

PRECERTIFICATION OF TREATMENT
COMMERCIAL NON-MEDICAID LINES OF BUSINESS

| <u>INS. CO NAME</u> | <u>TEL #</u> | <u>B/H MGD. BY</u> | PRE CERT | | <u>NOTES</u> |
|---------------------------|--------------|--------------------|------------|---------------|---|
| | | | <u>IOP</u> | <u>CLINIC</u> | |
| AETNA | 888-632-3862 | AETNA B/H | YES | NO | IOP HAS AUTOMATIC 18 V. CALL FOR MORE AETNA TYPICALLY ALLOWS YOU WHAT YOU NEED. WHEN VERIFYING BENEFITS, CUSTOMER SERVICE OFTEN SAYS 'NO PRECERT REQUIRED' -NOT TRUE |
| BEECH STREET | 800-525-0293 | SELF | YES | YES | THEY ARE THE MOST UNORGANIZED PPO IN EXISTANCE |
| CIGNA | 800-244-6224 | CIGNA B/H | YES | YES | SOME CONTRACTS ARE TELEPHONIC REVIEW, OTHERS ARE VIA OTR CIGNA TYPICALLY GIVES YOU WHAT YOU REASONABLY NEED |
| EMPIRE BLUE | 800-992-2583 | ANTHEM B/H | YES | YES | IOP MUST BE TELEPHONICALLY PRECERTIFIED. WHEN ENTERING CLINIC LEVEL OF CARE, THERE ARE 12 "PASS THRU" VISITS THAT ARE FREEBIES. THEN OTR MUST BE SUBMITTED. OTRS ARE OFTEN "LOST" SO SUGGEST YOU CALL AND FOLLOW UP 2-3 DAYS AFTER FAXING YOU WILL TYPICALLY GET 12-15 IOP AND ABOUT 30 CLINIC LEVEL |
| EMPIRE PLAN NYSHIP | 877-769-7447 | OPTUM B/H | YES | YES | IOP IS TELEPHONIC. CLINIC LEVEL IS DONE VIA OTR THIS IS A 'RICH' PLAN, AND YOU GET WHATEVER YOU NEED |
| GHI | 800-692-2489 | VALUE OPTIONS | YES | YES | FOR CONCURRENT REVIEW CALL 212-560-7605 CERTIFICATION IS EASY FOR FIRST THIRTY VISITS...MORE VIGILANT AFTER 30 |
| HIP | 888-447-2526 | SELF | NO | NO | YOU GET 60 VISITS TO USE AS YOU FIND CLINICALLY INDICATED |
| HEALTHNET | 800-909-1950 | MHN | YES | YES | YOU WILL TYPICALLY GET 21 IOP AND 8 RECOVERY SUPPORT. NOTHING MORE |
| OXFORD | 800-666-1353 | SELF | YES | YES | INITIAL CERTIFICATION IS TELEPHONIC, CONCURRENT REVIEWS ARE VIA OTR OXFORD USUALLY ALLOWS WHATEVER YOU REASONABLY NEED |
| UNITED | 877-842-3210 | UNITED B/H | YES | YES | IOP MUST BE PRECERTIFIED USUALLY GIVES WHAT YOU REASONABLY NEED |
| MVP | 518 | VALUE 9/09 | YES | NO | ONE AUTHORIZATION COVERS ALL LEVELS OF CARE |
| CDPHP | | UBH | YES | NO | ONLY REQUIRE PRECERT FOR IOP |
| Shield of Northeastern NY | | Health Integrated | YES | NO | ONLY REQUIRE PRECERT FOR IOP |

NONE OF THE ABOVE CARRIERS WILL PAY IF THE PATIENT IS 65 OR OLDER AND HAS MEDICARE PRIMARY REGARDLESS OF WHAT PROVIDER SERVICES OR CUSTOMER SERVICES TELLS YOU. IF YOU ADMIT, BE PREPARED TO WRITE OFF.

IF YOU ARE NOT A MEDICAID PROVIDER, MEDICAID MANAGED CARE PLANS DO NOT COVER OUTPATIENT TREATMENT
OUTPATIENT TREATMENT IS A CARVE OUT AND BILLED TO MEDICAID DIRECTLY