

PARTNERS National Health Plans of North Carolina, Inc.

~ Prior Authorization Guidelines ~

Cosmetic Procedures (or those potentially cosmetic), such as but not limited to:

- Abdominoplasty
- Blepharoplasty
- Breast Reduction
- Genioplasty/Sliding Osteotomy
- Rhinoplasty
- Strabismus Surgery (for members 12 years or older)

Dental Services for Accidental Injury

Diagnostic Testing

- Neuropsychological Testing
- Psychological Evaluations for medical reasons

Durable Medical Equipment and Prosthetics

- All Rental Items
- Items > \$600.00 (Purchase)
- Penile Implants

External Counterpulsation

Home Health Agency Services

Hospice

Inpatient Admissions

- Scheduled admissions, including acute hospital, rehabilitation facility, hospice and skilled nursing facility

‣ **NOTE:** For urgent/emergency admits (including obstetric admits), prior authorization is NOT required. However, notification to PARTNERS of urgent/emergency admits (including obstetric admits) within 24 hour or the first business day after the admission is required.

Investigational Procedures (or those potentially investigational)

Nonparticipating Providers and Services

Pharmaceuticals (See also PARTNERS formulary)

- Amevive (Afacept)
- Cerezyme

Rehabilitation/Therapy

- Biofeedback
- Cardiac Rehabilitation
- Pulmonary Rehabilitation
- Speech Therapy
- Wound Care Clinic

Surgery

- Capsulotomy (laser)
- Extracapsular cataract extraction with intraocular lens
- Implantable Automatic Cardiac Defibrillators (ICDs)
- Lithotripsy, Extracorporeal for Orthopedic Problems (plantar fasciitis and chronic lateral epicondylitis are the two conditions considered for coverage)
- MOHS Surgery
- Refractive Surgical Procedures
- Retina, central photocoagulation (laser)
- Pan-retinal photocoagulation (PRP, laser)
- Photodynamic Therapy with Visudyne
- Spinal Neurostimulators
- Surgical Treatment of Morbid Obesity
- Surgical Treatment of Sleep Apnea
- Temporomandibular Joint Surgery
- Transplants, Bone Marrow and Organ
- Varicose Vein Treatment
- Vertebroplasty and Kyphoplasty, Percutaneous

Transportation (non-emergency)