

South Dakota State Employee Health Plan Pre-authorization Listing

07/01/17 to 06/30/18 (Subject to Change)

Health Management Partners (HMP) 1.866.330.9886 • www.preauthonline.com

Admissions

- Surgical, non-surgical (medical)
- Skilled nursing
- Rehabilitation
- Hospice
- Transplant services
- Out-of-network services
- Observation services
- Mental health
- Chemical dependency, including partial Residential Day
- Maternity

Ambulance Transportation

- Non-emergent ambulance transportation requires pre-authorization through HMP.

Dependents Residing In Other States

There are no changes to pre-authorization requirements for dependents (college students) residing in other states.

Durable Medical Equipment (DME)

- Any DME Exceeding \$1000
- Apnea Monitors
- Compression pumps
- Continuous Passive Motion Device
- CGMS (continuous glucose monitoring system)
- CPAP, CPAP with humidifier, Bi-PAP (continuous positive airway pressure)
- Custom made braces over \$1000
- Electrical stimulation for urinary / bowel incontinence
- Feeding pump (initial supply only for pump and kit)
- Hospital beds
- Insulin pumps
- Neuromuscular electrical stimulators
- Negative pressure wound therapy pump
- Osteogenic stimulator (bone growth stimulator)
- Oximeters
- Oxygen, to include the oxygen carrier
- Percussors
- Pressure relief mattress
- Prosthetics
- SAD lites (seasonal affective disorder)
- Speech Devices
- Suction pumps
- TENS (transcutaneous electrical nerve stimulator)
- Terbutaline pumps
- Uterine monitor
- Ventilators
- Custom or Power Wheelchairs for purchase

Emergency Care

When traveling out-of-state and emergency services are required, a call to HMP must be made within 48 hours to retro-authorize an in-patient admission.

Oncology

Oncology related treatment requests must be submitted through eviti@connect.eviti.com. Select Health Management Partners as Line of Business.

Other Services

- Outpatient/Ambulatory Procedures
- MRI, MRA, CTA, CT Scans, and PET Scans
- Genetic Testing
- Cardiac self-management training and education
- Home health services, including home intravenous, pain management, and hospice
- Ambulatory infusion
- Rehabilitation
- Chelation therapy
- Transplant services
- Observation services
- Physical therapy, occupational therapy, or speech therapy
- Maternity ultrasounds
- Temporomandibular Joint Syndrome (TMJ) treatment
- Applied Behavior Analysis (ABA)
- Dialysis

Out-of-State Pre-authorizations

For pre-authorization of inpatient and outpatient services, providers should contact HMP at www.preauthonline.com. Requests for out-of-network referrals must be made prior to receiving care from the provider in order for you to receive the highest level of benefits (75%/25%).

Requests for Out-of-State Care will be declined if the patient care can be provided safely and cost effectively in South Dakota. Out-of-network benefits (65%/35%) will be applied to services received out-of-state if out-of-state care is not pre-authorized by HMP.

Out of Country Pre-authorization

If you are traveling out of the country and need pre-authorization, please place a collect call to 1-605-333-0200.

Medications Requiring Pre-authorization under Pharmacy Benefit:

For non-Specialty medications, contact CVS at 1-800-294-5979. For Specialty medications, contact CVS at 1-866-814-5506.

Medications Requiring Pre-authorization under Medical Benefit:

Providers may submit prior authorization request at www.preauthonline.com.

South Dakota State Employee Health Plan Prescription Pre-authorization Listing

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HMP: Providers may submit prior authorization request at www.preauthonline.com
Medications requiring Preauthorization under **Medical Benefits**:

- Actemra[®]
- Alferon N[®]
- Arcalyst[®]
- Benlysta[®]
- Berinert[®]
- Botox[®]
- Brineura[®]
- Cerezyme[®]
- Cinryze[®]
- Cinqair[®]
- Dysport[®]
- Eleyso[®]
- Entyvio[®]
- Epoprotenol (Flolan[®], Velettri[®])
- Exondys 51[®]
- Fasenra[®]
- Ilaris[®]
- Imfinzi[®]
- Immune Globulins
- Inflectra[®]
- Kalbitor[®]
- Kanuma[®]
- Krystexxa[®]
- Mepsevii[®]
- Myobloc[®]
- Naglazyme[®]
- Ocrevus[®]
- Orencia[®]
- Nucala[®]
- Prolia[®]
- Remicade[®]
- Remodulin[®]
- Renflexis[®]
- Rituxan[®]
- Sandostatin LAR[®]
- Soliris[®]
- Somatuline[®]
- Spinraza[®]
- Stelara IV[®]
- Supprelin LA[®]
- Synagis[®]
- Tysabri[®]
- Vimizim[®]
- Vivitrol[®]
- Vpriv[®]
- Xeomin[®]
- Xgeva[®]
- Xiaflex[®]
- Xolair[®]
- Zinplava[®]