

# PRECERTIFICATION



Precertification is the process for determining whether the services delivered or scheduled to be delivered to a patient are medically necessary and appropriate.

## How it Works:

- To initiate the required precertification, refer to the phone number or email address on the back of your medical insurance card or begin the process online through your MyIMG account at <https://www.imglobal.com/member>
- Either you, the treating physician, or health care provider may initiate the precertification process
- In case of an emergency, you have the flexibility to notify IMG within 48 hours after the emergency to initiate precertification. You must be admitted to request precertification; emergency room visits do not require precertification. Observation periods for less than 23 hours do not require precertification

### Note:

Precertification is not a verification of benefits or a guarantee of payment.

## ADDITIONAL NOTES

If your hospital stay is extended, then you should request that the hospital or provider notify the IMG precertification team that your stay has been extended.

If a step in the process is missed, then the precertification team will attempt to complete the process via a callback to you and/or your provider.

If IMG does not receive a response during the attempt to complete the process, then the precertification request may be withdrawn.

The following treatments and services must be precertified or there could be a reduction in benefits:

- Chemotherapy
- Extended Care Facility
- Home Nursing Care
- Hospice Care
- Inpatient Hospitalization
- Interfacility Ambulance Transfer
- Radiation Therapy
- Surgery or Surgical procedure
- Transplant
- Maternity

## PRECERTIFICATION AND MATERNITY

In order to precertify a birth, you must request precertification within 60 days of your due date. You should supply a birth location during the precertification process. It is of the utmost importance to keep IMG's precertification department in the loop if anything changes with admission/delivery dates and to contact them within 48 hours of giving birth with admission date and birth information. You must to notify your group administrator within 30 days after the birth to ensure the baby is set up with the appropriate benefits.

## PRECERTIFICATION PROCESS

1. Initial request comes in for precertification via email/MyIMG/fax/provider call/member call
2. Precertification team reviews member's eligibility
3. Request is built in the system and IMG requests medical records. If the request comes into IMG by provider phone call, the medical records are requested over the phone. If the precertification request is submitted via email, a response is sent to the provider requesting the records
  - a. The medical records and a diagnosis code must support the procedure requested
4. Once the medical records come into IMG's precertification team, a medical team reviews the request. The medical team will also determine if the procedure is medically necessary. Please note that even if the procedure is medically necessary, it may not be a covered benefit under this plan; the member should review their benefits to ensure that the plan covers the procedure and call IMG with any questions
5. After the review for medical necessity, a letter is sent to the provider and the member to let them know the procedure is approved or denied (by email or by postal mail); if denied you have the right to appeal
  - a. If a member is overseas and the precertification request comes in via email, the precertification decision will be sent back to the member via the email on file. IMG cannot mail a precertification notification overseas
  - b. The member can also follow up with IMG via phone or the precertification email box



### To Initiate Precertification:

Phone: +1.317.655.4500

email: [precertification@imglobal.com](mailto:precertification@imglobal.com)

