Services Requiring Peer Review

a. Emergency health care does not require preauthorization.

b. Non-emergency procedures submitted for preauthorization requiring peer review include:

**Entire Spine (Cervical, Thoracic, Lumbar)**
- Multiple Level Fusions
- All Artificial Disc Replacements (ADR)
- SI Joint Fusions
- Bone Morphogenic Protein (BMP, InFuse)
- Spinal Cord Stimulator (Trial)
- Discogenic Pain—Multi-levels
- Annular Tear—Multi-levels
- TOS (Thoracic Outlet Syndrome)

**Any Investigational or Experimental Service or Device**

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