

Appendix XI — Preauthorization Guidelines by Service Type

Appendix XI-A — Preauthorization Guidelines for Healthfirst Medicaid, Child Health Plus, Medicare, and CompleteCare Plans

Preauthorization is not a guarantee of payment. Benefits are determined by the member's eligibility. Policies are subject to change. Written formal referrals are not required for Healthfirst Medicaid, Child Health Plus, Medicare, and CompleteCare members to receive care from in-network specialists.

NC = Not Covered

NA = Not Applicable/No Authorization Required

* Carved out to Fee for Service Medicaid for SSI Medicaid Members

** Carved out to Fee for Service Medicaid

¹ Coverage only applies to pregnant or post-partum women

² Must be performed in a Medicare Certified Facility

³ Certain services require prior authorization. Services that require prior authorization are specifically listed in this grid.

Outpatient Behavioral Health Services and Elective Inpatient Behavioral Health Admissions for members whose PCP is affiliated with Montefiore, Montefiore North and for Medicaid members whose PCP is affiliated with Einstein are delegated to United Behavioral Associates (UBA) 1.800.401.4822

Services That Require Prior Authorization	Medicaid	FHP	CHP	65 Plus Plan	Increased Benefits Plan	Coordinated Benefits Plan	Life Improvement Plan	Maximum Plan	Complete Care
ECT	X	X	X	X	X	X	X	X	X
Neuropsychological Testing	X	X	X	X	X	X	X	X	X
Psychological Testing	X	X	X	X	X	X	X	X	X
Cognitive Skills & Development Testing	X	X	X	X	X	X	X	X	X
Partial Hospitalization	NC	NC	X	X	X	X	X	X	X
Intensive Outpatient Mental Health	NC	NC	X	NC	NC	NC	NC	NC	NC
Comprehensive Psychiatric Emergency Programs (CPEPs)	X	X	X	X	X	X	X	X	X
Day Treatment	NC	NC	X	NC	NC	NC	NC	X	X
Elective Inpatient Behavioral Health Admissions	X	X	X	X	X	X	X	X	X

NC = Not Covered

Appendix XI-B — Preauthorization Guidelines – Leaf Plan

ABA Treatment for Autism Spectrum Disorder	Preauthorization Required
Assistive Device for Autism Spectrum Disorder	Preauthorization Required
Advanced Imaging Services – Freestanding/Outpatient	Care Core Preauthorization Required
All Out-of-Network Services	Preauthorization Required
Ambulatory Surgery Services	Preauthorization Required
Cardiac and Pulmonary Rehabilitation	Preauthorization Required
Chiropractic Services	Please refer to ASH
Cosmetic Services	Preauthorization Required
Dialysis	Preauthorization Required
DME and Breast Pump Rental	Preauthorization Required
EMG/Nerve Conduction Study	Preauthorization Required
Habilitation Services – Physical, Occupational, and Speech Therapy	Preauthorization Required
Hearing Aid and Cochlear Implants	Preauthorization Required
Home Health Care	Preauthorization Required
Hospice Care – Inpatient and Outpatient	Preauthorization Required
Infertility Services	Preauthorization Required
Inpatient Hospital Services and Facility	Preauthorization Required
Rehabilitation Services (Physical, Occupational, and Speech Therapy) – Inpatient and Outpatient	Preauthorization Required
Insulin Pump	Preauthorization Required
Interruption of Pregnancy (Abortion)	Preauthorization Required
Mental Health and Substance Use Services – Admissions and the following outpatient services: ECT, Neuropsychological Testing, Partial Hospital Program, Intensive Outpatient Treatment, and Day Treatment require preauthorization.	Preauthorization Required

<i>Authorization for traditional in-network outpatient behavioral health services provided by Healthfirst providers is not required.</i>	
Non-emergency Ambulance Services	Preauthorization Required
Outpatient Hospital Services and Surgery	Preauthorization Required
Prosthetic (External and Internal)	Preauthorization Required
Skilled Nursing Facility	Preauthorization Required
Transplant	Preauthorization Required

Preauthorization is not a guarantee of payment. Payment by Healthfirst for services provided is contingent upon the member's active membership in Healthfirst at the time of service or when treatment was rendered. Policies are subject to change.

- For preauthorization for the services listed above or to notify Healthfirst of an admission, contact the Medical Management department at **1-888-394-4327**.
- For advance imaging and radiology preauthorization, please contact CareCore at **1-877-773-6964**.
- For preauthorization of surgical procedures of the eye, please contact Block Vision at **1-877-773-6964**.
- For information on chiropractic services, please contact ASH at **1-800-972-4226**.
- For pharmacy authorizations, please contact CVS Caremark at **1-800-294-5979**.