# HealthLink Standard Medical Necessity Review Checklist

**Healthlink Utilization Management** 

Effective June, 2013



### PO Box 419104 Saint Louis, MO 63141

Toll-free: **877-284-0102** • Fax: **800-510-2162** 

Hours: 8:00 a.m. to 5:00 p.m. CST

Recorded messages after 5:00 p.m. CST

Group No.: PSDST1 (Building Employees)

PSDST2 (General Membership) PSDST3 (PHCS Members)

## **Services Requiring Pre-Certification**

## Inpatient Services (Medical, Surgical)

- Bariatric Surgery \*
- Elective Admissions
- Emergency Admissions
- Hospice
- LTAC Admissions

- Lumbar Spine Surgery
- Rehabilitation Facility Admissions
- Skilled Nursing Facility Admissions
- Transplants \*

#### **Surgical Procedures - Ambulatory**

- Bariatric Surgery \*
- Cartilage Transplant Knee
- Cochlear Implant
- Lumbar Spine Surgery
- Nasal Septoplasty

- Rhinoplasty
- Sinus Endoscopy
- Sleep Apnea Surgery LAUP/UPPP, Nasal, and Uvulopalatoplasty

#### **Ancillary Services**

- Home Infusion Services
- Home Health Services
  - Home Hospice

- Occupational Therapy
- Physical Therapy
- Speech Therapy

#### **Durable Medical Equipment**

- Bone Stimulator
- Cardio/External Defibrillator
- CPAP/BIPAP
- Electric Scooters
- Limb Prosthetics
- Myoelectric Prosthetics

- Neuromuscular Stimulators
- TENS Unit
- Wheelchairs (Custom)
- Wheelchairs (Power)
- Wound Vacs

#### **Diagnostic Imaging - Ambulatory**

- MRA of the Head and/or Neck
- MRI of the Brain

- MRI of Spine Any part of the spine (cervical, thoracic, lumbar, sacral)
- PET Scans

### **Mental Health & Drug and Alcohol Treatment**

Authorization is encouraged with Mercy Managed Behavioral Health 314-729-4600 or 800-413-8008.

#### \* Prior approval is required from the Fund. Please contact District No. 9 Welfare Trust directly.

HealthLink's Utilization Management program is designed to provide clinical review of medical care to convey information and recommendations to plan administrators and carriers in connection with their determination of benefit eligibility.

Medical necessity certification does not guarantee that services are covered. Benefits are subject to the patient's eligibility at the time charges are actually incurred, and to all other terms, conditions and exclusions of the Plan.

#### DISTRICT NO. 9, I. A. OF M. & A. W. WELFARE TRUST



Revised 06/2013