



**OUTPATIENT
FAX NUMBER:
915-298-7866**

**PROCEDURES & SERVICES REQUIRING
PREAUTHORIZATION/NOTIFICATION**

**INPATIENT
FAX NUMBER:
915-298-5278**

All Pre-certification Requests must be FAXED

Pre-authorization is based on information provided to Preferred Administrators at the time of request, and does not guarantee payment of benefits nor verify eligibility. Payment for services is subject to all terms, conditions, limitations and exclusions related to the member's eligibility and subsequent medical review. Regardless of pre-authorization status, medical decisions concerning a course of treatment are solely between the physician and the patient.



Preferred Administrators appreciates the care you provide for our members.

Please notify Preferred Administrators AS SOON AS POSSIBLE to begin the pre-authorization process.

A 72-Hour advance notice allows us to review the request for services and respond in a timely manner.



Behavioral Health (Initial evaluation does not require pre-authorization)
Chiropractic Services (Initial evaluation does not require pre-authorization)
Diagnostic Tests Related to Potential Organ Transplantation
Dialysis Services
Durable Medical Equipment Note: All DME rentals exceeding 2 months require pre-authorization DME maximum up to 12 months, not to exceed purchase price.
Elective Admissions
Growth Hormones
Home Health Services (Initial evaluation does not require pre-authorization)
Inpatient Admissions Note: Preferred Administrators must be notified of all urgent/emergent admissions
Laser Surgeries
Intense Allergy Desensitization
Non-Emergent Admission
Non-Emergency Medical Transportation
Obstetrical Ultrasounds Note: Member is allowed four ultrasounds without obtaining pre-authorization
Occupational Therapy (Initial evaluation does not require pre-authorization)
Oral, Injectable or IV Drug Administration over \$500 Note: This includes oral or injectables provided in a physician's office
Oral Surgery
Orthotics and Prosthetics (Adult and Children)
Outpatient Chemo-Therapy and Infusion
Out-of-Network / Non-Participating Facility, Provider, or Vendor
Outpatient Procedures
Outpatient Surgery
PET Scans
Physical Therapy (Initial evaluation does not require pre-authorization)
Podiatry Services (Excluding debridement of nails, avulsion of nail plate, excision of nail and wedge excision of skin of nail)
Radiation Therapy
Sleep Studies
Specialty Medicine - All specialty medicines require pre-authorization Note: Please go to El Paso First's Website for complete list of specialty medicines
Speech Therapy (Initial evaluation does not require pre-authorization)
Synagis
Transplants
Transportation (Air transport and non-emergent ambulance)
*Please see additional information on side bar



All out-of-network services provided by non-participating facility, provider or vendor require pre-authorization

No authorization is required for the initial visit for the following:
Behavioral Health
Chiropractic Services
Home Health Services
Occupational Therapy
Physical Therapy
Speech Therapy

***PODIATRIC PROCEDURES**
The following CPT codes do not require authorization for in-office procedures

- 11720
- 11721
- 11730
- 11732
- 11750
- 11765

