- · Bone Conduction Hearing Aids
- Cochlear Implant
- Deep Brain Stimulation
- Dialysis (PPO Out of Network only)
- Elective Surgery (Out of Network)
- Femoroacetabular Impingement (FAI) Syndrome
- Functional Neuromuscular Electrical Stimulation (FNMES)
- Gastric Electrical Stimulation (GES)
- Home Health Services/Home Health Care
- Home Hemodialysis
- · Home Hospice
- Home Infusion Therapy (HIT)
- Hospice
- Hyperbaric Oxygen (HBO2) Therapy
- Mastopexy
- Meniscal Allografts and Other Meniscal Implants
- Nasal and Sinus Surgery
- Non-Emergent Air Ambulance: Fixed Wing
- Occipital Nerve Stimulation
- Orthognathic Surgery
- Orthopedic Applications of Stem-Cell Therapy
- Outpatient provider administered drug therapies, Cellular Immunotherapy, Gene Therapy and other medical benefit drug therapies
- Percutaneous and Implanted Nerve Stimulation and Neuromodulation
- Private Duty Nursing
- · Reduction Mammaplasty
- Sacral Nerve Neuromodulation/Stimulation
- Sleep Study: Facility based polysomnography/pap titration)
- Spinal Cord Stimulation
- Surgical Deactivation of Headache Trigger Sites
- Transitional Care
- Transplant Evaluation
- Vagus Nerve Stimulation (VNS)

Obtain prior authorization through AIM Specialty Health for these categories:

- Advanced Imaging Services: MRI, MRA, PET, PET-CT, CT, CTA, Nuclear Medicine (Excludes Cardiac Advanced Imaging)
- Interventional Pain Management
- Joint & Spine Surgery
- Lumbar Spinal Fusion
- Molecular and Genetic Lab
- Radiation Oncology

Refer to the <u>Commercial Outpatient Medical Surgical Prior Authorization</u>
<u>Code List</u> for codes that may require prior authorization.

*Note: For some members, pre-notification, rather than prior authorization may be required for some advanced imaging services. This may involve obtaining a Radiology Quality Initiative (RQI) number through AIM Specialty HealthSM. When you check eligibility and benefits, you'll be advised if pre-notification is required, and utilization managements vendors that must be used, if applicable.

Inpatient Medical/Surgical Facility Admissions, Including Transfers:

- Acute Inpatient Admissions
- Sub-Acute Admissions
 - Long term Acute Care Admissions
 - Skilled Nursing Facility/Extended Care Facility
 - Rehabilitation Facility
- Inpatient Transfers
 - o Coordinated Home Care
 - Home Infusion Therapy (HIT)
 - Partial Hospitalization
 - Private Duty Nursing
 - Hospice Care

Refer to the Provider Manual in the <u>Standards and Requirements</u> <u>section</u> of our Provider website for more information.

Behavioral Health

Inpatient: Mental Health and Chemical Dependency Facility Inpatient Admissions:

- Inpatient and Partial Hospitalization
- Residential Treatment Center (RTC)

Outpatient: Mental Health and Chemical Dependency Services

- Applied Behavioral Analysis (ABA)
- Electroconvulsive Therapy
- Intensive Outpatient Treatment
- Neuropsychological Testing
- Psychological Testing
- Repetitive Transcranial Magnetic Stimulation

Refer to the <u>Behavioral Health Prior Authorization Code List</u> for codes that may require prior authorization.

Specialty Pharmacy

- Infusion Site of Care
- Provider Administered Drug Therapies

Refer to the <u>Specialty Pharmacy Prior Authorization Drug List</u> for codes that may require prior authorization.

Exceptions and Reminders

- This information does not apply to HMO members.
- For Federal Employee Program® (FEP®) members, check eligibility and benefits by calling 800-972-8382.
 For FEP members, you must call the local Blue Plan where services are being rendered for prior authorization, regardless of the state in which the member is insured.
- For out-of-area (BlueCard®) members, call the BlueCard Eligibility® Line at 800-676-2583 to check eligibility and benefits. For prior authorization information, use the online router tool to go to the member's Home Plan website.

Please note that checking eligibility and/or benefits or the fact that prior authorization or pre-notification has been obtained or an RQI number has been issued is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage, including, but not limited to, exclusions and limitations applicable on the date services were rendered. Certain employer groups may require prior authorization for imaging services from other vendors. If you have any questions, call the number on the member's ID card.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. AIM Specialty Health (AIM) is an independent company that has contracted with BCBSIL to provide utilization management services for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.