

Prior Authorization

Quick Reference Guide

Updated May 2023

IMPORTANT INFORMATION

Prior authorization requests should be submitted on a CareFirst BlueCross BlueShield Community Health Plan Maryland (CareFirst CHPMD) Preauthorization Form along with sufficient clinical documentation via fax. To ensure timeliness of prior auth requests, documentation submitted shall include, but is not limited to:

- Completed Preauthorization Form
- Treatment received to date
- Current medical health status
- A proposed treatment plan, when applicable

Preauthorization request forms available online at:

Maryland Medicaid (CareFirst CHPMD) www.CareFirstchpmd.com For Providers Fax to:

443-552-7407/443-552-7408 (Medical Requests) 844-329-0865 (SNF and Medical Injectable Requests)

Call 800-730-8543 / 410-779-9359 for telephonic inquiries for prior authorization

OUT OF NETWORK

Before seeking Out-of-Network care members should speak with their Primary Care Physician. All services rendered Out of Network require prior authorization, including ambulatory surgical centers (ASC) and freestanding facilities, except for the following:

- Urgent or Emergent care
- MarylandMedicaidSelf-ReferralServices(e.g.School-BasedHealthCenters,family planning services,renal dialysis for CareFirst CHPMD members)

See CareFirst CHPMD member handbook for a full listing of benefits and Self-Referral Services.

CareFirst CHPMD does not require authorization for most office, and routine patient ambulatory based services provided by an in-network providerand/or in network freestanding facility.

AUTHORIZATION NOT REQUIRED

- Acupuncture
- Cardiac Cath
- Chemotherapy (exceptions listed below under Medical Injectables)
- Chiropractic Services (under age 21)
- Cholecystectomy (Laparoscopic)
- Colonoscopy
- Cystoscopy (Cystectomy, w/Urethroscopy, w/Lithotripsy)
- Diabetic Education (Self-Management Training, Nutritional Counseling, Screening and Supplies)
- Dialysis
- DME/DMS Purchase less than \$500
- Endoscopy (EGD, ERCP)
- Emergency/Urgent Care (within U.S.)
- Hearing Screening
- Hysteroscopy/Hysterectomy
- Laboratory/Pathology
- Nutrition Counseling
- Observation

- Office Visits for Physician/Practitioner Services
 - Primary Care including Wellness and/or Preventative Visits, Immunizations/Vaccinations, ESPDT
 - Specialist Consultations/Evaluations
 - Pain Management
 - Consultations/Evaluations
 - Podiatry* including Diabetic care services, and routine foot care for vascular disease affecting lower extremities
 - o Prenatal & Postpartum
- Radiation Therapy
- Radiology screenings including:
 - Bone Density, Mammograms, AAA
 Ultrasound, OB Ultrasound, Low Dose Lung
 CT
- Radiology services performed by freestanding radiology network providers including:
 - CT, CTA, Digital X-ray, MRI, MRA, Nuclear Stress Test, PET, Ultrasound
- Sleep Studies

AUTHORIZATION REQUIRED

Verification of eligibility, and/or benefit information, or authorization is not a guarantee of payment. Authorizations are subject to eligibility requirements and benefit plan limitations and assumes that providers bill with codes billable under the current Medicaid Fee Schedule.

HOME VISITS

Concurrent or additional home visits after the Initial Evaluation visit for:

- Skilled Nursing
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Home Health Aide
- Home Infusion
- Hospice
- Private Duty Nursing under 21 years of age
- Social Work

INPATIENT ADMISSIONS

All elective and emergent admissions, including skilled nursing facility and long-term care facility.

OUTPATIENT

- Acne Surgery
- Audiology
- Bariatric Surgery
- Biofeedback
- Bone Marrow Biopsy, Harvesting, Transplantation
- Bone Stimulation
- Cell Harvesting (stem cell, t-cell)
- Chemodenervation
- Chemical Peels, Dermabrasions
- Clinical Trials
- Cosmetic Surgery
- DME/DMS Purchase over \$500 and all Rentals and/or Repairs

- Facet Joint Injections
- Hearing Aids
- Meals Post-Discharge Hospital or SNF
- Nerve Block
- Neurostimulation
- Oral and Maxillofacial Surgery
- Pain Management Procedures Joint, Trigger Point & Spinal Injections
- Pharmacy see Carve Outs/Delegation below
- Plastic Surgery

- Radiology services performed by outpatient hospital radiology providers including: • CT • CTA • Digital Xray • MRI
 - ∘ MRA ∘ Nuclear Stress Test ∘ PET
 - Ultrasound
- Reconstructions, Reductions, Implantations
- Skin/Subcutaneous Tissue Excisions, Removal of Lesions
- Sterilization
- Telemedicine and remote patient monitoring
- Vein Ablation Therapy, Ligation or Stripping

REHABILITATIVE THERAPIES

Concurrent or additional home visits after the Initial Evaluation visit for:

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- See Carve Outs/Delegation for under 21

- Seating Evaluations
- Pulmonary &/or Cardiac Rehab

Medical Injectables

This list of medical injectables, and their related biosimilars, all require prior authorization.

carefirstchpmd.com --> for providers --> authorization guidelines --> download a copy of our medical preferred drug list

CARVE OUTS/DELEGATION

MARYLAND MEDICAID (CareFirst BlueCross BlueShield Community Health Plan Maryland)

Pharmacy: CVS Caremark Member Services 855-566-8397 CVS Caremark Prior Authorization 877-418-4133

Prior Authorization for Formulary and Non-Formulary products requiring: PA (Prior Authorization), QL (Quantity Limit), or ST (Step Therapy)

Formulary Search Tool online at: www.CareFirstchpmd.com
For Providers → Pharmacy Information → Find a Drug or Pharmacy

Mental Health/Substance Use Disorder: Specialty Behavioral Health

System 800-932-3918

Dental (Children/Pregnant Women): Healthy Smiles 855-934-9812

Vision: Superior Vision 800-879-6901

Non-Emergent Medical Transportation: Local Health Department

Maryland Medical Assistance Beneficiary Hotline 800-492-5231:

- Abortions
- Emergency Transportation
- HIV/AIDS services (viral load, genotypic, phenotypic, or other resistance testing)
- Medical Day Services
- Outpatient PT, OT & ST for recipients under the age of 21
- Personal Care Services
- Speech Augmentation

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