

# Predetermination Reviews

Fax clinical information to 1-833-719-1603.  
Precertification is required if procedure  
is performed in an inpatient setting.

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## Manual predeterminations will be provided for the following services:

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- Automatic external defibrillator (K0606)
- Implantable defibrillator (33270, 33271, 33272, 33273, 33274, 33275)
- Mobile Cardiac Outpatient Telemetry (MCOT) (93228, 93229)

## Predetermination requests for procedures not on list:

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If a provider submits a predetermination request for a procedure not on the list, we will notify him or her that we do not offer a predetermination for that service.

**COUPE HEALTH**