

UCHP Provider Precertification List

– Effective January 1, 2022

Precertification requirements will be the same whether the services are provided at the UCMC main campus or University of Chicago Medicine offsite locations. Precertification requests for services can be initiated by contacting Aetna 1-888-632-3862 or by submitting an electronic online request on the Aetna secure provider website Navinet at <https://connect.navinet.net>.

Reference all general precertification information. **NOTE - precertification requirement does not indicate service is a Covered Benefit (coverage is subject to Member's Certificate of Coverage).**

Applies to: The University of Chicago Health Plan (UCHP)
Aetna standard pre-cert list posted on UCHP.com

<https://www.aetna.com/health-care-professionals/precertification/precertification-lists.html>

Providers can use the [BRCA form located online](#) under the “Medical Precertification” section to submit precertification requests.

OUT OF UCHP NETWORK

1. All services to be provided outside of the University of Chicago Health Plan Network

Including hospitals, physicians, home health, skilled nursing, genetic testing, inpatient behavioral health require prior authorization due to a network deficiency.

PHARMACY

Drugs and medical injectables administered or prescribed by a UCHP provider in an outpatient setting precertification is handled by CVS specialty drug management program by calling 1-866-814-5506 or through online e-prescribe (only exception is for Outpatient Home Infusion drugs which are handled through Aetna or UCM Ambulatory Pharmacy)

SPECIAL PROGRAMS

National Medical Excellence-

1-877-212-8811 for all major organ transplant evaluations and transplants

Infertility program unit –

1-800-575-5999

Pre-implantation genetic testing –

1-800-575-5999

Pediatric congenital heart surgery -

1-855-888-9046 SCPU

BEHAVIORAL HEALTH

Behavioral health services requiring precertification/authorization**

This applies only to services covered under the member's benefits plan.

- Inpatient admissions
- Residential treatment center (RTC) admissions
- Partial hospitalization programs (PHPs)
- Intensive outpatient programs (IOPs)
- Psychological testing
- Neuropsychological testing
- Psychiatric home care services
- Outpatient detoxification
- Applied behavior analysis (ABA)

GENERAL INFORMATION

1. Precertification and notification are the processes of collecting information before elective inpatient admissions and/or selected ambulatory procedures and services take place.

- a. Requests for precertification and notification must be received before rendering services. We encourage providers to submit precertification requests for scheduled services at least two weeks in advance.
- b. Failure to contact UCHP for precertification will relieve the health plan or employees and members from any financial liability for the applicable service(s), if those services are rendered.
- c. This material is provided for informational purposes only. It's not intended to direct treatment decisions.
- d. Precertification is the utilization review process to determine whether the requested services, procedure, prescriptions drug or medical device meets the Aetna/UCHP clinical criteria for coverage.
- e. The level of review of individual items on this precertification list may vary from time to time at the discretion of UCHP. The lack of the denial for a particular service or supply should not be interpreted as our approval for any subsequent services.
- f. Electronic submission of precertification requests and inquires is preferred. If you require assistance with precertification, please call using the appropriate phone number indicated on the member's ID card, 1-888-632-3862 and select the precertification option.
- g. Visit the Aetna Clinical Policy Bulletins at www.Aetna.com.
- h. Provided that there are no changes to member eligibility and plan coverage for the procedure/service requested, precertification approvals are valid for six months in all states unless otherwise indicated at the time of precertification.

- i. Services not included on the precertification list are subject to the coverage terms of the member's plan of benefits.
2. Precertification is required for maternity and newborn confinements that exceed the standard LOS. Standard LOS for vaginal deliveries is a total of three days or less; standard LOS for cesarean section is a total of five days or less.
3. All services deemed "never effective" are excluded from coverage. Aetna defines a service as "never effective" when it is not recognized according to professional standards of safety and effectiveness in the United States for diagnosis, care or treatment. Visit the secure website, available through www.aetna.com, for more information. Select "Claims," "CPT/HCPCS Coding Tool," "Clinical Policy Code Lookup."
4. For precertification of outpatient specialty medications contact CVS Pharmacy at 866-814-5506.
5. If a precertification request is denied, the reason for the denial, the alternate treatment and appeal information will be communicated to both the provider and member in writing.
6. UCHP does not permit specialists to refer members to another specialist for care (exception OB/GYN). If this is necessary, an order from their PCP to see another specialist and/or receive additional services not included in the original order must be submitted through Epic. Aetna referrals are not required.
7. Failure to obtain precertification for a service could result in nonpayment from UCHP for the services rendered.