Precertification requirements for members covered under the Federal Employee Standard and Basic Option Benefit Plans

The Federal Employee Standard and Basic Option Benefit Plans (FEP) require precertification for the following services. These services must meet FEP medical policies, which can be accessed at: fepblue.org/en/benefit-plans/benefit-plans-brochures-and-forms and selecting *Medical Policies*.

NOTE: Outpatient precertification for FEP (with the exception of gender-affirming surgery) should be obtained by calling Highmark at 1-866-763-3608. Inpatient precertification continues to be performed by Independence Blue Cross.

- Air ambulance transport (non-emergent)
- Applied Behavior Analysis (ABA)
- Clinical trials for certain blood or marrow stem cell transplants
- Elective surgical and non-surgical inpatient admissions
- Gender-affirming surgery
- Gene therapy and cellular immunotherapy (For example, CAR-T and T-cell receptor therapy)
- Genetic testing
- · Hearing aids
- High-cost drugs
- Hospice care (home hospice, continuous home hospice, and inpatient hospice)
- Inpatient residential treatment center (RTC) admissions (Call 1-800-688-1911*)
- Outpatient sleep studies performed outside the home
- Outpatient surgery needed to correct accidental injuries to jaws, cheeks, lips, tongue, and roof and floor of mouth
- Proton beam therapy, stereotactic radiosurgery, and stereotactic body radiation therapy
- Reproductive services

- Sperm/egg storage
- Surgery for severe obesity
- Transplants, with the exception of corneal transplants

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.





