SUMMACARE

Prior Authorization List

Providers must obtain authorization 48 hours prior to rendering service for the services listed below. Coverage decisions are based on plan benefits and appropriateness of care and service. If you are receiving services out-of-network, it is your responsibility to obtain the necessary prior authorization that is required. You may request prior authorization by calling the Health Services Management Program at (330)996-8710 or (888)996-8710.

Inpatient Services

- Elective Inpatient Admissions
- Acute Inpatient Rehabilitation
- SNF, transitional and Sub Acute Care
- Human Organ, Bone Marrow and Stem Cell Transplants

Diagnostic Tests

- Cat Scan (CT) with exception of CT of sinus
- Magnetic Resonance Imaging (MRI, MRA, MRV)
- PET/SPECT
- Nuclear Cardiac Procedures
- Echocardiograms
- Genetic Testing

Ambulatory Services

- Hospice Care
- Pain Management (Initial request for an evaluation must be called in to the Benefit Determination Unit by the ordering physician
  Additional visits must be pre-authorized by the servicing provider.)
- Ambulance Services/Non-Emergent: Call (330)996-8791 or toll free (866)996-8791
- Durable Medical Equipment, Orthotics and Prosthetics: Call (330)996-8428 or toll free at (866)728-8797

Services Requiring Determination of Benefit Coverage

- Potentially Cosmetic, Experimental or Investigational Procedure
- Sclerotherapy
- Tempromandibular Joint Disorder (TMJ)
- Surgical Treatment of Weight Management
- Dental Services related to an accidental injury
- Provider administered injectables and infusions