

# Services Requiring Prior Authorization

## SelectHealth Advantage® (Medicare)

For items on the list below, access [online preauthorization forms](#) (there are separate forms for medical and psychological services and for services related to substance use). **Questions?** Contact Member Services at **800-538-5038**.

- > Abortion procedures
- > Adenoidectomies
- > Advanced radiation and proton beam treatments
- > All admissions to facilities, including rehabilitation, transitional care, skilled nursing facilities, and all hospitalizations that are not for urgent or emergency conditions
- > Selected advanced bronchoscopy, endoscopy, and colonography procedures
- > Selected advanced cardiac imaging
- > Certain injectable drugs and specialty medications
- > Chiropractic services (Utah)
- > Chiropractic services exceeding 10 visits (Idaho)
- > Cochlear implants
- > Potentially cosmetic procedures, including:
  - Breast procedures (reductions, enlargements, tattooing, and/or reconstruction)
  - Bariatric or weight-loss procedures
  - Chest-wall procedures
  - Eye procedures
  - Facial surgeries
  - Liposuction and panniculectomy
  - Scar revisions
  - Vein procedures
  - Cutaneous vascular proliferative lesions
- > Dental services and oral appliances covered under Original Medicare, including any services related to the teeth or structures directly supporting the teeth
- > Certain durable medical equipment (DME) prosthetics/orthotics, medical supplies, and implants:
  - All DME items, prosthetics/orthotics, and medical supplies with purchase price greater than \$1,500
  - Beds and attachments (Idaho)
  - Cough-assist devices and vests (Idaho)
  - External defibrillators
  - Insulin pumps
  - INR monitors
  - Medication pumps
  - Pressure devices (Idaho)
  - Speech devices
  - Stimulators (external or implantable for neuro, bone growth, and pain, except TENS units)
  - Vision aids
- > Experimental or investigational services, except as provided under a Medicare-approved clinical trial
- > Genetic testing
- > Home health
- > Hyperbaric oxygen therapy
- > Hysterectomies
- > Infertility services
- > Joint replacements and autologous chondrocyte implantation of the knee
- > Negative pressure wound therapy
- > Neuropsychological testing, selected psychological services, and biofeedback (Idaho)
- > Orthognathic surgery

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# Services Requiring Prior Authorization, Continued

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- > Pain management spinal procedures (except for epidural steroid injections)
- > Parenteral and enteral feeding
- > Selected positron emission tomography (PET) scans
- > Selected prescription drugs
- > Rehabilitation therapy services:
  - Physical therapy services exceeding 20 visits
  - Occupational therapy services exceeding 10 visits
  - Speech therapy services exceeding 10 visits
- > Robotic procedures
- > Sex change procedures or procedures that may be done for sex change
- > Sexual dysfunction treatments
- > Selected advanced imaging (MRI and CT scans)
- > Selected spinal surgeries
- > Stereotactic surgery and radiosurgery
- > Tonsillectomies
- > Transplants
- > Transcatheter valve replacements and other selected advanced percutaneous cardiac procedures