Medical Prior Authorization List

Effective January 1, 2014

Prior authorization requests may be made by faxing the Prior Authorization Fax form to 330-996-8904. Urgent requests for care occurring within 48 hours may be made by calling the Benefit Determination Unit at 330-996-8710 or 888-996-8710. Forms may be obtained by calling the Benefit Determination Unit. Coverage decisions are based on plan benefits and appropriateness of care and service.

Your in-network providers must obtain authorization 48 hours prior to rendering service for the services listed below. If you utilize an out-of-network provider, it is your responsibility to obtain any required prior authorization.

**INPATIENT SERVICES**
- Elective Inpatient Admissions
- Acute Inpatient Rehabilitation
- Skilled Nursing Facility (SNF), Transitional and Subacute Care
- Human Organ, Bone Marrow and Stem Cell Transplants

**DIAGNOSTIC TESTS**
- Computed Tomography (CAT) Scan (CT) with exception of CT of Sinus
- Magnetic Resonance Imaging (MRI, MRA, MRV)
- PET/SPECT
- Nuclear Cardiac Stress Procedures
- Genetic Testing

**AMBULATORY SERVICES**
- Ambulance Services/Non-Emergency: Call 866-996-8791
- Durable Medical Equipment, Orthotics and Prosthetics: Call 866-728-8797
- Hospice Care

**SERVICES REQUIRING DETERMINATION OF BENEFIT COVERAGE**
- Potentially Cosmetic, Experimental or Investigational Procedures
- Infertility (Diagnosis and Medical Treatment)
- Sclerotherapy
- Select drugs administered by a Provider in an office, home or outpatient setting: Call 330-996-8850
- Temporomandibular Joint Testing