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Date: March 3, 2025

To: All Participating Providers

From: Arlene Matanguihan  
Utilization Review Manager

**Re: Pre-Certification Policy**

Pre-Certification procedures are required for all services below. Providers shall ensure that a completed Pre-Certification Form for all applicable services along with any required documentation be provided in order for the Plan to review such services being rendered. Upon approval, Providers shall only provide services within the scope and duration as specifically contained and outlined in the authorized Pre-Certification.

Pre-Certification requests must be submitted electronically on our Pre-certification portal: <https://precert.calvos.net>.

To facilitate prompt processing of Pre-Certification requests, they must be accompanied by the following:

- Appropriate ICD-10 and CPT codes
- Medical information (History and Physical Examination) to justify the request
- Laboratory, Imaging and other Diagnostic results relevant to the present illness

Pre-Certification requests must be submitted at least 5 business days prior to the intended date of service.

Approved Pre-Certifications are valid for 30 days from the date of approval.

STAT procedures should be performed without delay. We require the submission of a completed Pre-Certification Form and all required documentation within 10 days of the STAT procedure.

**Important Information:**

- Failure to obtain Pre-Certification approval for services or benefits requiring Pre-Certification will result in a denial of claim payment, and members shall not be billed.
- Services exceeding the authorized scope or duration shall not be paid by the Plan.
- Pre-Certification is only a determination of medical necessity, not an assurance of coverage, or guarantee of payment.

## List of Procedures Not Requiring Pre-Certification :

Procedures which are not specifically listed will be evaluated based on Medical Necessity and the member's plan benefits. Medicare CCI rules apply.

### Procedures

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#### 1 Urgent and emergency services at a hospital

Including but not limited to, Trauma Surgery, Appendectomy, Cesarean Section, Bowel Obstruction Surgery, Ruptured Aneurysm Repair and Amputation, except for any possible Third-party Liability (TPL).

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#### 2 Preventive Screening

The plan follows the recommended USPSTF Preventive Services grades A & B. These services DO NOT require precertification, except for the CPT codes stated on our List of Procedures Requiring Pre-Certification.

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#### 3 Simple Hernia Repair

#### 4 Members who have Medicare as Primary insurance

When Calvo's SelectCare is secondary, we follow the primary payer's medical necessity determination and is only responsible for the co-insurance / co-payment of COVERED services.

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## List of Procedures Requiring Pre-Certification :

Procedures which are not specifically listed will be evaluated based on Medical Necessity and the member's plan benefits. Medicare CCI rules apply.

Procedures									
1	All diagnostic procedures performed or ordered by the same provider on a single patient two or more times								
2	All inpatient services (surgical/ non-surgical, skilled nursing, rehabilitation)								
3	All outpatient surgical procedures requiring the use of surgical facilities (except for female sterilization)								
4	All Diagnostic Procedures (including laboratory/ pathology) in excess of \$500.00								
5	Applied Behavioral Analysis services								
6	BRCA Gene Testing (in accordance with the USPSTF Grade B Recommendation)								
7	Cardiac Catheterization and Procedures								
8	Carpal Tunnel Release, Monofilament Testing								
9	Chemotherapy and Radiation Therapy								
10	Durable Medical Equipment: Std. hospital bed, Std. wheelchairs, walkers, crutches, oxygen, suction machine								
11	EMG / NCT (upper extremities)/ Autonomic Testing								
12	Home Health, Hospice and Palliative Care Services								
13	Hyperbaric Oxygen Therapy & Wound Care Services								
14	Imaging (CT Scans, DEXA Scans, MRIs, MRAs, Angiographies, PET Scans, Ultrasounds – except first obstetric ultrasound)								
15	Immunotherapy (See Drug Formulary)								
16	Mammograms (except for routine screenings according to the guidelines of the American Cancer Society)								
17	MIBI Scan, Thallium Stress Test, Exercise Stress Test								
18	Nuclear Medicine Studies								
19	Ophthalmology Diagnostic Procedures								
20	Pain Management Studies & Treatment								
21	Preventive Services								
	<table><tr><th></th><th>CPT CODES</th></tr><tr><td>○ Genetic Counseling and Evaluation for BRCA Testing; and BRCA Lab Screening</td><td>81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217</td></tr><tr><td>○ Computed Tomographic Colonography (Virtual Colonoscopy)</td><td>74263</td></tr><tr><td>○ Screening for Lung Cancer with Low-Dose Computed Tomography</td><td>71271</td></tr></table>		CPT CODES	○ Genetic Counseling and Evaluation for BRCA Testing; and BRCA Lab Screening	81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217	○ Computed Tomographic Colonography (Virtual Colonoscopy)	74263	○ Screening for Lung Cancer with Low-Dose Computed Tomography	71271
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22	Physical Therapy, Occupational Therapy, and Speech Therapy								
23	Organ Transplant Services								
24	Orthotics/ Prosthetics and Implantable Devices								
25	Plastic/ Reconstructive procedures								

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26 Sleep Studies

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27 Specialty/Biologic Injections (Ophthalmic, Orthopedic)

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28 Specialty Medications (See Drug Formulary)

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