

FEP Blue Focus Prior Approval List

For enrollment codes 131, 132, 133 (located on the member’s ID card)

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Durable Medical Equipment and Prosthetic Devices

Specialty Durable Medical Equipment (DME)

Rental or purchase, to include specialty hospital beds, deluxe wheelchairs, power wheelchairs and mobility devices, and related supplies.

Procedure Codes E0265, E0266, E0270, E0277, E0296, E0297, E0300, E0301, E0302, E0303, E0304, E0316, E0328, E0329, E0371, E0372, E0373, E0983, E0984, E0985, E0986, E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009, E1010, E1012, E1230, E1239, E2310, E2311, E2312, E2313, E2321, E2322, E2323, E2324, E2325, E2326, E2327, E2328, E2329, E2330, E2331, E2340, E2341, E2342, E2343, E2351, E2358, E2359, E2360, E2361, E2362, E2363, E2364, E2365, E2366, E2367, E2368, E2369, E2370, E2371, E2372, E2373, E2374, E2375, E2376, E2377, E2378, E2381, E2382, E2383, E2384, E2385, E2386, E2387, E2388, E2389, E2390, E2391, E2392, E2394, E2395, E2396, E2397, E2398, K0010, K0011, K0012, K0013, K0014, K0108, K0733, K0800, K0801, K0802, K0806, K0807, K0808, K0812, K0813, K0814, K0815, K0816, K0820, K0821, K0822, K0823, K0824, K0825, K0826, K0827, K0828, K0829, K0830, K0831, K0835, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0843, K0848, K0849, K0850, K0851, K0852, K0853, K0854, K0855, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0891, K0898, K0899

Prosthetic Devices (External)

Including microprocessor-controlled limb prosthesis; electronic and externally powered prosthesis

Procedure Codes L5000, L5010, L5020, L5050, L5060, L5100, L5105, L5150, L5160, L5200, L5210, L5220, L5230, L5250, L5270, L5280, L5301, L5312, L5321, L5331, L5341, L5500, L5505, L5510, L5520, L5530, L5535, L5540, L5560, L5570, L5580, L5585, L5590, L5595, L5600, L5610, L5611, L5613, L5614, L5616, L5617, L5618, L5620, L5622, L5624, L5626, L5628, L5629, L5630, L5631, L5632, L5634, L5636, L5637, L5638, L5639, L5640, L5642, L5643, L5644, L5645, L5646, L5647, L5648, L5649, L5650, L5651, L5652, L5653, L5654, L5655, L5656, L5658, L5661, L5665, L5666, L5668, L5670, L5671, L5672, L5673, L5676, L5677, L5678, L5679, L5680, L5681, L5682, L5683, L5684, L5685, L5686, L5688, L5690, L5692, L5694, L5695, L5696, L5697, L5698, L5699, L5700, L5701, L5702, L5703, L5704, L5705, L5706, L5707, L5710, L5711, L5712, L5714, L5716, L5718, L5722, L5724, L5726, L5728, L5780, L5781, L5782, L5785, L5790, L5795, L5810, L5811, L5812, L5814, L5816, L5818, L5822, L5824, L5826, L5828, L5830, L5840, L5845, L5848, L5850, L5855, L5856, L5857, L5858, L5859, L5910, L5920, L5925, L5930, L5940, L5950, L5960, L5961, L5962, L5964, L5966, L5968, L5969, L5970, L5971, L5972, L5973, L5974, L5975, L5976, L5978, L5979, L5980, L5981, L5982, L5984, L5985, L5986, L5987, L5988, L5990, L5999, L6000, L6010, L6020, L6026, L6050, L6055, L6100, L6110, L6120, L6130, L6200, L6205, L6250, L6300, L6310, L6320, L6350, L6360, L6370, L6380, L6382, L6384, L6386, L6388, L6400, L6450, L6500, L6550, L6570, L6580, L6582, L6584, L6586, L6588, L6590, L6600, L6605, L6610, L6611, L6615, L6616, L6620, L6621, L6623, L6624, L6625, L6628, L6629, L6630, L6632, L6635, L6637, L6638, L6640, L6641, L6642, L6645, L6646, L6647, L6648, L6650, L6655, L6660, L6665, L6670, L6672, L6675, L6676, L6677, L6680, L6682, L6684, L6686, L6687, L6688, L6689, L6690, L6691, L6692, L6693, L6694, L6695, L6696, L6697, L6698, L6703, L6704, L6706, L6707, L6708, L6709, L6711, L6712, L6713, L6714, L6715, L6721, L6722, L6805, L6810, L6880, L6881, L6882, L6883, L6884, L6885, L6890, L6895, L6900, L6905, L6910, L6915, L6920, L6925, L6930,

L6935, L6940, L6945, L6950, L6955, L6960, L6965, L6970, L6975, L7007, L7008, L7009, L7040, L7045, L7170, L7180, L7181, L7185, L7186, L7190, L7191, L7259, L7400, L7401, L7402, L7403, L7404, L7405, L7499, L7510, L7520, L7600, L7700, L8000, L8001, L8002, L8010, L8015, L8020, L8030, L8031, L8032, L8033, L8035, L8039, L8040, L8041, L8042, L8043, L8044, L8045, L8046, L8047, L8048, L8049, L8608, L8701, L8702

Surgical Services

Surgery for Morbid Obesity

Benefits may only be available when provided at a Blue Distinction Specialty Care Center for bariatric surgery.

Procedure Codes 43644, 43645, 43770, 43773, 43775, 43845, 43846, 43847, 43848

Surgery for Breast Reduction/Augmentation **Not** Related to Treatment of Cancer

Procedure Codes 15777, 19316, 19318, 19325, 19328, 19330, 19340, 19342

Gender Reassignment Surgery

The prior approval request must include all surgical procedures anticipated/planned to change the member's biological gender, where the procedure(s) will be performed, and the estimated procedure date(s).

For Female-to-Male Gender Reassignment Surgery—Procedure Codes 19303, 53430, 54400, 54401, 54405, 54660, 55175, 55180, 55899, 55980, 56625, 57110, 58150, 58180, 58260, 58262, 58275, 58290, 58291, 58541, 58542, 58543, 58544, 58550, 58552, 58553, 58554, 58570, 58571, 58572, 58573, 58661, 58720, C1813, C2622

For Male-to-Female Gender Reassignment Surgery—Procedure Codes 53410, 54125, 54520, 54690, 55970, 56805, 57291, 57292, 57335, 58999

Electrolysis Performed at The Operative Site for A Gender Reassignment Surgery—Procedure Code 17380

Surgical Correction of Congenital Anomalies

Procedure Codes 23400, 27158, 27258, 27259, 27727, 31300, 33813, 33814, 34707, 34708, 35180, 35182, 35184, 40700, 40701, 40702, 40720, 40761, 42200, 42205, 42210, 42215, 42220, 42225, 43313, 43314, 44126, 44127, 44128, 47700, 50070, 50135, 50405, 52400, 61613, 61680, 61682, 61684, 61686, 61690, 61692, 61705, 61708, 61710, 63250, 63251, 63252, 69320, 93580, 93581, D7961, D7962

Oral Maxillofacial Surgeries/Surgery on The Jaw, Gums, Lips, Tongue, Roof and Floor of the Mouth, and Related Procedures

Procedure Codes 0510T, 0511T, 21010, 21050, 21060, 21070, 21073, 21193, 21194, 21195, 21196, 21198, 21199, 21206, 21210, 21215, 21240, 21242, 21243, 21244, 21245, 21246, 21247, 21248, 21249, 21440, 21445, 21452, 21454, 21461, 21462, 21465, 21470, 21480, 21485, 21490, 21497, 29804, 40510, 40520, 40525, 40527, 40530, 40650, 40652, 40654, 40800, 40801, 40804, 40805, 40830, 40831, 41000, 41005, 41006, 41007, 41008, 41009, 41015, 41016, 41017, 41018, 41250, 41251, 41252, 42180, 42182

Other Surgeries

- Orthognathic surgery procedures, bone grafts, osteotomies and surgical management of the temporomandibular joint (TMJ)
- Orthopedic procedures: hip, knee, ankle, spine, shoulder and all orthopedic procedures using computer-assisted musculoskeletal surgical navigation
- Reconstructive surgery for conditions other than breast cancer
- Rhinoplasty
- Septoplasty
- Varicose vein treatment

Procedure Codes 0524T, 15769,15771, 15772, 15773, 15774, 19350, 19355, 19357, 19361, 19364, 19367, 19368, 19369, 19380, 19396, 20650, 20662, 20663, 20665, 20670, 20680, 20690, 20692, 20693, 20694, 20696, 20697, 20900, 20902, 20920, 20922, 20924, 20930, 20931, 20936, 20937, 20938, 20939, 20955, 20956, 20962, 20970, 20985, 21026, 21030, 21031, 21032, 21034, 21040, 21044, 21045, 21046, 21047, 21048, 21049, 21116, 21120, 21121, 21122, 21123, 21125, 21127, 21137, 21138, 21139, 21141, 21142, 21143, 21145, 21146, 21147, 21150, 21151, 21154, 21155, 21159, 21160, 21172, 21175, 21179, 21180, 21181, 21182, 21183, 21184, 21188, 21208, 21209, 21230, 21235, 21255, 21256, 21260, 21261, 21263, 21267, 21268, 21270, 21275, 21280, 21282, 21295, 21296, 21740, 21742, 21743, 22010, 22015, 22100, 22101, 22102, 22103, 22110, 22112, 22114, 22116, 22206, 22207, 22208, 22210, 22212, 22214, 22216, 22220, 22222, 22224, 22226, 22532, 22533, 22534, 22548, 22551, 22552, 22554, 22556, 22558, 22585, 22586, 22590, 22595, 22600, 22610, 22612, 22614, 22630, 22632, 22633, 22634, 22800, 22802, 22804, 22808, 22810, 22812, 22818, 22819, 22830, 22840, 22841, 22842, 22843, 22844, 22845, 22846, 22847, 22848, 22849, 22850, 22852, 22853, 22854, 22855, 22856, 22857, 22858, 22859, 22861, 22862, 22864, 22865, 22867, 22868, 22869, 22870, 23020, 23035, 23040, 23044, 23100, 23101, 23105, 23106, 23107, 23120, 23125, 23130, 23170, 23172, 23174, 23180, 23182, 23184, 23190, 23195, 23395, 23397, 23405, 23406, 23410, 23412, 23415, 23420, 23430, 23440, 23450, 23455, 23460, 23462, 23465, 23466, 23470, 23472, 23473, 23474, 23480, 23485, 23490, 23491, 23700, 23800, 23802, 23900, 23920, 23921, 24134, 24140, 24344, 24346, 24498, 26500, 26502, 26541, 26542, 26545, 26992, 27000, 27001, 27003, 27005, 27006, 27025, 27027, 27030, 27033, 27036, 27050, 27052, 27054, 27057, 27070, 27071, 27080, 27097, 27098, 27100, 27105, 27110, 27111, 27120, 27122, 27125, 27130, 27132, 27134, 27137, 27138, 27140, 27146, 27147, 27151, 27156, 27161, 27165, 27170, 27175, 27176, 27177, 27178, 27179, 27181, 27185, 27187, 27275, 27279, 27280, 27282, 27284, 27286, 27290, 27295, 27303, 27305, 27306, 27307, 27325, 27326, 27330, 27331, 27332, 27333, 27334, 27335, 27350, 27360, 27380, 27381, 27385, 27386, 27390, 27391, 27392, 27393, 27394, 27395, 27396, 27397, 27400, 27403, 27405, 27407, 27409, 27412, 27415, 27416, 27418, 27420, 27422, 27424, 27425, 27427, 27428, 27429, 27430, 27435, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27448, 27450, 27454, 27455, 27457, 27465, 27466, 27468, 27470, 27472, 27475, 27477, 27479, 27485, 27486, 27487, 27495, 27496, 27497, 27498, 27499, 27570, 27580, 27598, 27600, 27601, 27602, 27605, 27606, 27607, 27612, 27620, 27625, 27626, 27640, 27641, 27650, 27652, 27654, 27656, 27658, 27659, 27664, 27665, 27675, 27676, 27680, 27681, 27685, 27686, 27687, 27690, 27691, 27692, 27695, 27696, 27698, 27700, 27702, 27703, 27705, 27707, 27709, 27712, 27715, 27720, 27722, 27724, 27725, 27726, 27730, 27732, 27734, 27740, 27742, 27745, 27860, 27870, 27871, 27889, 27892, 27893, 27894, 27899, 28005, 28238, 29800, 29806, 29807, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29862, 29863, 29866, 29867, 29868, 29871, 29873, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889,

29891, 29895, 29897, 29898, 29899, 29914, 29915, 29916, 30400, 30410, 30420, 30430, 30435, 30450, 30460, 30462, 30520, 36465, 36466, 36468, 36470, 36471, 36473, 36474, 36475, 36476, 36478, 36479, 36482, 36483, 37500, 37700, 37718, 37722, 37735, 37760, 37761, 37765, 37766, 37780, 37785, 40490, 40500, 40806, 40808, 40810, 40812, 40814, 40816, 40819, 40820, 41010, 41100, 41105, 41108, 41110, 41112, 41113, 41114, 41115, 41116, 41120, 41130, 41150, 41520, 42000, 42100, 42104, 42106, 42107, 42120, 42140, 42145, 42160, 42300, 42305, 42310, 42320, 42330, 42335, 42340, 67971, 67973, 67974, 67975, 69310, 69641, 69642, 69643, 69644, 69646

Transplants

Blood or Marrow Stem Cell Transplants

Procedure Codes 38240, 38241, S2142, S2150

Note: This also includes clinical trials for blood or marrow stem cell transplants

Artificial Heart Transplant

Procedure Codes 33927, 33928, 33929

Organ/Tissue Transplants

Procedure Codes 0584T, 0585T, 0586T, 32851, 32852, 32853, 32854, 33935, 33945, 44135, 44136, 47135, 47136, 48160, 48554, G0341, G0342, G0343, S2053, S2054, S2060, S2152

Travel Benefits

Procedure Codes S9992, S9994

Genetic Testing

BRCA Genetic Testing and Testing for Large Genomic Rearrangements in the BRCA1 and BRCA2 Genes

Procedure Codes 81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217, 0138U

Genetic Testing for the Diagnosis and/or Management of an Existing Medial Condition

G0452, G9143, S3722, S3800, S3840, S3841, S3842, S3844, S3845, S3846, S3849, S3850, S3852, S3853, S3854, S3861, S3865, S3866, S3870, 0001M, 0001U, 0002M, 0002U, 0003M, 0003U, 0004M, 0005U, 0006M, 0007M, 0008U, 0009M, 0009U, 0010U, 0011M, 0012M, 0012U, 0013M, 0013U, 0014U, 0016M, 0017M, 0016U, 0017U, 0018U, 0019U, 0021U, 0022U, 0023U, 0026U, 0027U, 0029U, 0030U, 0031U, 0032U, 0033U, 0034U, 0036U, 0037U, 0039U, 0040U, 0067U, 0069U, 0070U, 0071U, 0072U, 0073U, 0074U, 0075U, 0076U, 0078U, 0079U, 0080U, 0081U, 0087U, 0088U, 0089U, 0090U, 0091U, 0092U, 0094U, 0101U, 0102U, 0103U, 0111U, 0113U, 0118U, 0120U, 0129U, 0130U, 0131U, 0132U, 0133U, 0134U, 0135U, 0136U, 0137U, 0153U, 0154U, 0155U, 0156U, 0157U, 0158U, 0159U, 0160U, 0161U, 0162U, 0168U, 0169U, 0170U, 0171U, 0172U, 0173U, 0174U, 0175U, 0177U, 0179U, 0180U, 0181U, 0182U, 0183U, 0184U, 0185U, 0186U, 0187U, 0188U, 0189U, 0190U, 0191U, 0192U, 0193U, 0194U, 0195U, 0196U, 0197U, 0198U, 0199U, 0200U, 0201U, 0203U, 0204U, 0205U, 0208U, 0209U, 0211U, 0212U, 0213U, 0214U, 0215U, 0216U, 0217U, 0218U, 0221U, 0229U, 0230U, 0231U, 0232U, 0233U, 0234U, 0235U, 0236U, 0237U, 0238U, 0239U, 0242U, 0244U, 0245U, 81120, 81121, 81161, 81168, 81170, 81171, 81172, 81173, 81174, 81175, 81176, 81177, 81178, 81179, 81180, 81181, 81182, 81183,

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Radiology, High Technology

Magnetic Resonance Imaging (MRI), Computed Tomography (CT) Scan, and Positron Emission Tomography (PET) Scan

High technology radiology related to immediate care of a medical emergency or accidental injury does not require prior approval.

Procedure Codes 0042T, 0332T, 0398T, 0501T, 0502T, 0503T, 0504T, 0588T, 0609T, 0610T, 0611T, 0612T, 0633T, 0634T, 0635T, 0636T, 0637T, 0638T, 70336, 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70540, 70542, 70543, 70544, 70545, 70546, 70547, 70548, 70549, 70551, 70552, 70553, 70554, 70555, 70557, 70558, 70559, 71250, 71260, 71270, 71271, 71275, 71550, 71551, 71552, 71555, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158, 72159, 72195, 72196, 72197, 72198, 72191, 72192, 72193, 72194, 73200, 73201, 73202, 73206, 73218, 73219, 73220, 73221, 73222, 73223, 73225, 73700, 73701, 73702, 73706, 73718, 73719, 73720, 73721, 73722, 73723, 73725, 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178, 74181, 74182, 74183, 74185, 74261, 74262, 74263, 75571, 75572, 75573, 75574, 75635, 76376, 76377, 76380, 76390, 76391, 76497, 77011, 77012, 77013, 77014, 77078, 78072, 74712, 74713, 75557, 75559, 75561, 75563, 75565, 76498, 77021, 77022, 77046, 77047, 77048, 77049, 77084, 78071, 78429, 78430, 78431, 78432, 78433, 78434, 78451, 78452, 78469, 78491, 78492, 78494, 78608, 78609, 78811, 78812, 78813, 78814, 78815, 78816, 78830, 78831, 78832, 78835, 78803, C8903, C8905, C8906, C8908, C9762, C9763, G0288, S8092

Other Services Requiring Prior Approval

Air Ambulance Transport (non-emergent)

Procedure Codes A0430, A0431, A0435, A0436

Gene Therapy and Cellular Immunotherapy (e.g., CAR-T and T-Cell Receptor Therapy)

Procedure Codes J3398, J3399, Q2041, Q2042, S2107, 0537T, 0538T, 0539T, 0540T

Applied Behavior Analysis (ABA)

Procedure Codes 0362T, 97151, 97153, 97154, 97155, 97156, 97158

Cardiac Rehabilitation

Procedure Codes 93797, 93798, S9472, G0422, G0423

Cochlear Implants

Procedure Codes 69930, L8614, L8627, L8628, L8615, L8616, L8617, L8618, L8619

Outpatient Intensity-Modulated Radiation Therapy (IMRT)

Prior approval is required for all outpatient IMRT services **except** IMRT related to the treatment of head, neck, breast, prostate or anal cancer. Brain cancer is not considered a form of head or neck cancer; therefore, prior approval is required for IMRT treatment of brain cancer.

Procedure Codes 77301, 77338, 77385, 77386, G6015, G6016

Pulmonary Rehabilitation

Procedure Codes S9473, G0424, G0237, G0238, G0239

Hospice Care

Home hospice, continuous home hospice, or inpatient hospice care services

Inpatient Hospital Admission and Inpatient Residential Treatment Center (RTC) Admission

If pre-certification is not obtained prior to admission, inpatient benefits (i.e., room and board) are not available for inpatient care at the residential treatment center.

Outpatient Residential Treatment Center Care for Any Condition

Revenue Code Range 086X

Prescription Drugs and Supplies, Including Medical Foods Administered Orally

To request prior approval or obtain a list of drugs and supplies that require prior approval, call CVS Caremark (FEP's pharmacy program administrator) at 877-727-3784 from 7:00AM to 9:00PM. Providers may submit prior approval requests securely online. To register for electronic prior authorization (ePA), visit covermymeds.com/epa/caremark/.

When FEP is Not the Primary Payor

When Medicare is the Primary Payor

The table below provides the special situations regarding prior approval and precertification when Medicare is the primary payor.

Service Type	Primary Payor	Precertification	Prior Approval
Inpatient hospital admission	Medicare Part A	No	Not Applicable
Medicare hospital benefits exhausted, and the Medicare lifetime reserve days are not used	Medicare Part A benefits not provided	Yes	Not Applicable
Gender reassignment surgery when performed during an inpatient admission	Medicare Part A	Yes	Yes
Gender reassignment surgery in an outpatient hospital or ambulatory surgical center (ASC)	Medicare Part B	Not Applicable	Yes
Morbid obesity surgery when performed during an inpatient admission	Medicare Part A	No	Yes
Morbid obesity surgery in an outpatient hospital or ambulatory surgical center (ASC)	Medicare Part B	Not Applicable	Yes
Residential treatment center admission - Inpatient	Medicare Part A	Yes	Not Applicable
Residential treatment center – Outpatient Care	Medicare Part B	Not Applicable	Yes

When Another Healthcare Insurance is the Primary Payor

The table below provides the special situations regarding prior approval and precertification when another healthcare insurance is the primary payor.

Service Type	Primary Payor	Precertification	Prior Approval
Inpatient hospital admission	Other Healthcare Insurance	No	Not Applicable
Gender reassignment surgery when performed during an inpatient admission	Other Healthcare Insurance	Yes	Yes
Gender reassignment surgery in an outpatient hospital or ambulatory surgical center (ASC)	Other Healthcare Insurance	Not Applicable	Yes
Morbid obesity surgery when performed during an inpatient admission	Other Healthcare Insurance	No	Yes
Morbid obesity surgery in an outpatient hospital or ambulatory surgical center (ASC)	Other Healthcare Insurance	Not Applicable	Yes
Residential treatment center admission - Inpatient	Other Healthcare Insurance	Yes	Not Applicable
Residential treatment center – Outpatient Care	Other Healthcare Insurance	Not Applicable	Yes