Precertification requirements for members covered under the Federal Employee Blue Focus Benefit Plan

The Federal Employee Blue Focus Benefit Plan (FEP) requires precertification for the following services. These services must meet FEP medical policies, which can be accessed at: www.fepblue.org/en/benefit-plans/benefit-plans-brochures-and-forms and selecting Medical Policies.

NOTE: Outpatient precertification for FEP should be obtained by calling Highmark at 1-866-763-3608. Hospice and inpatient precertification continues to be performed by Independence Blue Cross.

- Air ambulance transport (non-emergent)
- Applied Behavior Analysis (ABA)
- BRCA testing and testing for large genomic rearrangement in the BRCA 1 and BRCA 2 genes
- Breast reduction or augmentation not related to cancer treatment
- Cardiac rehabilitation
- Cochlear implants
- Durable medical equipment (DME) (specialty)
- Elective surgical and non-surgical inpatient admissions
- Gender Reassignment Surgery
- Gene therapy and cellular immunotherapy (For example, CAR-T and T-cell receptor therapy)
- Genetic testing (also see “BRCA testing“)
- Hospice care (home hospice, continuous home hospice, and inpatient hospice)
- Inpatient/outpatient residential treatment center (RTC) admissions (Please contact Magellan @ 1-800-688-1911*)
- Orthognathic surgery procedures, bone grafts, osteotomies, and surgical management of the temporomandibular joint (TMJ)
- Orthopedic procedures: hip, knee, ankle, spine, shoulder, and all orthopedic procedures using computer-assisted musculoskeletal surgical navigation
- Outpatient Intensity Modulated Radiation Therapy (IMRT) except related to treatment of head, neck, breast, prostate, and anal cancer (Brain cancer is not considered a form of head or neck cancer, therefore, prior approval is required for IMRT treatment for brain cancer)
- Oral maxillofacial surgeries on the jaw, cheeks, lips, tongue, roof and floor of the mouth, and related procedures
• Outpatient surgical correction of congenital anomalies
• Prosthetic devices (external)
• Pulmonary rehabilitation
• Radiology, high technology including:
  - Magnetic resonance imaging (MRI)
  - Computed tomography (CT) scan
  - Positron emission tomography (PET) scan
• Reconstructive surgery for conditions other than breast cancer
• Rhinoplasty
• Septoplasty
• Surgery for morbid obesity
• Transplants, with the exception of corneal and kidney transplants
• Varicose vein treatment

NOTE: Prior approval is not required for outpatient mental health/substance use disorder services, except for those provided and billed by residential treatment centers.

Failure to obtain precertification will result in a retrospective review to determine compliance with FEP medical policies and guidelines. Should services be denied for lack of medical necessity, reimbursement will not be made and the member may not be billed.

*Exception: no retrospective review will be done for medical necessity for RTC. All precertification requirements must be met prior to admission.