



AmeriHealth New Jersey services that require precertification for all plans

All inpatient services, including but not limited to:

- All inpatient admissions
- Acute rehabilitation
- Extended care facility
- Hospice
- Maternity (prenotification only is requested)
- Routine costs associated with qualifying clinical trials
- Skilled nursing facility
- Surgical/non-surgical (including transplants)

Ambulance services — non-emergency

Diagnostic services

- Nuclear cardiology imaging
- Magnetic resonance imaging (MRI)
- Magnetic resonance angiography (MRA)
- Positron emission tomography (PET scan)
- Computed tomography (CT and CTA scans)
- Echocardiography

Outpatient

- Dental services as a result of accidental injury
- Hyperbaric oxygen therapy
- Infusion therapy in a home setting
- Pain management procedures (paravertebral facet joint injections, transforaminal epidural injections, epidural injections)
- Private duty nursing
- Routine costs associated with qualifying clinical trials
- Sleep Studies (Facility based)

Mental illness care/substance abuse treatment

- Inpatient mental illness care
- Inpatient substance abuse treatment
- Partial inpatient mental illness care/substance abuse treatment
- Intensive outpatient mental illness care/substance abuse treatment

Surgical procedures (regardless of point of service)

- Cataract surgery
- Cochlear implant surgery
- Uvulopalatopharyngoplasty (UPPP or UP3)

Potentially cosmetic/reconstructive procedures, including but not limited to:

- Blepharoplasty/brow lift
- Breast: reconstruction, reduction, augmentation, mammoplasty, mastopexy, insertion, and removal or reinsertion of breast implants; treatment of gynecomastia
- Cervicoplasty
- Chemical peels and dermabrasion
- Excision of excessive skin and/or subcutaneous tissue
- Genetically and bio-engineered skin substitutes for wound care
- Hair transplant
- Injectable dermal fillers
- Keloid removal
- Labiaplasty
- Lipectomy/liposuction or any other excess fat removal procedure
- Orthognathic surgery procedures including but not limited to bone graft, genioplasty, osteoplasty, mentoplasty, and osteotomies
- Otoplasty
- Panniculectomy
- Rhinoplasty
- Rhytidectomy
- Scar revision
- Sex reassignment surgery
- Skin closures including: skin grafts, skin flaps, and tissue grafts
- Varicose vein procedures

Please check individual member benefits for precertification requirements for the following:

Pregnancy-related

- Birth center (prenotification only is requested)

Surgical Procedures

- Abdominoplasty
- Arthroscopic knee surgery/diagnostic arthroscopy
- Bunionectomy
- Dental Services as a result of accidental injury
- Hemroidectomy
- Hernia repair (OON only)

AmeriHealth New Jersey services that require precertification for all plans

- Hysterectomy
- Laproscopic cholecystectomy
- Nasal surgery for submucous resection and septoplasty
- Obesity surgery
- Operative and/or diagnostic endoscopy
- Oral Surgery
- Prostate surgery
- Tonsillectomy and/or adenoidectomy
- Transplants (except cornea)
- Spinal/vertebral surgery
- Infertility services
- Some plans require precert for all outpatient surgical procedures.

Drugs listed which are given by infusion therapy when such infusion therapy is provided in an outpatient facility or a professional provider's office:

- Abraxane®, Actemra®, Aldurazyme®, Alimta®, Ampligen®*, Aralast NP™, Aredia®, Arzerra®, Avastin® (except for certain ophthalmological conditions), Benlysta®, Berinert®, Boniva®, Ceredase®, Cerezyme®, Cinryze®, Elaprase®, Elelyso®, Eloxatin®, Erbitux®, Fabrazyme®, Flolan®, Folutyn®, Glassia™, Halaven™, Hemophilia factors, Herceptin®, Istodax®, IVIG, Jevtana®, Kadcyła™, Lumizyme®, Myozyme®, Nulojix®, Orencia®, Prolastin®C, Provenge®, Remicade®, Remodulin®, Replagal®*, Rituxan®, Soliris®, Temodar®, Tysabri®, VPRIV®, Yervoy™, and Zemaira®

*Pending FDA approval

Injectable medications

- Botox®, Euflexxa™, Gel-one®, Hyalgan®, Kalbitor®, Lucentis®, Macugen®, Makena™, Mozobil®, Orthovisc®**, Prolia®, Stelara®, Supartz®, Synagis®, Synribo™, Synvisc®**, Synvisc-One™**, Xgeva™, and Xolair®

** Preferred brand; choosing one of these preferred brands does not affect the member's cost-sharing for the drug.

Other medication services

- Anesthesia: for outpatient epidural injection and covered general anesthesia services for dental care
- Chemotherapy in an outpatient facility
- Infusion therapy drugs that are newly approved by the FDA during the effective term of the group contract are considered new and emerging technology and will be subject to precertification.

Therapy Services

- Speech Therapy
- Cognitive Rehabilitation Therapy
- Day rehabilitation program

Home Health Care Services (including private duty nursing)

Durable Medical Equipment including non-mandated prosthetic and orthotic devices (excluding ostomy supplies, mandated prosthetic orthotic appliances, oxygen, diabetic supplies, and unit dose medication for nebulizers).

In-network level of benefits for nonparticipating providers for non-emergent services that cannot be obtained in network by members with HMO plans (members without an out-of-network benefit)

Preapproval is not a determination of eligibility or a guarantee of payment. Coverage and payment are contingent upon, among other things, the patient being eligible, i.e., actively enrolled in the health benefits plan when the preapproval is issued and when approved services are provided. Coverage and payment are also subject to limitations, exclusions, and other specific terms of the health benefits plan that apply to the coverage request.

In addition to the preapproval requirements listed above, you should contact AmeriHealth and provide prenotification for certain categories of treatment so you will know prior to receiving treatment whether it is a covered service. The categories of treatment (in any setting) that require prenotification include:

- any surgical procedure that may be considered potentially cosmetic;
- any procedure, treatment, drug, or device that represents "new or emerging technology," including infusion therapy drugs newly approved by the FDA;
- services that might be considered experimental/investigative.

The above list of services requiring preapproval is subject to change. For questions about preapproval, please call Customer Service at **888-YOUR-AH1 (888-968-7241)**.

You can also go to www.amerihealth.com/providers/preapproval to learn more about preapproval requirements for all products.