PCIP State Transition Plan Grid 5-23-2013		
PCIP Customer Service Number: (800) 220-7898		
Types of Services that Require Approval	What You or Your Health Care Provider Needs to Do to Pre-Authorize	Additional Comments
Cancer Treatment – Non-surgical	If your treatment is already in progress, your provider must enter the current treatment into the on-line preauthorization system at www.eviti.com before 7/1 to prevent delays/disruption in service. All new treatments or changes to your treatment, after 7/1, require pre-authorization online at www.eviti.com. For assistance, please call (800)220-7898, request or enter Ext. 3100, and select Option 1.	It is critical that the provider enter the current treatment plan in eviti.com so that an approval can be entered into the PBM system. This will prevent delays/disruption in retail pharmacy dispensing of cancer drugs.
Diabetic Supplies	Purchase diabetic supplies through Express Scripts at (800) 427-6145. For assistance, please call Customer Service at (800) 220-7898.	
 Specialty Wheelchairs and seating systems Specialty beds and/mattresses Oxygen 	You must obtain your DME through a PCIP national contract provider. Prior Authorization is required on the DME listed. If you are currently renting medical equipment and the enrollee will need it after 6/30/2013, please purchase the rented equipment from your current provider before 7/1. To prior authorize the equipment, your provider should call Customer Service, at (800) 220-7898, Ext. 3100, select option 4. Or the provider may visit www.pciplan.com , choose the provider tab, click on authorizations and select the DME form.	We can help with transition of oxygen equipment. Please contact us the week of 6-17 to allow time for equipment exchange. The ordering/construction of specialty wheelchairs/seating systems, beds, and mattresses with current vendors should be completed prior to 7/1. If not, the provider should submit medical necessity and specs and the work will be transitioned to a national contract provider.
	To obtain a list of national contract providers, visit www.pciplan.com , and click on "Find a Provider". Select the Durable Medical Equipment and Supplies document.	

Hospital – Inpatient Care	Authorization is required from InforMed for acute	Provider will need to authorize continued stay
mpatient care	inpatient care. Ask your provider/hospital to call	after 6/30/13
	InforMed at (800) 242-1025 or Fax clinical information	djter 0/30/13
	to (866)-315-6314.	Please send a list of enrollees hospitalized and
Surgeries/Procedures	10 (800)-313-0314.	have a length of stay over14 days, as of 6-15-
Medical/Surgical/Mental Health	If you are in the hospital as of 6/30/2013, and your	2013. Include first/last/DOB/Facility/Facility
Wiedicaly Surgicaly Wierital Fleatin	stay will continue into July, your provider must call	location, Facility contact if available.
	InforMed to pre-authorize the continued stay. Certain	location, racinty contact if available.
	surgeries require a medical necessity review. See the	Send by encrypted email to:
Mental Health - Inpatient	attached list of surgeries that require pre-	PCIP.Documents@geha.com,
	certifications.	Delon.Pinto@opm.gov,
Care for Mental Health/Substance Abuse,	certifications.	Dennis.Hodges@opm.gov.
including Residential and Intensive Day	If you have already received approval for a surgery or	<u>Definis.Hodges@opm.gov</u> .
Treatment	If you have already received approval for a surgery or	
Treatment	procedure on the attached surgery pre-cert list AND it will take place after 6/30/2013, your provider must	
	obtain reauthorization by following the instructions in	
	the surgery benefit summary table. Once the	
	procedure is approved, your provider will need to	
D .1 .:	contact InforMed to pre-authorize the inpatient stay.	
Prosthetics	Authorization is required for prosthetics. To authorize,	The ordering/construction of prosthetics with
	contact Customer Service at (800) 220-7898, request	current vendors should be completed prior to
	or enter Ext. 3100, and select Option 3.	7/1. If not, the provider should submit medical
		necessity and specs and the work will be
	Authorization is <u>not</u> required for mastectomy bras and	transitioned to a national contract provider
	prosthetics (L8000-L8039) with a diagnosis of breast	
	cancer or post mastectomy or lumpectomy, but you	
	must purchase through GEHA contracted providers.	
	Visit <u>www.pciplan.com</u> to find a list of providers, click	
	on Find a Provider (Prosthetics)	
Prescription Drugs	You can purchase prescriptions through Express	
	Scripts/ Medco. To find participating pharmacies in	
	your area, visit www.pciplan.com. <u>Some medications</u>	
	may require approval. For assistance, call (800) 427-	
	6145.	

Specialty Drugs	 Ask your physician to call Express Scripts/Medco mail services at (888) 327-9791 to obtain fax instructions. Mail your new prescription to Express Scripts/Medco; PO Box 30493; Tampa, FL 33630-3493. Submit a request to transfer your current prescription to mail order at www.express-scripts.com. Contact Express Scripts/Medco customer service at (800) 427-6145 if you would like assistance with transferring your prescription. NOTE: If you transfer a retail script to mail order, you will be charged the standard copay, whether it is a 30-day or 90-day supply. Specialty drugs are used to treat some severe medical conditions and are usually administered by injection or infusion. See Specialty Drug Benefits in the PCIP brochure at www.pciplan.com. To obtain these medications, contact Express Scripts/Medco/Accredo at (800) 803-2523. 	Please submit list of enrollees obtaining specialty drugs from home health/IV Therapy companies. Include first/last name, dob, diagnosis, medication, prescribing physician. We will attempt to transition to our specialty pharmacy company to avoid the significant penalties for the enrollee to continue with home IV Therapy providers. Send by encrypted email to: PCIP.Documents@geha.com, Delon.Pinto@opm.gov, Dennis.Hodges@opm.gov.
Radiology MRI, MRA, CT, PET, Nuclear Scans	Authorization from MedSolutions is required. Please call (866) 879-8317.	
Skilled Nursing Facility (SNF), Long Term	Authorization from OrthoNet is required. Ask your	Provider will need to authorize continued stay
Acute Care (LTAC) and Inpatient Rehab	provider to call OrthoNet at (877) 304-4419; Fax: 877-304-4409. For assistance, call Customer Service at	after 6/30/13 Please send a list of enrollees in any of these

	(900) 220 7000	sattings who have a longth of stay over 14 days
	(800) 220-7898.	settings who have a length of stay over14 days,
	If you are in a SNF, Rehab or LTAC Facility as of	as of 6-15-2013. Include first/last/DOB/ Facility/
	6/30/2013, and your stay will continue into July, your	Facility location and Facility contact if available.
	provider must call OrthoNet to pre-authorize the	Send by encrypted email to:
	continued stay.	PCIP.Documents@geha.com,
	continued stay.	Delon.Pinto@opm.gov,
		Dennis.Hodges@opm.gov.
Transplant Course and Kidneys	Authorization is not upon incl.	
Transplant – Cornea and Kidneys	Authorization is <u>not required</u> for cornea or kidney	Provider will need to authorize continued stay
	transplants. Authorization from InforMed is required	after 6/30/13 with InforMed.
	for hospital admission.	
	Ask your provider/hospital to call InforMed at (800)	
	242-1025; Fax: (866) 315-6314.	
Transplant - Other	Authorization is required for all other transplants and	Please submit list of pending transplant
	use of the Lifetrac Network (Select Facilities) is	enrollees. Include first/last name, DOB, type of
	required. For assistance, call (800) 220-7898, ask for	transplant, phase of transplant work-up
	extension 3100 and ask to speak with a transplant	(complete, in progress) date listed, facility where
	nurse. The nurse will request contact information for	enrollee is listed, currently hospitalized (yes/no).
	your current transplant coordinator to initiate	
	transition plans. To view Lifetrac Network facilities,	Send by encrypted email to:
	visit https://www.lifetracnetwork.com . Click on	PCIP.Documents@geha.com,
	Program Guide. See the notes at the bottom of the	Delon.Pinto@opm.gov,
	Program Grid to find Select network facilities.	<u>Dennis.Hodges@opm.gov</u> .
Spine Surgeries	Authorization from OrthoNet is required for any spinal	Spinal surgeries scheduled to be performed after
	surgery planned for 7/1/2013 and beyond. Your	7/1 will need to be authorized well in advance of
	provider must complete an authorization form. The	the surgery and BEFORE attempting to obtain
	form can be obtained at www.pciplan.com , choose the	inpatient authorization.
	provider tab, click on authorizations and select the	
	Spinal Surgery form. The applicable codes are listed on	
	the authorization form. For assistance, call (800) 220-	
	7898, request or enter Ext. 3100, and select Option 6.	
Experimental/Investigation Surgery or	Authorization is required. Please ask your provider to	
Treatment	fax medical records (including CPT codes) to (816) 257-	
	3255. For assistance, call Customer Service at (800)	

	220-7898, request or enter Ext. 3100, and select Option 6.	
Morbid Obesity Surgeries: Roux-en-Y Gastric Bypass (RYGB), Laparoscopic Adjustable Silicone Gastric Banding (LASGB), Sleeve Gastrectomy, Biliopancreatic Diversion (BPD) and Duodenal Switch (DS) Procedure.	Authorization is required. Please ask your provider to fax medical records (including CPT codes) to 816-434-4420. For assistance, call Customer Service at (800) 220-7898.	Bariatric surgeries scheduled to be performed after 7/1 will need to be authorized well in advance of the surgery and BEFORE attempting to obtain inpatient authorization.
Other Notes:		
Clinical Contact		Please provide a clinical contact for your state. Include name, phone, email address. Send by encrypted email to: PCIP.Documents@geha.com, Delon.Pinto@opm.gov, Dennis.Hodges@opm.gov.
Dialysis	No prior auth required	Please review all dialysis case. Please send a list of enrollees on dialysis, first/last/DOB/mailing address. Send by encrypted email to: PCIP.Documents@geha.com, Delon.Pinto@opm.gov, Dennis.Hodges@opm.gov.