NOTIFICATION Required

- Normal newborn deliveries
- Maternity observation

Services Requiring PRIOR AUTHORIZATION

Inpatient
- Inpatient services
- All inpatient hospital admissions, including medical, surgical and rehabilitation
- Behavioral health
- Non-participating providers
- Obstetrical outpatient services, admissions, observations, diabetic education and abnormal newborn deliveries
- Services rendered by specialists for obstetrical patients (i.e. maternal fetal medicine, endocrinologist, cardiologist, etc.)
- Medical detoxification
- Elective transfers for inpatient and/or outpatient services between acute care facilities
- Skilled nursing facility
- Long-Term care initial placement (for acute services if still enrolled with the plan)

Pain Management
- External infusion pumps, spinal cord, neurostimulators, implantable infusion pumps, radiofrequency ablation, nerve blocks and spinal injections

Plastic Surgery
- Surgical services that may be considered cosmetic, including:
  - Blepharoplasty
  - Mastectomy for gynecomastia
  - Mastopexy
  - Maxillofacial—all codes applicable
  - Pancrecctomy
  - Penile prosthesis
  - Plastic surgery/cosmetic dermatology
  - Reduction mammoplasty
  - Septoplasty (except submucous resection, with/without cartilage scoring)

Therapy and Related Services
- Speech therapy—authorization required for all visits after initial evaluation/re-evaluation (private therapy only)
- Speech therapy—after evaluation and 1st 12 visits (facility only)
- Occupational and physical therapy—after evaluation and 1st 12 visits for each modality (facility and private therapy)

Pharmacy and Medications
- Contact PerformRx:
  - Medications (infusions, injectable drugs, chemotherapy, PO and IV) with billed amount equal to or greater than $250
  - Medications not listed on the South Carolina Medicaid Professional Services Fee Schedule are not covered by First Choice

Durable Medical Equipment
- Items with billed charges equal to or greater than $500 (total for each DME item), including prosthetics and orthotics
- All DME leases or rentals
- All enteral nutritional supplements and supplies
- All wheelchair parts (manual and power)
- Insulin pumps
- Thoracolumbosacral orthosis (TLSOs - back braces)
- All unlisted or miscellaneous items regardless of cost

Home-Based Services
- Home health care—after 6 visits
- Home assessment
- Home infusion services and injections (equal to and greater than $250)

Does Not Require Prior Authorization

- Emergency ground transportation (ALS, BLS)
- Emergency department services
- Participating gynecological and specialty physician office visits
- X-rays

Contact National Imaging Associates (NIA):
- Website: www.RadMD.com or call 1-800-424-4895.
- Fax: 1-866-610-2775

Contact PerformRx:
- Phone: 1-800-424-4895
- Fax: 1-888-559-1010

Contact NaviNet to verify member eligibility and claim status:
- navinet.navimedix.com

Disclaimer:
- Telephone or written approval is not a guarantee of reimbursement. All services are subject to retrospective review to validate the request. **This list is NOT all inclusive.**