

**2023 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus****Section 5(b). Surgical and Anesthesia Services Provided by Physicians and Other Healthcare Professionals****Page 62**

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**Organ/Tissue Transplants****Prior approval requirements:**

For the transplants listed below, you must obtain prior approval (see pages [19-22](#)) from the Local Plan, for the procedure and precertification (see page [19](#)) for the facility admission. Prior approval is not required for kidney transplants or for transplants of corneal tissue. Additional benefit requirements apply for the coverage of certain transplants, see pages [66-67](#).

- Blood or marrow stem cell transplant procedures  
Note: See pages [64-65](#) for **additional requirements** that apply to blood or marrow stem cell transplants that are covered only as part of a **clinical trial**.
  - Autologous pancreas islet cell transplant
  - Heart-lung transplant
  - Heart transplant
  - Implantation of an artificial heart as a bridge to transplant or destination therapy
  - Intestinal transplants (small intestine with or without other organs)
  - Liver transplant
  - Lung (single, double, or lobar) transplant
  - Pancreas transplant
  - Combination liver-kidney transplant
  - Combination pancreas-kidney transplant
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**Covered organ/tissue transplants** are listed on page [66](#). Benefits are subject to medical necessity and experimental/investigational review, and to the prior approval requirements shown above.

In addition, benefits are only available for some transplants (and covered related services) when performed in a Blue Distinction Center or Medicare-Approved Transplant Program. Please see pages

[65-66](#) for more information on the benefits available for the services below. Benefits for implantation of an artificial heart as a bridge to transplant or destination therapy are only available when the facility is designated as a Blue Distinction Center for heart transplants.

**Must be performed in a Blue Distinction Center for Transplant:**

- Blood or marrow stem cell transplants
- Heart transplants
- Liver transplants
- Adult single, double or lobar lung transplants
- Adult combination liver-kidney transplants

**Must be performed in a Medicare-Approved Transplant Program:**

- Heart-lung transplants
  - Kidney
  - Intestinal
  - Adult pancreas transplants
  - Pediatric lung transplants
  - Adult combination pancreas-kidney transplants
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