

**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 (ADRs)
- 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**