



## Medical Associates Health Plans Commercial Prior Authorization List

### **Outpatient Services**

Any referral to an Out of network provider/facility  
Clinical trials  
Dental/Oral Surgery related to accident or illness  
Genetic testing  
Gene Therapy  
MRI/MRA/MRVs  
Home Health Services  
Hyperbaric Oxygen Treatments  
Medical Pharmacy ([Medical Pharmacy Drug List](#))  
Private duty nursing  
Transcranial Magnetic Stimulation  
Video Capsule Endoscopy

### **Surgical Services**

All Spinal Surgeries  
Implantable Stimulators (non-cardiac)  
Bariatric Surgery  
Blepharoplasty  
Dental/Oral Surgery related to accident or illness  
Gender Reassignment  
Hysterectomies  
Joint Replacements (knee, hip, shoulder, ankle)  
Organ Transplants  
Panniculectomy  
Reconstructive surgery, including those resulting from accident or disease  
Reduction mammoplasty  
Rhinoplasty  
Varicose Vein Treatments (Sclerotherapy, Stripping, or Endovenous Ablation) Office and Outpatient

### **Miscellaneous**

Non-urgent ambulance (ground and air)

### **Admissions**

Acute or Elective Inpatient  
Inpatient Rehabilitation  
Inpatient Long-Term Acute Care (LTAC)  
Skilled Nursing (SNF)  
Residential - Mental Health, Detox, Substance Use Disorder  
Partial Hospitalization - Mental Health, Detox, Substance Use Disorder  
CAR-T

### **Durable Medical Equipment**

All DME over \$2000  
All the following regardless of cost:  
Assistive Devices-custom standing devices  
Bone stimulators  
Continuous Passive Motion Devices  
Custom Orthosis and Prosthetics  
Enteral or Parental formula and supplies  
External Defibrillator garments  
Hearing devices- BAHA, Cochlear, Hearing aids  
Insulin Pumps (not supplies)  
Phototherapy Units  
Pneumatic Compression Devices  
Respiratory Assist Devices/Ventilators  
Speech Generating Devices  
Support Surfaces-Custom  
Wheelchairs (Custom/Power/POV only)  
Wound Vacs