



MONTEFIORE CARE MANAGEMENT

## Important News- IPA Referral Process Reminder Referral Notifications Waived

As of July 1, 2006, CMO eliminated the requirement for referral notifications for most specialty services referrals within the IPA network. Claims payment will not be impacted by this change. Your office is no longer required to enter notifications online, submit paper referral forms or phone referral notifications to CMO Medical Management when you are referring to an IPA participating provider.

- ❖ **Providers who refer patients outside of the IPA network may still be asked to follow the patient's health plan guidelines and provide a referral; however it is not needed for CMO claims payment.**

**Prior- Authorization Required (Refer to CMO's Precertification List for a complete list of services requiring prior-authorization at [http://www.cmocares.com/health\\_provider/](http://www.cmocares.com/health_provider/)):**

In order to ensure that IPA members receive services covered under their current health insurance benefits CMO will continue to require that authorizations be requested for the following services:

- **Inpatient Admissions (Elective/Emergent)**
  - Emergent admissions require 24-hour notification
  - Elective admissions require prior-authorization at least 5 days prior to admission
- **Surgery**
- **New Technology, Cancer Clinical Trials, Investigational or Experimental Procedures**
- **Durable Medical Equipment (DME)**
- **Home Health Care- including Home Infusion Therapy**
- **Hospice**
- **Infertility workup and treatment**
  - In-Vitro (IVF) is only covered with the benefit
- **Plastic-Cosmetic Surgery including, but not limited to:**
  - Mohs Micrographic Surgery
  - Septoplasty
  - Ligation and stripping of varicose veins
- **Hyperbaric O2 Treatments**
- **Radiology**
  - MRI, MRA, PET
- **Transportation for all non-emergency services**
  - Ambulance, Ambulette, Taxi, Air
- **All referrals to out-of-network providers**
  - Referrals of any kind outside the member's health plan network require prior authorization.**

**Prior authorization for Podiatry services is not required.**

Claims for Podiatry will be processed according to the member's benefit.

For Behavioral Health referrals, including HealthFirst and HIP (EmblemHealth), call University Behavioral Associates at 800.401.4822.

**Please Note: Provider Offices may still require that their patients provide a referral form. Please be prepared to accommodate your patients in these instances. An online referral may be used as a courtesy to your patients and the consulting physicians to communicate written requests for specialty services. Please do not submit this referral form to CMO it is not needed for payment of claims.**