

2026 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus

Section 3. How You Get Care

You need prior Plan approval for certain services:

Special prior authorization situations related to coordination of benefits (COB)

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The examples below provide the special situations regarding prior approval and precertification when Medicare is the primary payor.

Service Type: Inpatient hospital admission

Primary Payor: Medicare Part A

Precertification: No

Prior Approval: Not applicable

Service Type: Medicare hospital benefits exhausted and you do not want to use your Medicare lifetime reserve days

Primary Payor: Medicare Part A benefits not provided

Precertification: Yes

Prior Approval: Not applicable

Service Type: Severe obesity surgery when performed during an inpatient admission

Primary Payor: Medicare Part A

Precertification: No

Prior Approval: Yes

Service Type: Severe obesity surgery in an outpatient hospital or ambulatory surgical center (ASC)

Primary Payor: Medicare Part B

Precertification: Not applicable

Prior Approval: Yes

Service Type: Residential treatment center admission – inpatient

Primary Payor: Medicare Part A

Precertification: Yes

Prior Approval: Not applicable

Service Type: Residential treatment center – outpatient care

Primary Payor: Medicare Part B

Precertification: Not applicable

Prior Approval: Yes

The examples below provide the special situations regarding prior approval and precertification when another healthcare insurance is the primary payor.

Service Type: Inpatient hospital admission

Primary Payor: Other healthcare insurance

Precertification: No

Prior Approval: Not applicable

Service Type: Severe obesity surgery when performed during an inpatient admission

Primary Payor: Other healthcare insurance

Precertification: No

Prior Approval: Yes

Service Type: Severe obesity surgery in an outpatient hospital or ambulatory surgical center (ASC)

Primary Payor: Other healthcare insurance

Precertification: Not applicable

Prior Approval: Yes

Service Type: Residential treatment center admission – inpatient

Primary Payor: Other healthcare insurance

Precertification: Yes

Prior Approval: Not applicable

Service Type: Residential treatment center – outpatient care

Primary Payor: Other healthcare insurance

Precertification: Not applicable

Prior Approval: Yes