State Health Benefit Plan Precertification List
(As of January 1, 2017)

To Obtain Pre-certification for SHBP:

- Both in-network and out-of-network providers must call the BCBSGa Personal Health Coach Team at 1-855-668-6442.
- You can use Interactive Care Reviewer (ICR), our self-service provider web tool, to request inpatient and outpatient¹ precertifications, as well as inquire to find information on a precert previously submitted via phone, fax, ICR, or other online tool! Access our ICR via the Availity Web Portal* at www.availity.com.

¹Note: ICR is not currently available for BlueCard®; requests involving Behavioral Health or transplant services; or services administered by AIM Specialty HealthSM.

Eligibility and Benefits:

- Eligibility and benefits can be verified by accessing the BCBSGa/BCBSHP web site bcbsga.com or by calling the number on the back of the member’s identification card. Service precertification is based on member’s benefit plan/eligibility at the time the service is reviewed/approved. The provider is responsible for verification of member eligibility and covered benefits.
- It is your responsibility to notify BCBSGa of certain services and obtain precertification. Except in the case of an emergency, failure to obtain precertification prior to rendering the designated services listed below will result in denial of reimbursement. In order to avoid denial of services for hospital/medical benefits, please call before the service is rendered or no later than two (2) business days after an emergency admission or as soon as is reasonably possible.
- If procedures are not pre-certified they will be denied for lack of precertification. Any services or days determined to be not medically necessary will not be covered. For in-network providers, there are no late notice penalties. For out-of-network providers, the penalty is 50% of eligible charges. If you are in doubt about whether a service is covered and requires pre-certification, please call 1-855-668-6442. Precertification does not guarantee eligibility or payment.

Services that Require Pre-certification:

- **AIM Specialty HealthSM (AIM)**
  Diagnostic imaging management services are provided by AIM Specialty HealthSM (AIM), a separate company, for certain health plan members. AIM is a nationally recognized leader in specialty benefits management. To submit your request for any of the services below, contact AIM online via AIM’s ProviderPortalSM at aimspecialtyhealth.com/goweb. From the drop down menu, select BCBSGa. You may also call AIM toll free at 1-866-714-1103, Monday – Friday, 8:00 a.m. – 6:00 p.m. ET.
  - Radiology – Diagnostic Services (CT scan, CTA, MRA, MRI, PET Scan)
  - Cardiac – Diagnostic Services (Echocardiography or Nuclear Cardiology)
  - Sleep Testing and Therapy Services
  - All Radiation Therapy

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- **Behavioral Health Services**
  Please call 1-855-679-5725 for Behavioral Health Precertification
  - Inpatient Mental Health/Substance Abuse (in-network/out-of-network) within 24 hours of admission. **Residential MH/SA is not covered.**
  - Outpatient MH/SA (out-of-network only) – 13 or more visits requires review

- **Inpatient Services**
  - Acute Inpatient (including transplants)
  - Sub-acute inpatient (Skilled Nursing and Long Term Care)
  - Inpatient Rehabilitation
  - Maternity delivery if inpatient stay extends 48 hours for NVD and 96 hours following caesarean
  - Out-of-network or out-of-area non-emergency services

- **Outpatient and/or other Inpatient Services**
  - Ambulance Non-Emergency Transport (except ground ambulance transfers from one acute facility to another)
  - Ankle replacement
  - Applied Behavioral Analysis (ABA) Therapy
  - Back pain (chronic), percutaneous neurolysis
  - Blepharoplasty, blepharoptosis repair, and brow lift
  - Bone Growth Stimulator: Electrical or Ultrasound
  - Breast procedures including reduction mammaplasty, reconstructive surgery, implants, and other breast procedures
  - Cardiac resynchronization therapy for heart failure treatment
  - Cardiac transcatheter closure of patent foramen ovale and left atrial appendage for stroke prevention
  - Cardiac ventricular septal defect transmyocardial/perventricular device closure
  - Cardio-reduction, partial left ventriculectomy
  - Cardioverter defibrillators, implantable (ICD) and wearable
  - Clinical Trials
  - Cochlear implants and auditory brainstem implants
  - Communication/speech generating devices, augmentative and alternative (ACC)
  - Cosmetic and reconstructive services of the head and neck; trunk and groin
  - Cosmetic and reconstructive services, skin related
  - Dental care due to accident or injury
  - Durable Medical Equipment (see CPT code list)
  - Endoscopy, Capsule
  - Functional electrical stimulation (FES); threshold electrical stimulation (TES)
  - Genetic testing for cancer susceptibility, BRCA Genetic Testing Program
  - Hearing aids, bone-anchored and implantable, middle ear
  - Heart monitors, real-time remote
  - Hip Replacement Surgery
  - Home Health Care Nutritional/Enteral Therapy
  - Home Health Care; Home Infusion
  - Home phototherapy for neonatal hyperbilirubinemia
  - Hyperbaric oxygen therapy (systemic/topical)
  - Hyperhidrosis
  - Hysterectomy, Abdominal and vaginal
  - Infusion pumps, implantable
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- Infusion pumps, insulin, external (portable) continuous
- Intervertebral discs, cervical artificial and lumbar artificial
- Knee Arthroplasty, Total and Bicompartmental
- Mandibular/maxillary (orthognathic) surgery
- Nasal surgery for the treatment of obstructive sleep apnea (OSA) and radiofrequency ablation of nasal turbinates for nasal obstruction with or without OSA
- Obstructive sleep apnea treatment in adults
- Obstructive sleep apnea; oral, pharyngeal and maxillofacial surgical treatment
- Oral Surgery
- Oscillatory devices for airway clearance including high frequency chest compression (Vest™ airway clearance system) and intrapulmonary percussive ventilation (IPV)
- Penile prosthesis implantation
- Powered mobility devices
- Prosthesis, microprocessor controlled lower limb
- Prosthetic devices, myoelectric upper extremity
- Radiofrequency volumetric tissue reduction (RFVTR) of the soft palate, uvula, or tongue base (including Coblation and Somnoplasty)
- Sacral nerve stimulation as treatment of neurogenic bladder secondary to spinal cord injury
- Sacroiliac joint fusion
- Septoplasty
- Shoulder Arthroplasty
- Sinuplasty, balloon
- Sleep disorder testing
- Specialty Medications/Injectable Medications
- Spinal artificial intervertebral discs
- Spinal cord stimulators (SCS), implanted
- Spinal percutaneous and endoscopic procedures (vertebroplasty, kyphoplasty, sacroplasty)
- Spinal stenosis, implanted devices
- Spine and joints other than the knee, manipulation under anesthesia
- Spine surgery lumbar – laminectomy, fusion and artificial intervertebral disc
- Standing frames
- Stereotactic radiosurgery (SRS) and stereotactic body radiotherapy (SBRT)
- Temporomandibular disorders
- Transplant evaluation, pre-determination, inpatient admits
- Uterine fibroid ablation, MRI guided high intensity focused ultrasound
- Uvulopalatopharyngoplasty
- Vagus nerve stimulation
- Varicose vein (lower extremity) treatment
- Wheeled mobility devices, ultra lightweight manual wheelchairs

**Specialty Medications**

Specialty Medications may be covered under the medical benefit with BCBSGa, the pharmacy benefit through Express Scripts™ or both. Please follow the instructions below to review the specialty medications by location document:

Click [here](#) and then click on the “Medical/Pharmacy Drug List”

To verify if pre-certification is required for a specific specialty medication under the medical plan, please call 1-855-668-6442.
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Pre-Determination:
For medical necessity for coverage for additional items if a member or provider requests are available. Though not required, a
pre-determination of benefits is strongly recommended before incurring medical costs for certain services. The following are some
examples of services, but not limited to:

- Pre-Surgery/Pre-admission Testing
- Infertility Services (Once diagnosed, treatment is not covered)
- Treatment by assistant surgeons or co-surgeons
- Treatment of TMJ
- Allergy testing
- Occupational therapy
- Speech therapy
- Physical therapy
- Reconstructive services

DISCLAIMER: Services listed require precertification and will be denied if rendered without the appropriate precertification
regardless of whether rendered in or out-of-network.