

Medical Necessity and Prior Authorization Enrollee Responsibilities and Timeframes



Florida Combined Life

An Independent Licensee of the
Blue Cross and Blue Shield Association

Medical Necessity means any services, care, or supplies received while covered, which are determined by FCL, to be: 1) consistent with the symptom, diagnosis, and treatment of the insured's condition; 2) in accordance with standards of good dental or medical practice; 3) approved by the appropriate dental or medical body or board for the condition in question; 4) not primarily for the comfort or convenience of the insured, or dentist; 5) the most appropriate, efficient, and economical dental or medical supply, service, or level of care which can be safely provided; and 6) not cosmetic in nature. FCL will make final determination as to which services are medically necessary based upon review by our consulting dentists.

NOTE: The fact that a dentist may prescribe, order, recommend, furnish or approve a service or supply does not, of itself, make it medically necessary for a covered service; nor does it make the charge an allowable expense under this policy, even though it is not specifically listed as an exclusion.

Medically Necessary Pediatric Orthodontic Treatment means treatment as a result of a handicapping malocclusion and congenital or developmental malformations related to or developed as a result of cleft palate, with or without cleft lip.

Prior Authorization is a process required for specified dental procedures before they are performed. Typically the dental or healthcare provider will obtain this preauthorization for the insured, but it is your responsibility to ensure the preauthorization is obtained before the services are performed. Services that are not preauthorized when required are not payable by FCL and will be the insured's responsibility.

Time Frame and Required Documentation for Prior Authorization Requests

Requests for preauthorization of benefits should be submitted within thirty (30) days of the date of the initial diagnosis or exam. The dentist or healthcare provider or the insured must submit for FCL's review, x-rays, a complete treatment plan, and in some cases, more substantiating material such as a study model.