

Preauthorization Requirements - HMO Colorado

The table below is a **partial listing** of preauthorization requirements for services and procedures related to the HMO Colorado health care plan offered to CU members through Anthem Blue Cross and Blue Shield.

Preauthorized requirements are subject to change. We encourage your physician to call the prior authorization phone number on the back of your health plan ID card to confirm if a particular test, equipment, service or procedure requires preauthorization before receiving services or treatment.

For services listed where no prior authorization is required, you may want to confirm benefits with customer service at the phone number on your ID card prior to obtaining services. Services must be medically necessary and are subject to Anthem's medical policy.

Services and Procedures	Preauthorization Requirement
Behavioral Health (mental health) Care	
Inpatient/outpatient detoxification services	Yes
Inpatient alcohol/chemical dependency rehabilitation services (includes Partial Hospital Days level of care)	Yes
Outpatient alcohol/chemical dependency rehabilitation therapy (includes Intensive Outpatient and Outpatient)	Yes
Psychological testing	Yes
Inpatient behavioral health (mental health) care services	Yes
Outpatient behavioral health (mental health) care services	Yes
Diagnostic Imaging and Testing	Preauthorization is required on approximately 40 diagnostic imaging and testing procedures. The items listed below are most frequently asked about. Your provider should contact Anthem to confirm whether items not listed here require preauthorization.
Amniocentesis	No
Bone density study	No
Colonoscopy	No
CT/CAT Scan, PET and SPECT	Yes
Genetic testing	Yes
Mammography	No
MRI	Yes
Obstetrical ultrasound	No

Ultrasound (non-obstetrical)	No
“DME” durable medical equipment (equipment that supports illness or injury, may be used at home, and is designed to withstand repeated use)	Providers must obtain preauthorization for approximately 30 items. The items listed below are most frequently asked about. Your provider should contact Anthem to confirm if items not listed here require preauthorization.
Bed support surfaces	No
Custom back brace	No
Knee Brace	Yes
Hospital Bed	Yes
Prosthesis	Yes
Scooter	Yes
Wheelchair	No (only electric wheelchair requires prior auth)
Insulin Pump	Yes
Hospital Admission to treat any medical condition at an acute care (general) hospital.	Yes
Home health care	Yes
Long-term care (facility-based care for members with complex medical needs)	Yes
Maternity care	No
Office-based outpatient services	Most office-based procedures do not require preauthorization, although some do. The items listed below are most frequently asked about. Your provider should contact Anthem to confirm if items not listed here require preauthorization.
Biopsy of skin lesion	No
Cardiac rehabilitation (therapy after a major heart event)	No
Chiropractic Care	No
Glucose monitoring by continuous recording	Yes
Laser treatment of veins and capillaries or resurfacing of the skin, including tattoo removal	Yes
Neuropsychological testing	No
Pulmonary rehabilitation (therapy to improve breathing)	Yes
Routine lab work	No
Routine x-ray	No
Outpatient services in a facility other than a doctor’s office	Many outpatient services, especially those that are invasive (those that involve breaking the skin or entering the body), require preauthorization. Also note many services in this section may be performed in your doctor’s office and would still require preauthorization. The items listed below are most frequently asked about. Your provider should contact

	Anthem to confirm if items not listed here require preauthorization.
Chiropractic care	Yes through Landmark
Dietary education	No
Implantable hearing device, such as a cochlear implant	Yes
IV infusion therapy	Yes
Second opinion	No
Outpatient surgery	Anthem requires preauthorization for about 30 procedures. The items listed below are most frequently asked about. Your provider should contact Anthem to confirm if items not listed here require preauthorization.
Back Surgery	Yes
Cosmetic and/or restorative or reconstructive surgery	Yes
Hysterectomy	No if outpatient
Knee arthroscopy	No
Maxillofacial surgery (surgery on bones of the face, jaw, cheeks)	Yes
Morbid obesity surgery	Yes
Tempromandibular joint (TMJ) surgery	Yes
Pharmacy	As a general rule, Anthem's <i>medical benefit</i> coverage includes medications administered and/or dispensed in a physician's office or other treatment setting. Most of these medications <i>do not</i> require preauthorization. Some medications under your <i>pharmacy</i> benefit, which is administered by Anthem Prescription Management (APM), do not require preauthorization, but must be dispensed from a pharmacy instead of your doctor's office. Your provider must contact Anthem or APM to confirm if the medication being prescribed is a covered benefit and/or requires preauthorization.
Physical or cardiac rehabilitation	No
Skilled nursing home (facility-based care for unstable or chronic conditions)	Yes
Sub-acute care (medical care of a level less than a hospital, but more than a skilled nursing facility)	Yes
Therapies	
Alcohol/chemical dependency rehabilitation therapy	Yes
Nerve block	No
Occupational therapy (therapy to improve the ability to live independently)	No
Pain Management	No
Physical or cardiac therapy	No

Pulmonary rehabilitation (therapy to improve breathing)	No
Radiation therapy	No
Speech therapy	Yes
Transplants	Transplants require preauthorization and typically require extensive pre-procedure evaluation. Once an organ or tissue is located and the procedure is performed, extensive follow-up care is needed. Because each situation is different, your provider must contact Anthem to confirm available benefits. Services must be provided by in-network facilities and providers.