

# Southcoast Health Plan Services Requiring Pre-Certification

The responsibility for obtaining pre-certification for procedures and admissions is yours. If you do not follow these procedures, you will be responsible for a \$250 penalty, plus related charges.

## What is Pre-Certification?

Pre-certification is a review conducted by an independent medical management company to determine if a planned service and/or treatment setting is medically necessary, appropriate and the most cost effective for our members. The process is intended to help you make an informed decision before committing to a specific course of treatment. When you or your physician pre-certify, a qualified clinician reviews the procedure to:

- Determine the level of benefits available under the circumstances
- Present alternatives that may offer better coverage under the plan
- Discuss guidelines and possible alternatives when appropriate

If your physician recommends that you undergo a course of treatment listed below or in your Summary Plan Description (SPD), contact the medical management company, **Conifer Health Solutions**, or be sure your physician contacts Conifer. Physicians are welcome to assist in the process but members retain final responsibility. Keep in mind that pre-certification is a review of medical necessity and setting for care and is subject to the exclusions, limitations and provisions in the SPD.

## If Services Are Not Pre-Certified

**In addition to paying a \$250 penalty, no benefits will be paid if the admission or procedure is not medically necessary.** This penalty and benefit reduction also applies to certain same-day surgery and professional services rendered during an inpatient admission. To make sure you are covered, **call 877-234-5550 and listen for the pre-certification option.**

## Tips for Pre-Certifying Services

**Have the following information ready when you call:**

- Your contact information
- Southcoast Health Plan ID card number
- Name and address of the hospital/facility where you will be receiving care
- Name and telephone number of the prescribing or admitting doctor
- Reason for admission and type of services to be performed

## Timeframes for Managing Pre-Certification Requests

Requests will be reviewed within 3 business days of receipt of the necessary information and within 15 days you or your doctor will be notified of the approval, denial or request for more information.

If more information is needed, you will receive notification in writing of the additional information needed and you and your provider will have 45 calendar days to respond. A decision will be made within 15 days of the receipt of the requested information, or if no response is received, within 15 days after the deadline for a response.

If the need for the service is urgent, Conifer will render a decision as soon as possible, taking into account the medical circumstances, but in any event within 72 hours of receipt by Conifer of requested information.

If the request is urgent and Conifer requires further information to make a decision, they will notify you within 24 hours of receipt of request and you and your provider will have 48 hours to respond. A decision will be made within 48 hours of receipt of the requested information, or if no response is received, within 48 hours after the deadline for a response.

## **CALL 877-234-5550 AND LISTEN FOR THE PRE-CERTIFICATION OPTION.**

*(This is the same number listed on the back of your Southcoast Health Plan ID card.)*

Hours of Operation are Monday through Friday, 8am - 6pm.

On weekends, a nurse will check for messages twice daily.

### **Services Requiring Pre-Certification**

**CALL 877-234-5550 TO PRE-CERTIFY, OR CHECK THAT YOUR PHYSICIAN'S OFFICE PRE-CERTIFIED AND HAS A CONFIRMATION NUMBER.**

#### **Outpatient Services, including the following:**

- Speech therapy – beyond 6 visits
- Occupational therapy – after 12 weeks
- Physical therapy – after 12 weeks
- Home health care – after 12 weeks
- Vein therapy – except in Tier 1 facilities
- Pain treatment (Occipital Nerve Blocks)
- Chemotherapy
- EGD – except in Tier 1 facilities
- Oncology/Hematology office visits – except in Tier 1 facilities
- Dialysis Services at out of network facilities
- Infusions

#### **Diagnostic testing including the following:**

- MRIs/ MRAs – except in Tier 1 facilities
- Nuclear cardiology services – except in Tier 1 facilities
- PET/ CAT scans – except in Tier 1 facilities
- Non-home sleep studies – except in Tier 1 facilities

#### **Prosthetics, Orthotics and**

#### **Durable Medical Equipment**

(Or have your network supplier call)

- Rent, purchase or replace if cost exceeds \$2,500 or rental beyond 3 months

#### **Inpatient and Outpatient**

#### **Same-Day Surgeries, including the following:**

- Orthopedic Surgery
- Cochlear implant
- Cosmetic/reconstructive surgery
- Outpatient transplants
- Bone/spinal stimulation
- Bariatric, including Lap-Band, etc. – except in Tier 1 facilities

#### **All Inpatient Surgery**

Including transplants, congenital anomaly repair and lumbar and cervical fusion

#### **All Hospital/Facility/Hospice Admissions**

Including medical, surgical, behavioral health, substance abuse, skilled nursing and rehabilitation

- At least two weeks prior to any planned surgery or admission
- Within 48 hours of an emergency hospital admission, or as soon as reasonably possible
- For illness or injury to newborns

#### **Maternity**

Including pre- and post-care coordination

- Inpatient admission that exceeds 48 hours for a vaginal delivery or 96 hours for a cesarean delivery

#### **Infertility Services**