



Anthem Blue Cross and Blue Shield GA Preapproval List Change Notification 12/1/2018

Preapproval changes are below. For additional information, you can access the complete GA Standard Preapproval List, GA Standard Preapproval CODE List and GA Standard Adopted Clinical Guideline List using the following links:

- [Georgia Standard Preapproval List](#)
- [Georgia Standard Preapproval CODE List](#)
- [Georgia Standard Adopted Clinical Guideline List](#)

AIM Specialty Health®

AIM Specialty Health, a separate company, is a nationally recognized leader delivering specialty benefits management on behalf of GA for certain health plan members. Determine if preapproval is needed for a GA member by clicking the “Medical Policy, Clinical UM Guidelines, and Preapproval Requirements” link on our provider website or by calling the preapproval phone number printed on the back of the member’s ID card. To submit your request for any of the services below, contact AIM online via AIM’s *ProviderPortal*_{sm} at aimspecialtyhealth.com/goweb. From the drop-down menu, select GA. You may also call AIM toll-free at 866-714-1103, Monday–Friday, 8:00 a.m.–6:00 p.m. ET.

AIM provides benefits management for the programs listed below:

- > Imaging Level of Care
- > Genetic Testing
- > Diagnostic Imaging Management
- > Cardiovascular Services
- > Radiation Therapy Services
- > Outpatient Sleep Testing and Therapy Services
- > Specialty Pharmacy Drugs
- > Cancer Care Quality Program
- > Musculoskeletal (for Fully Insured – effective date yet to be determined)
- > Upper Gastrointestinal Endoscopy (effective 11/1/2018)

For more details on these programs, please visit the AIM Specialty Health® site at <http://www.aimspecialtyhealth.com/marketing/guidelines/185/index.html>. By clicking on the link above, you will be linked to sites created and/or maintained by another, separate entity (“External Site”). Upon linking you are subject to the terms of use, privacy, copyright and security policies of the External Sites. We provide these links solely for your information and convenience. We encourage you to review the privacy practices of the External Sites. The information contained on the External Sites should not be interpreted as medical advice or treatment provided by us.

New AIM Musculoskeletal (MSK) Program Delay in launch for Fully Insured – effective date yet to be determined

The December 2017 edition of the Network Update announced that AIM Specialty Health® (AIM), a separate company, would perform prior authorization reviews of certain surgeries of the spine and joints, as well as interventional pain treatment to determine medical necessity for fully insured Anthem Blue Cross and Blue Shield members. Please be aware that this program has been delayed. The new implementation date is yet to be determined.

The new musculoskeletal program includes review of the level of care/setting, pre-operative days, and expected length of stay for medical necessity using AIM clinical guidelines which have been adopted by Anthem Blue Cross and Blue Shield. All codes and clinical guidelines included in the musculoskeletal program can be found

on the AIM MSK website. If there are any additional delays to this program, we will publish notification to providers in a future Network Update.

Eligibility and benefits

Eligibility and benefits can be verified by accessing the Anthem Blue Cross and Blue Shield web site or by calling the number on the back of the member's identification card. Service preapproval is based on member's benefit plan/eligibility at the time the service is reviewed/approved. Benefit plans vary widely and are subject to change based on the contract effective dates. The provider is responsible for verification of member eligibility and covered benefits. Except in the case of an emergency, failure to obtain preapproval prior to rendering the designated services listed below will result in denial of reimbursement.

For Fully Insured - reviews moving to AIM Musculoskeletal (MSK) Program effective date yet to be determined			
SURG.00066	Percutaneous Neurolysis for Chronic Neck and Back Pain	Yet to be determined	
SURG.00071	Percutaneous and Endoscopic Spinal Surgery	Yet to be determined	
SURG.00072	Lysis of Epidural Adhesions	Yet to be determined	
SURG.00092	Implanted Devices for Spinal Stenosis	Yet to be determined	
SURG.00111	Axial Lumbar Interbody Fusion	Yet to be determined	
SURG.00127	Sacroiliac Joint Fusion	Yet to be determined	
SURGERY	Hip Replacement	Yet to be determined	
SURGERY	Shoulder Replacement	Yet to be determined	
SURGERY	Spinal Surgery	Yet to be determined	
For Fully Insured moving to AIM Musculoskeletal (MSK) Program – effective date yet to be determined For groups not using AIM Musculoskeletal (MSK) Program - archiving 1/1/2019			
SURG.00067	Percutaneous Vertebroplasty, Kyphoplasty and Sacroplasty		
CG-SURG-32	Pain Management: Cervical, Thoracic and Lumbar Facet Injections		
CG-SURG-33	Lumbar Fusion and Lumbar Total Disc Arthroplasty (TDA)		
CG-SURG-38	Lumbar Laminectomy, Hemi-Laminectomy, Laminotomy and/or Discectomy		
CG-SURG-39	Pain Management: Epidural Steroid Injections		
CG-SURG-42	Cervical Fusion		
CG-SURG-43	Knee Arthroscopy		
CG-SURG-45	Bone Graft Substitutes		
CG-SURG-47	Surgical Interventions for Scoliosis and Spinal Deformity		
CG-SURG-53	Elective Total Hip Arthroplasty		
CG-SURG-54	Elective Total Knee Arthroplasty		
CG-SURG-60	Cervical Total Disc Arthroplasty		
CG-SURG-65	Recombinant Human Bone Morphogenetic Protein		
CG-SURG-66	Implanted (Epidural and Subcutaneous) Spinal Cord Stimulators (SCS)		
CG-SURG-67	Treatment of Osteochondral Defects of the Knee and Ankle		
CG-SURG-68	Surgical Treatment of Femoroacetabular Impingement Syndrome		
CG-SURG-69	Meniscal Allograft Transplantation of the Knee		
Anthem Medical Policy and Clinical Guideline content transfers			
SURG.00024	Bariatric Surgery and Other Treatments for Clinically Severe Obesity	Content transferred to CG-SURG-83	10/31/2018

SURG.00051	Hip Resurfacing	Content transferring to CG-SURG-85	10/31/2018
Archive			
CG-MED-58	Coronary Artery Imaging: Contrast-Enhanced CT Angiography, Fractional Flow Reserve derived from CT, Coronary MRA, and Cardiac MRI		1/1/2019
Codes added to existing preapproval documents			
ANC.00007 Cosmetic and Reconstructive Services: Skin Related	17999		Add 1/1/2019
CG-MED-46 Electroencephalography and Video Electroencephalographic Monitoring	95999		Add 3/1/2019
CG-SURG-83 Bariatric Surgery and Other Treatments for Clinically Severe Obesity	00797, 43659, 43999		Add 11/1/2018
OTHER - Bariatric Surgery and Other Treatments for Clinically Severe Obesity	43620, 43621, 43622, 43631, 43634, 43635, 43640, 43641		Add 11/1/2018
Add to preapproval			
MED.00125 Biofeedback and Neurofeedback	90875, 90876, 90901, 90911, E0746		Add 3/1/2019
SURG.00122 Venous Angioplasty with or without Stent Placement or Venous Stenting Alone	36010, 36011, 36012, 36901, 36902, 36903, 36904, 36905, 36906, 36907, 36908, 36909, 37238, 37239, 37241, 37248, 37249, 37252, 75710, 75820, 75825		Add 1/1/2019
CG-MED-59 Upper Gastrointestinal Endoscopy	43233, 43235, 43236, 43238, 43239, 43241, 43242, 43243, 43244, 43245, 43246, 43247, 43248, 43249, 43250, 43251, 43253, 43254, 43255, 43266		Add 11/1/2018
Reviews moving to AIM			
CG-MED-65	Manipulation Under Anesthesia of the Spine and Joints other than Knee – Shoulder reviews ONLY moving to AIM		1/1/2019