

## Halifax-HPI Precertification List

**Client Name: Halifax** 

Behavioral Health and Substance Use Disorder
Inpatient Psychiatric Hospitalization
Detoxification
Partial Hospitalization (PHP)
Intensive Outpatient (IOP)
Residential Treatment Center (RTC)
Subacute Residential Treatment Center
Crisis Stabilization Unit
Inpatient Medical
Acute Level of Care Hospitalizations
Hospice, Inpatient
Maternity (beyond standard 2/4 days)
Skilled Nursing Facility (SNF)
Acute Inpatient Rehab (AIR)
Subacute Care
Long Term Acute Care (LTAC)
Medication- Specialty Meds billed through Medical
Injectable or Infusible > \$2000 per injection/infusion
Oral > \$2000 per dose
Outpatient Medical/Surgical/Cosmetic
Ambulance Services (Non Urgent)
Air only
Dialysis
All Potentially Cosmetic Procedures (IP and OP)
Anesthesia for Dental Services (Facility Charge)
Artificial Cervical/Lumbar Disc Replacement
Bariatric Surgery
Breast Implant Removal
Breast Reduction or Enhancement
Clinical Trials
Cochlear Implants
Colonoscopy- routine screening
Colonoscopy- diagnostic



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Congenital Chest Wall Deformity Surgery (Pectus excavatum, Pectus Cainatum, Poland Syndrome)

Durable Medical Equipment (DME)

- DME Purchase > \$1000
- DME Rental in excess of 3 Months
- Neuromuscular Stimulator including TENS unit

Early Intervention Services

• Up to age 39 months or until Sep 1 of the year in which the child turns 3 years if born after April 1

**EGD** 

Endoscopic ultrasound (EUS)

Experimental, Investigational, New Technologies and/or unproven procedures/services

Eye Lid and Brow Surgery:

- Blepharoplasty
- Entropion repair
- · Ectropion repair
- Ptosis repair (eye brow, eye lid)

Formula (Metabolic, Enteral & infant formula with medical condition)

Gender Reassignment Surgery

Genetic Testing and Related Services

- Maternity related
- · Other medical conditions
- BRAC analysis

Gynecomastia Surgery

Home Health Care

Hospice Care (Home)

Learning Deficiencies, Behavioral Problems and Developmental Delay (after 3 years old)

**Nuclear Cardiac Stress Test** 

Obstructive Sleep Apnea Treatment (including but not limited to):

- Genioglossus Advancement
- Laser Assisted Uvula Palatoplasty (LAUP)
- Somnoplasty (RBOT)
- Uvulopalatopharungoplasty (UPPP)

Orthognathic Surgery (Jaw)



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Varicose Vein Surgery

Phototherapy, except for bilirubin
Prophylactic Mastectomy
Prosthetics > \$1000
Rhinophyma, excision or surgical planing
Rhinoplasty
Scar Revision or Repair, not limited to:
Keloid excision
Scar excision and/or surgery
TMJ treatment (surgery and devices)
Transcranial Magnetic Stimulation (TMS)
Transplants (Organ, Bone Marrow, and Stem Cell)