

# Predetermination Reviews

Fax clinical information to 833-719-1603.  
Precertification is required if procedure  
is performed in an inpatient setting.

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**Blue Cross and Blue Shield of Florida will only provide manual predetermination reviews for the services listed below:**

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- Automatic external defibrillator (K0606)
- Durable medical equipment (DME) greater than \$3,500 per line item
- Gender reassignment surgery
- Generic code used when no specific code is given
- Implantable defibrillator (33270, 33271, 33272, 33273, 33274, 33275)
- Lymphedema pumps (E0650, E0651, E0652)
- Mobile Cardiac Outpatient Telemetry (MCOT) (93228, 93229)
- Prosthesis over \$3,500 per line item
- Unlisted codes (example: 76499 or 37799)

## **Predetermination requests for procedures not on list:**

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If a provider submits a predetermination request for a procedure not on the list, we will notify him or her that we do not offer a predetermination for that service.

