

# **Charter Communications Precertification Program**

Charter Communications' (formerly Oceanic Time Warner Cable) health plans require precertification of hospital admissions and certain inpatient/outpatient services. Precertification requests are approved for medical necessity only. Approval is not a guarantee of benefits or payment and is contingent on standard eligibility verification. Failure to obtain precertification may result in a reduction of benefits or payment.

**To obtain precertification:** Submit your request to the reviewer listed below along with supporting clinical documentation at least two (2) business days **prior** to the planned service, surgery and/or admission; or within forty-eight (48) hours of an emergent admission. Forms are available on our website at hwmg.org.

- Hospitals: Submit the admission face sheet.
- All other providers: Submit a completed Precertification Request Form.

| Service Type                         | Precertification Reviewer and Contact Information  |  |
|--------------------------------------|--|--|
| Prescription Drugs                   | RxBenefits, Inc. Prior Authorization Review Department P.O. Box 382377 Birmingham, Alabama 35238-2377                          | Toll-Free (888) 608-8851<br>Fax (888) 610-1180   |
|                                      | Electronically via rxb.promptpa.com  |  |
| Medical Services in Hawaii           | HWMG Health Management Department 220 South King Street, Suite 1200 Honolulu, Hawaii 96813                                     | Phone (808) 791-7505<br>Toll-Free (800) 621-6998 ext. 302<br>Fax (808) 535-8398<br>Email HM@hwmg.org |
| Medical Services on U.S.<br>Mainland | Cigna or its delegated ancillary vendors Electronically via cignaforhcp.cigna.com or its delegated ancillary vendors' websites | Toll-Free (866) 494-4872<br>or (800) 882-4462  |

### **Services Requiring Precertification**

This list is subject to change at any time and without prior notice. Contact us or visit hwmg.org for the current list.

#### **INPATIENT SERVICES**

- Acute Care
- High-Risk Maternity
- · Long-Term Acute Care
- Rehabilitation
- Skilled Nursing Facility

#### **Behavioral Health**

- Detox
- Hospital
- Residential

#### **DRUGS**

- Botox (Botulinum Toxin A) and Similar Medications
- Home Infusion
- Injectables
- Biologics including Antineoplastics (chemotherapy)
- Any drug cost of \$1000 or more

### DURABLE MEDICAL EQUIPMENT (DME)

- Insulin Infusion Pump
- · Neuromuscular Stimulators
- · Orthotics and Prosthetics
- · Osteogenesis Stimulators
- Power Operated Vehicles
- Pumps
- Seat Lifts
- Speech Generating Devices
- TENS
- Wheelchairs
- · Any DME cost of \$500 or more

#### **EAR DEVICES**

- · Auditory Brain Stem Implant
- Cochlear Implant
- · Osseointegrated Implant

## GASTRIC BYPASS SURGERY HOME HEALTH SERVICES

#### **MISCELLANEOUS PROCEDURES**

- Keratoplasty
- Molecular Pathology and Gene Analysis

#### **OUTPATIENT PROCEDURES**

- Blepharoplasty
- Breast Reconstruction or Reduction
- Facial Reconstruction
- Rhinoplasty
- Varicose Vein Treatment
- Vascular Surgery

#### **SLEEP MANAGEMENT PROGRAMS**

- Diagnostic or therapeutic sleep studies
- · Obstructive sleep apnea

SPEECH THERAPY
SPINAL PROCEDURES
THERAPEUTIC RADIOLOGY

**TRANSPLANTS**