

## Services requiring prior authorization

The following is a list of services that may require prior authorization for the New York City Employees PPO (NYCE PPO) plan.

Behavioral health	
Inpatient and facility-based care	<ul style="list-style-type: none"> <li>• Inpatient stays in hospitals, inpatient behavioral health (acute care)</li> <li>• Residential treatment facilities</li> <li>• Partial hospitalizations</li> </ul>
Medical	
Inpatient and facility-based care	<ul style="list-style-type: none"> <li>• Inpatient stays in hospitals, extended care facilities, acute inpatient rehabilitation</li> <li>• Inpatient stays longer than 48 hours after vaginal delivery or 96 hours after cesarean section</li> </ul>
Transplants	<ul style="list-style-type: none"> <li>• Organ and tissue transplants</li> </ul>
Durable medical equipment and prosthetics	<ul style="list-style-type: none"> <li>• Durable medical equipment (DME) purchases over \$1,500</li> <li>• DME rentals over \$500</li> <li>• Prosthetics over \$1,000</li> </ul>
Cosmetic/reconstructive procedures	<ul style="list-style-type: none"> <li>• Potentially cosmetic and reconstructive procedures</li> </ul>
Imaging and diagnostic services	<ul style="list-style-type: none"> <li>• Advanced imaging</li> <li>• Radiology site of service – MRI and CT (ages 18 and above)</li> <li>• Sleep studies (attended)</li> </ul>
Surgery and procedures	<ul style="list-style-type: none"> <li>• Outpatient surgery site of service (ages 18 and above)</li> <li>• Pain management</li> <li>• Surgical treatment for gender dysphoria</li> <li>• Implantable spinal cord and nerve stimulators</li> <li>• Spinal surgeries</li> <li>• Joint procedures</li> <li>• Bariatric surgeries</li> </ul>
Cancer-related care	<ul style="list-style-type: none"> <li>• Chemotherapy managed by Prime Therapeutics (Phone: <b>833-519-4548</b> TTY: <b>711</b>; Fax: <b>888-656-6671</b> Online: <b>gatewaypa.com</b>)</li> </ul>
Radiation and cardiology	<ul style="list-style-type: none"> <li>• Advanced radiation treatment</li> <li>• Cardiology procedures</li> </ul>
Dialysis and renal care	<ul style="list-style-type: none"> <li>• Dialysis</li> </ul>

(Continued)

<b>Medical (Continued)</b>	
<b>Genetic and molecular services</b>	<ul style="list-style-type: none"> <li>Genetic and molecular testing</li> </ul>
<b>Medication and specialty drug programs</b>	<ul style="list-style-type: none"> <li>Medical specialty drugs managed by Prime Therapeutics (Phone: <b>833-519-4548</b> TTY: <b>711</b> ; Fax: <b>888-656-6671</b> Online: <b>gatewaypa.com</b>)</li> </ul>
<b>Transportation</b>	<ul style="list-style-type: none"> <li>Non emergent air transportation</li> </ul>
<b>Therapies</b>	<ul style="list-style-type: none"> <li>Physical therapy and occupational therapy after 25 combined visits</li> <li>Speech therapy after 25 visits</li> </ul>
<b>Home-based and nursing care</b>	<ul style="list-style-type: none"> <li>Home health care</li> <li>Private duty nursing</li> </ul>
<b>Reproductive health</b>	<ul style="list-style-type: none"> <li>Infertility treatment managed by WINfertility (Phone: <b>833-439-1515</b>, Online: <b>managed.winfertility.com/nyc/</b>)</li> </ul>
<b>Specialized medical services</b>	<ul style="list-style-type: none"> <li>Cochlear implants</li> <li>Enteral formula</li> </ul>
<b>Miscellaneous services</b>	<ul style="list-style-type: none"> <li>Other outpatient or office services requiring prior authorization</li> <li>Unlisted codes over \$5,000</li> </ul>

**Important notes:**

- Prior authorization must be obtained and can be requested by completing a search for the specific service(s) at **nyceppo.com**, or by calling the phone number on the member's ID card.
- For more details, refer to the [NYCE PPO Summary Plan Description \(SPD\)](#).