

JAI MEDICAL SYSTEMS MANAGED CARE ORGANIZATION, INC.

SERVICES AND PROCEDURES REQUIRING PRIOR AUTHORIZATION

Jai Medical Systems Managed Care Organization, Inc. (JMSMCO) requires prior authorization for the services and procedures listed below. All requests must go through the PCP office for approval before being reviewed by the UM department. If you do not see the procedure listed below for which you are seeking approval, or if you are unsure if a service or procedure requires prior authorization, please contact our Utilization Management Department at 1-888-JAI-1999.

Services Requiring Prior Authorization

- Acupuncture Services for < 21 yrs.
- Ambulance/Wheelchair Van Transportation (Non-Emergent)
- Audiology devices including but not limited to hearing aids, cochlear implants, and auditory osseointegrated devices.
- Audiology device repairs (greater than \$500)
- Braces and Splints (greater than \$1,000 for the member's total claim)
- Cardiac Rehabilitation/Specialty Procedures
- Chiropractic Services (>10 visits) for < 21 yrs.
- Cosmetic Procedures
- Custom Foot Orthotics
- Durable Medical Equipment > \$1,000.00 or rental equipment > 90 days (Including Motorized Wheelchairs, CPM Machines, Bone Growth Stimulators/Osteogenic Stimulator, Holter Monitors, External Defibrillators, Breast Pumps)
- Genetic Testing
- Home Health Care (>12 visits)
- Hospice (Home and Inpatient)
- Hyperbaric Oxygen Therapy
- Investigational Surgeries/Clinical Trials
- Neuro-Psychological Testing/Developmental Delay Programs
- Out-of-network services of any kind (Single case agreement must be completed)
- Outpatient Rehab- PT, OT, ST (>12 visits) for >21 yrs only
- PET Scans
- Prosthetics (including breast prosthetics and mastectomy bras)
- Proton Therapy Treatment
- Skilled Nursing Facility Admissions
- Sub-Acute/Inpatient Rehabilitative Services
- Sleep Studies
- Urgent Procedures or Admissions (notification to Utilization Management Department within 24-48 hours mandatory)
- Wound Vac
- Wound Clinic (>10 visits)

Procedures Requiring Prior Authorization

- Organ Transplants
- Bypass
- Cardiac Procedures (including, but not limited to, non-emergent cardiac catheterizations, cardiac defibrillators/pacemakers, cardiac ablations)
- Amputations
- Neurosurgical procedures (including, but not limited to, **back surgeries**, craniotomies)
- Endoscopic Procedures (excluding routine colonoscopies)
- Capsule Endoscopy
- Gender Transition Surgery
- Grafts/Implants
- Plastic/Reconstructive Surgery
- Corrective Surgery
- Neurostimulators
- Dermatology (Phototherapy, Sclerotherapy, Varicose Vein Ligation, Actinic Keratosis)

Please note: Dialysis does not require prior authorization; however a contracted facility should be used when possible. If a member requires dialysis, please notify the Utilization Management Department as soon as possible.

NOTICE:

To avoid unnecessary delays, please send elective authorizations requests at least seven (7) days before the procedure. Only written authorizations issued by JMSMCO are valid.

Please contact the Utilization Management Department at 1-888-JAI-1999 for any questions or concerns regarding prior authorizations.