

# Pre-Treatment Certification

## **Hospital Admissions**

Pre-certification means a determination of whether Hospital admission is required for treatment of a Sickness or Injury; and how long Hospital confinement is required.

All Hospital admissions will be subject to Pre-Certification. The procedures listed next must be followed to avoid a benefit reduction.

### **Non-Emergency Admission:**

1. Your Physician must call our Pre-Certification Service at 1-800-TELE-MED at least 2 working days prior to the date of admission. If our Pre-Certification Service is contacted less than 2 working days before admission, benefits will be reduced as if the member did not follow these Cost Containment Procedures. The information your Physician gives the Pre-Certification service will be reviewed by it. If there is a disagreement about the need for admission to the Hospital, a consulting Physician will contact your Physician for further discussion of the case.
2. You must complete and sign the authorization form and give it to your Physician
3. The Pre-Certification Service will then give written confirmation to your Physician, to you, and to the admitting Hospital of the authorized number of days of Confinement
4. You or your Physician may at any time ask the Service to re-evaluate or extend the number of days of Hospital Confinement deemed necessary.
5. If your Physician and the Service do not agree about the medical necessity of the treatment, you will be informed of the right to a second opinion; and a list of Physicians will be provided you for this second opinion.
6. All authorizations will be valid for 60 days for the Physician and the named health care facility. A change in either will require a new form.

**Emergency Admission:** Your Physician must call within 48 hours after the admission or by the next regular working day after the start of treatment, if later. The reason for admission and the details of the care or treatment received must be given. If it is not reasonably possible to make the call within the times provided, benefits will not be reduced for this reason if the call is made as soon as is reasonably possible.

An "emergency admission" as used above means entering the Hospital for a Sickness or Injury that requires immediate treatment to prevent loss of life or impairment of body functions.

**If the Covered Member does not follow these procedures, benefits payable for charges related to the Confinement will be reduced as follows:**

1. the Deductible will be increased by \$250 for each such Confinement; and
2. the Insured percent will be reduced from 80% to 70% for each such Confinement

The additional 10% you must pay will not count toward the out-of-pocket limits and must be paid even if those limits have been reached. But, the additional 10% will only apply until this additional amount reaches \$1,000 of charges per Confinement

If the member will be having surgery done in the Hospital, our Pre-Certification Service may require a confirming opinion on the need for the surgery before it will authorize the Hospital admission. If a confirming opinion is required, we will pay 100% of the Covered Charge for a second (and third if required) opinion on the need for surgery without requiring that the Deductible be met first.

### **Treatments/Services\***

The following services are subject to pre-treatment certification:

1. Inpatient Hospital, inpatient surgery, and
2. Organ and bone marrow transplant, and
3. Home Health Care, and
4. Physical, occupational, or speech therapy, and
5. Home infusion therapy including chemotherapy, and
6. Hospice, and
7. Acute inpatient rehabilitation stays, and
8. Long-term acute rehabilitation, and
9. Sub-acute inpatient medical and rehabilitation, and
10. Skilled nursing stays, and
11. Inpatient mental illness, nervous disorders, alcohol abuse, and chemical abuse, and
12. Radiation therapy, and
13. Dialysis, and
14. Private duty and skilled nursing, and
15. Diagnostic imaging tests, including new technology, but not limited to, Magnetic Resonance Imaging (MRI). Positron Emission Tomography (PET), Computerized Tomography (CAT) Scans, and Single Proton Emission Computerized Tomography (SPECT). Standard/routine x-rays such as, but not limited to, chest x-ray, ultrasound, mammography are not included.

The procedures listed next must be followed to avoid a benefit reduction.

1. Your Physician must call our Pre-Certification Service at 1-800-TELE-MED at least 2 working days prior to the date of treatment. If our Pre-Certification Service is contacted less than 2 working days before treatment, benefits will be reduced as if the member did not follow these Cost Containment Procedures. The information your Physician gives the Pre-Certification service will be reviewed by it. If there is a disagreement about the need for treatment, a consulting Physician will contact your Physician for further discussion of the case.
2. You must complete and sign the authorization form and give it to your Physician

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\* Additional treatments and services subject to pre-treatment certification pursuant to amendment TM5-PC.0906 S (D) TN. The pre-treatment certification requirements and penalties listed in Your Policy/Certificate and/or schedule of benefits still apply to the services originally subject to pre-treatment certification (included above).

3. The Pre-Certification Service will then give written confirmation to your Physician and you of the authorized treatment.
4. You or your Physician may at any time ask the Service to re-evaluate or extend the number of days of treatment deemed necessary.
5. If your Physician and the Service do not agree about the medical necessity of the treatment, you will be informed of the right to a second opinion; and a list of Physicians will be provided you for this second opinion.

**If pre-treatment certification is not completed for the above services, benefits will be reduced as follows:**

Additional deductible:	\$300 per service, per occurrence
Insured percent reduction:	10% up to a \$1000 per occurrence

Pre-treatment certification will be valid for 60 days for the requesting Physician and the named health care facility. A change in either Physician or health care facility will require a new pre-treatment certification.