

# Prior Authorization Requirements for UnitedHealthcare Connected TX (Medicare-Medicaid Plan)

## General Information

This list contains prior authorization requirements for care providers who participate with UnitedHealthcare Connected TX (Medicare-Medicaid plan) inpatient and outpatient services.

To request prior authorization, please submit your request online, or by phone or fax:

- **Online:** Use the Prior Authorization and Notification tool on Link. Go to [UHCprovider.com](http://UHCprovider.com) and click on the Link button in the top right corner. Then, select the Prior Authorization and Notification tile on your Link dashboard.
- **Phone:** Call 866-604-3267.
- **Fax to 877-940-1972.** Fax form is available at [UHCprovider.com/TXCommunityPlan](http://UHCprovider.com/TXCommunityPlan) > Prior Authorization and Notification Resources > Prior Authorization Forms.

**Prior authorization is not required for emergency or urgent care. Out-of-network physicians, facilities and other health care providers must request prior authorization for all procedures and services, excluding emergent or urgent care.**

| Category  | Subcategory | Code  |   | Diagnosis Code                 | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization  |
|---|-------------|---|---|--------------------------------|------------------------------------|---|
| <b>Behavioral Health Services</b>   |             |   |   |                                |                                    | Many of our benefit plans provide coverage for behavioral health services through a designated behavioral health network. Please call 888-887-9003 when referring for mental health and substance use services. |
| <b>Bone Growth Stimulator</b>   |             | 20974<br>20979  | 20975   |                                | Jan. 1, 2015                       |   |
| <b>BRCA Genetic Testing</b>   |             | 81163<br>81165  | 81164<br>81166  |                                | Jan. 1, 2019                       |   |
|   |             | 81212<br>81216  | 81215<br>81217  |                                | Jan. 1, 2015                       |   |
| <b>Breast Reconstruction (Non-Mastectomy)</b><br>Reconstruction of the breast other than following mastectomy |             | 19316<br>19324<br>19328<br>19340<br>19350<br>19357<br>19364<br>19367<br>19369<br>19371<br>19396 | 19318<br>19325<br>19330<br>19342<br>19355<br>19361<br>19366<br>19368<br>19370<br>19380<br>L8600 | Breast Reconstruction DX codes | Jan. 1, 2015                       | Prior authorization is not required for these codes with Breast Reconstruction DX codes.<br><br>Prior authorization is required for all other DX codes.   |

| Category   | Subcategory | Code  |       | Diagnosis Code                     | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|--|-------------|-------|-------|------------------------------------|------------------------------------|--|
| <b>Cardiology</b>  |             | 33270 |       |                                    | Oct. 1, 2016                       | <p>Prior authorization is required for participating physicians for inpatient, outpatient and office-based electrophysiology implants prior to performance.</p> <p>Prior authorization is required for participating physicians for outpatient and office-based diagnostic catheterizations, echocardiograms and stress echoes prior to performance. For prior authorization, please submit requests online by using the Prior Authorization and Notification tool on Link. Go to <b>UHCprovider.com</b> and click on the Link button in the top right corner. Then, select the Prior Authorization and Notification tile on your Link dashboard. Or, call 866-889-8054.</p> |
|  |             | 33206 | 33207 |                                    | Jan. 1, 2015                       |  |
|  |             | 33208 | 33212 |                                    |                                    |  |
|  |             | 33213 | 33214 |                                    |                                    |  |
|  |             | 33221 | 33224 |                                    |                                    |  |
|  |             | 33225 | 33227 |                                    |                                    |  |
|  |             | 33228 | 33229 |                                    |                                    |  |
|  |             | 33230 | 33231 |                                    |                                    |  |
|  |             | 33240 | 33249 |                                    |                                    |  |
|  |             | 33262 | 33263 |                                    |                                    |  |
|  |             | 33264 | 93350 |                                    |                                    |  |
|  |             | 93351 | 93452 |                                    |                                    |  |
|  |             | 93453 | 93454 |                                    |                                    |  |
|  |             | 93455 | 93456 |                                    |                                    |  |
|  |             | 93457 | 93458 |                                    |                                    |  |
|  | 93459       | 93460 |       |                                    |                                    |  |
|  | 93461       |       |       |                                    |                                    |  |
| <b>Cardiovascular</b>  |             | 75710 | 75716 | Lower-Extremity Angiogram DX codes | Oct. 1, 2019                       | Prior authorization is required for lower-extremity angiograms only.   |
| <b>Cochlear Implants and Other Auditory Implants</b><br>A medical device within the inner ear and an external portion to help persons with profound sensorineural deafness achieve conversational speech |             | 69710 | 69711 |                                    | Jan. 1, 2015                       |  |
|  |             | 69714 | 69715 |                                    |                                    |  |
|  |             | 69718 | 69799 |                                    |                                    |  |
|  |             | 69930 | 92601 |                                    |                                    |  |
|  |             | 92602 | 92603 |                                    |                                    |  |
|  |             | 92604 | L8614 |                                    |                                    |  |
|  |             | L8619 | L8690 |                                    |                                    |  |
|  |             | L8691 | L8692 |                                    |                                    |  |
|  |             | V5273 |       |                                    |                                    |  |

| Category  | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |  |
|---|-------------|-------|-------|----------------|------------------------------------|--|--|
| <b>Cosmetic &amp; Reconstructive Procedures</b><br>Cosmetic procedures that change or improve physical appearance, without significantly improving or restoring physiological function<br><br>Reconstructive procedures that treat a medical condition or improve or restore physiologic function |             | 31298 |       |                | Oct. 1, 2018                       |  |  |
|   |             | 21299 | 31295 |                | July 1, 2017                       |  |  |
|   |             | 31296 | 31297 |                |                                    |  |  |
|   |             | 11920 | 11921 |                | Jan. 1, 2015                       |  |  |
|   |             |       | 11922 | 11950          |                                    |  |  |
|   |             |       | 11951 | 11952          |                                    |  |  |
|   |             |       | 11954 | 11960          |                                    |  |  |
|   |             |       | 11971 | 15775          |                                    |  |  |
|   |             |       | 15776 | 15780          |                                    |  |  |
|   |             |       | 15781 | 15782          |                                    |  |  |
|   |             |       | 15783 | 15786          |                                    |  |  |
|   |             |       | 15787 | 15788          |                                    |  |  |
|   |             |       | 15789 | 15792          |                                    |  |  |
|   |             |       | 15793 | 15819          |                                    |  |  |
|   |             |       | 15820 | 15821          |                                    |  |  |
|   |             |       | 15822 | 15823          |                                    |  |  |
|   |             |       | 15824 | 15825          |                                    |  |  |
|   |             |       | 15826 | 15828          |                                    |  |  |
|   |             |       | 15829 | 15830          |                                    |  |  |
|   |             |       | 15832 | 15833          |                                    |  |  |
|   |             |       | 15834 | 15835          |                                    |  |  |
|   |             |       | 15836 | 15837          |                                    |  |  |
|   |             |       | 15838 | 15839          |                                    |  |  |
|   |             |       | 15847 | 15877          |                                    |  |  |
|   |             |       | 15878 | 15879          |                                    |  |  |
|   |             |       | 17106 | 17107          |                                    |  |  |
|   |             |       | 17108 | 17380          |                                    |  |  |
|   |             |       | 17999 | 19300          |                                    |  |  |
|   |             |       | 21172 | 21175          |                                    |  |  |
|   |             |       | 21179 | 21180          |                                    |  |  |
|   |             |       | 21181 | 21182          |                                    |  |  |
|   |             |       | 21183 | 21184          |                                    |  |  |
|   |             |       | 21230 | 21235          |                                    |  |  |
|   |             |       | 21256 | 21260          |                                    |  |  |
|   |             |       | 21261 | 21263          |                                    |  |  |
|   |             |       | 21267 | 21268          |                                    |  |  |
|   |             |       | 21270 | 21275          |                                    |  |  |
|   |             |       | 21740 | 21742          |                                    |  |  |
|   |             |       | 21743 | 28344          |                                    |  |  |
|   |             |       | 30120 | 30540          |                                    |  |  |
|   | 30545       | 30560 |       |                |                                    |  |  |
|   | 30620       | 40500 |       |                |                                    |  |  |
|   | 67900       | 67901 |       |                |                                    |  |  |
|   | 67902       | 67903 |       |                |                                    |  |  |
|   | 67904       | 67906 |       |                |                                    |  |  |
|   | 67908       | 67909 |       |                |                                    |  |  |
|   | 67912       | 67950 |       |                |                                    |  |  |
|   | 67961       | 67966 |       |                |                                    |  |  |
|   | 69090       | 69300 |       |                |                                    |  |  |
|   | 69320       | Q2026 |       |                |                                    |  |  |
|   | Q2202       | S2202 |       |                |                                    |  |  |

| Category  | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|---|-------------|-------|-------|----------------|------------------------------------|--|
| <b>Durable Medical Equipment (DME) – Incontinence Supplies</b>  |             |       |       |                |                                    | <p>Prior authorization is required for incontinence supplies through the service coordinator when not provided by Longhorn Health Solutions. To obtain incontinence supplies from Longhorn Health Solutions, please call <b>866-295-2319</b>.</p> <p>To obtain incontinence supplies from a provider other than Longhorn Health Solutions, please call the service coordinator at <b>800-349-0550</b>.</p> |
| <b>Durable Medical Equipment (DME)</b><br><br>Prosthetics are not DME – see <i>Orthotics and prosthetics</i> .<br><br>Some home health care services may qualify but are not subject to the cost threshold – see Home health care |             | E1239 | K0812 |                | July 1, 2017                       | Prior authorization is required <b>regardless of billed amount</b> .   |
|   |             | K0813 | K0814 |                |                                    |  |
|   |             | K0815 | K0816 |                |                                    |  |
|   |             | K0820 | K0828 |                |                                    |  |
|   |             | K0829 | K0830 |                |                                    |  |
|   |             | K0831 | K0835 |                |                                    |  |
|   |             | K0837 | K0838 |                |                                    |  |
|   |             | K0839 | K0841 |                |                                    |  |
|   |             | K0842 | K0843 |                |                                    |  |
|   |             | K0857 | K0859 |                |                                    |  |
|   |             | K0869 | K0870 |                |                                    |  |
|   |             | K0871 | K0877 |                |                                    |  |
|   |             | K0878 | K0879 |                |                                    |  |
|   |             | K0880 | K0884 |                |                                    |  |
|   |             | K0885 | K0886 |                |                                    |  |
|   |             | K0890 | K0891 |                |                                    |  |
|   |             | K0898 | K0899 |                |                                    |  |
|   |             | E0466 | E1230 |                | Jan. 1, 2015                       | Prior authorization is required <b>regardless of billed amount</b> .   |
|   |             | E2310 | E2311 |                |                                    |  |
|   |             | E2321 | K0800 |                |                                    |  |
|   |             | K0801 | K0802 |                |                                    |  |
|   |             | K0806 | K0808 |                |                                    |  |
|   |             | K0821 | K0822 |                |                                    |  |
|   |             | K0823 | K0824 |                |                                    |  |
|   |             | K0825 | K0826 |                |                                    |  |
|   |             | K0827 | K0836 |                |                                    |  |
|   |             | K0840 | K0848 |                |                                    |  |
|   |             | K0849 | K0850 |                |                                    |  |
|   |             | K0851 | K0852 |                |                                    |  |
|   |             | K0853 | K0854 |                |                                    |  |
|   |             | K0855 | K0856 |                |                                    |  |
|   |             | K0858 | K0860 |                |                                    |  |
|   |             | K0861 | K0862 |                |                                    |  |
|   |             | K0863 | K0864 |                |                                    |  |
|   |             | E0787 |       |                | May 1, 2020                        | Prior authorization is required only for a <b>retail purchase or cumulative rental cost of more than \$1,000</b> .   |
|   |             | E0170 | E0193 |                | July 1, 2017                       |  |
|   |             | E0203 | E0246 |                |                                    |  |
|   |             | E0316 | E0328 |                |                                    |  |

| Category                                       | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |
|--|-------------|-------|-------|----------------|------------------------------------|--|
| Durable Medical Equipment (DME)<br>(continued) |             | E0329 | E0350 |                |                                    |  |
|  |             | E0373 | E0459 |                |                                    |  |
|  |             | E0462 | E0603 |                |                                    |  |
|  |             | E0616 | E0617 |                |                                    |  |
|  |             | E0618 | E0635 |                |                                    |  |
|  |             | E0636 | E0639 |                |                                    |  |
|  |             | E0640 | E0642 |                |                                    |  |
|  |             | E0700 | E0710 |                |                                    |  |
|  |             | E0740 | E0746 |                |                                    |  |
|  |             | E0761 | E0770 |                |                                    |  |
|  |             | E0785 | E0830 |                |                                    |  |
|  |             | E0970 | E0983 |                |                                    |  |
|  |             | E0988 | E1017 |                |                                    |  |
|  |             | E1020 | E1029 |                |                                    |  |
|  |             | E1035 | E1036 |                |                                    |  |
|  |             | E1037 | E1050 |                |                                    |  |
|  |             | E1070 | E1084 |                |                                    |  |
|  |             | E1085 | E1086 |                |                                    |  |
|  |             | E1087 | E1089 |                |                                    |  |
|  |             | E1100 | E1110 |                |                                    |  |
|  |             | E1170 | E1171 |                |                                    |  |
|  |             | E1172 | E1180 |                |                                    |  |
|  |             | E1190 | E1195 |                |                                    |  |
|  |             | E1200 | E1222 |                |                                    |  |
|  |             | E1224 | E1227 |                |                                    |  |
|  |             | E1228 | E1229 |                |                                    |  |
|  |             | E1231 | E1270 |                |                                    |  |
|  |             | E1280 | E1295 |                |                                    |  |
|  |             | E1296 | E1297 |                |                                    |  |
|  |             | E1298 | E1500 |                |                                    |  |
|  |             | E1510 | E1520 |                |                                    |  |
|  |             | E1530 | E1540 |                |                                    |  |
|  |             | E1550 | E1560 |                |                                    |  |
|  |             | E1575 | E1580 |                |                                    |  |
|  |             | E1590 | E1592 |                |                                    |  |
|  |             | E1594 | E1600 |                |                                    |  |
|  |             | E1615 | E1620 |                |                                    |  |
|  |             | E1625 | E1630 |                |                                    |  |
|  |             | E1632 | E1634 |                |                                    |  |
|  |             | E1635 | E1636 |                |                                    |  |
|  |             | E1637 | E1639 |                |                                    |  |
|  |             | E1699 | K0020 |                |                                    |  |
|  |             | K0037 | K0039 |                |                                    |  |
|  |             | K0044 | K0046 |                |                                    |  |
|  |             | K0047 | K0050 |                |                                    |  |
|  |             | K0051 | K0056 |                |                                    |  |
|  | K0065       | K0072 |       |                |                                    |  |
|  | K0073       | K0098 |       |                |                                    |  |
|  | K0105       | K0455 |       |                |                                    |  |
|  | K0609       | K0743 |       |                |                                    |  |
|  | K0744       | K0745 |       |                |                                    |  |
|  | K0746       |       |       |                |                                    |  |

**Durable Medical  
Equipment (DME)  
(continued)**

A9280  
A9999  
E0194  
E0277  
E0302  
E0465  
E0486  
E0670  
E0693  
E0745  
E0764  
E0783  
E0786  
E0986  
E1003  
E1005  
E1007  
E1009  
E1011  
E1030  
E1232  
E1234  
E1236  
E1238  
E1399  
E1801  
E1805  
E1811  
E1815  
E1825  
E1840  
E2312  
E2325  
E2328  
E2330  
E2402  
E2502  
E2506  
E2510  
E2512  
K0007  
K0730  
L0464  
L1005  
L3999  
L5400  
L5535  
L5999  
L6382  
Q0479  
Q0481  
Q0483  
Q0489  
Q0496  
S1040  
T5999

A9900  
B9999  
E0231  
E0300  
E0304  
E0483  
E0638  
E0692  
E0694  
E0762  
E0782  
E0784  
E0984  
E1002  
E1004  
E1006  
E1008  
E1010  
E1018  
E1161  
E1233  
E1235  
E1237  
E1310  
E1800  
E1802  
E1810  
E1812  
E1818  
E1830  
E2227  
E2322  
E2327  
E2329  
E2376  
E2500  
E2504  
E2508  
E2511  
K0005  
K0108  
L0462  
L1000  
L2136  
L5000  
L5420  
L5585  
L6380  
L6384  
Q0480  
Q0482  
Q0484  
Q0495  
Q0503  
T1999  
V2786

Jan. 1, 2015

| Category   | Subcategory | Code           |                | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |
|--|-------------|----------------|----------------|----------------|------------------------------------|--|
| <b>Enteral Services</b><br>In-home nutritional therapy, either enteral or through a gastrostomy tube |             | B4100<br>B4103 | B4102<br>B4104 |                | Jan. 1, 2015                       |  |
| <b>Experimental &amp; Investigational (and/or Linked Services)</b>                                   |             | A4226          |                |                | May 1, 2020                        |  |
|  |             | 22867          | 22869          |                | Jan. 1, 2017                       |  |
|  |             | 33477          |                |                | March 1, 2016                      |  |
|  |             | 0054T          | 0055T          |                | Jan. 1, 2015                       |  |
|  |             | 0085T          | 0100T          |                |                                    |  |
|  |             | 0101T          | 0102T          |                |                                    |  |
|  |             | 0106T          | 0107T          |                |                                    |  |
|  |             | 0108T          | 0109T          |                |                                    |  |
|  |             | 0110T          | 0111T          |                |                                    |  |
|  |             | 0174T          | 0175T          |                |                                    |  |
|  |             | 0191T          | 0198T          |                |                                    |  |
|  |             | 0200T          | 0201T          |                |                                    |  |
|  |             | 0207T          | 0213T          |                |                                    |  |
|  |             | 0214T          | 0215T          |                |                                    |  |
|  |             | 0216T          | 0217T          |                |                                    |  |
|  |             | 0218T          | 0230T          |                |                                    |  |
|  |             | 0231T          | 0253T          |                |                                    |  |
|  |             | 0263T          | 0264T          |                |                                    |  |
|  |             | 0265T          | 0266T          |                |                                    |  |
|  |             | 0267T          | 0268T          |                |                                    |  |
|  |             | 0269T          | 0270T          |                |                                    |  |
|  |             | 0271T          | 0272T          |                |                                    |  |
|  |             | 0273T          | 0274T          |                |                                    |  |
|  |             | 0275T          | 20985          |                |                                    |  |
|  |             | 22505          | 25259          |                |                                    |  |
|  |             | 27275          | 27860          |                |                                    |  |
|  |             | 28446          | 29880          |                |                                    |  |
|  |             | 31634          | 43257          |                |                                    |  |
|  |             | 53855          | 53860          |                |                                    |  |
|  |             | 54240          | 55840          |                |                                    |  |
|  |             | 58353          | 58356          |                |                                    |  |
|  |             | 58563          | 62263          |                |                                    |  |
|  |             | 62264          | 62290          |                |                                    |  |
|  | 62291       | 62292          |                |                |                                    |  |
|  | 64566       | 64722          |                |                |                                    |  |
|  | 64744       | 65765          |                |                |                                    |  |
|  | 65767       | 66180          |                |                |                                    |  |
|  | 78351       | 82523          |                |                |                                    |  |
|  | 85547       | 90867          |                |                |                                    |  |
|  | 90868       | 90869          |                |                |                                    |  |
|  | 91117       | 91132          |                |                |                                    |  |
|  | 91133       | 93668          |                |                |                                    |  |
|  | 94011       | 94012          |                |                |                                    |  |

| Category   | Subcategory | Code  |       | Diagnosis Code                      | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization                  |
|--|-------------|-------|-------|-------------------------------------|------------------------------------|---|
| <b>Experimental &amp; Investigational (and/or Linked Services) (continued)</b> |             | 94013 | 95250 |                                     |                                    |   |
|  |             | 95251 | 95905 |                                     |                                    |   |
|  |             | 95965 | 95966 |                                     |                                    |   |
|  |             | 95967 | 96000 |                                     |                                    |   |
|  |             | 96001 | 96003 |                                     |                                    |   |
|  |             | 96004 | 96902 |                                     |                                    |   |
|  |             | 99174 | A4575 |                                     |                                    |   |
|  |             | A4638 | A6000 |                                     |                                    |   |
|  |             | A9274 | A9276 |                                     |                                    |   |
|  |             | A9277 | A9278 |                                     |                                    |   |
|  |             | E0446 | E1831 |                                     |                                    |   |
|  |             | G0295 | G0329 |                                     |                                    |   |
|  |             | G0341 | G0342 |                                     |                                    |   |
|  |             | G0343 | G9147 |                                     |                                    |   |
|  |             | M0076 | P2031 |                                     |                                    |   |
|  |             | P2033 | P2038 |                                     |                                    |   |
|  |             | S0810 | S1030 |                                     |                                    |   |
|  |             | S1031 | S2102 |                                     |                                    |   |
|  |             | S2300 | S2325 |                                     |                                    |   |
|  |             | S3652 | S3902 |                                     |                                    |   |
|  | S9001       | S9025 |       |                                     |                                    |   |
|  | S9055       | S9349 |       |                                     |                                    |   |
|  | S9988       | S9990 |       |                                     |                                    |   |
|  | S9991       |       |       |                                     |                                    |   |
| <b>Femoroacetabular Impingement Syndrome (FAI)</b>                             |             | 29914 | 29915 |                                     | July 1, 2017                       |   |
|  |             | 29916 |       |                                     |                                    |   |
| <b>Gender Dysphoria Treatment</b>  |             | 55970 | 55980 |                                     | July 1, 2017                       | Prior authorization is required for these codes with any DX.              |
|  |             | 14000 | 14001 | Gender Dysphoria Treatment DX Codes | July 1, 2017                       | Prior authorization is only required for these codes with these DX codes. |
|  | 14041       | 15734 |       |                                     |                                    |   |
|  | 15738       | 15750 |       |                                     |                                    |   |
|  | 15757       | 15758 |       |                                     |                                    |   |
|  | 19303       | 21899 |       |                                     |                                    |   |
|  | 31599       | 31899 |       |                                     |                                    |   |
|  | 53410       | 53420 |       |                                     |                                    |   |
|  | 53425       | 53430 |       |                                     |                                    |   |
|  | 54125       | 54400 |       |                                     |                                    |   |
|  | 54401       | 54405 |       |                                     |                                    |   |
|  | 54408       | 54520 |       |                                     |                                    |   |
|  | 54660       | 54690 |       |                                     |                                    |   |
|  | 55175       | 55180 |       |                                     |                                    |   |
|  | 55866       | 56625 |       |                                     |                                    |   |
|  | 56800       | 56805 |       |                                     |                                    |   |



| Category  | Subcategory  | Code  |       | Diagnosis Code                      | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization                  |
|---|--|-------|-------|-------------------------------------|------------------------------------|---|
| <b>Gender Dysphoria Treatment (continued)</b>   |  | 57106 | 57110 | Gender Dysphoria Treatment DX Codes | July 1, 2017                       | Prior authorization is only required for these codes with these DX codes. |
|   |  | 57291 | 57292 |                                     |                                    |   |
|   |  | 57295 | 57296 |                                     |                                    |   |
|   |  | 57335 | 57426 |                                     |                                    |   |
|   |  | 58661 | 58720 |                                     |                                    |   |
|   |  | 58940 | 64856 |                                     |                                    |   |
|   |  | 64892 | 64896 |                                     |                                    |   |
|   |  | 92507 | 92508 |                                     |                                    |   |
| <b>Hysterectomy – Inpatient Only</b><br>Vaginal hysterectomies                                    |  | 58260 | 58262 |                                     | July 1, 2017                       |   |
|   |  | 58263 | 58267 |                                     |                                    |   |
|   |  | 58270 | 58275 |                                     |                                    |   |
|   |  | 58280 | 58290 |                                     |                                    |   |
|   |  | 58291 | 58292 |                                     |                                    |   |
|   |  | 58293 | 58294 |                                     |                                    |   |
| <b>Hysterectomy – Inpatient and Outpatient Procedures</b><br>Abdominal and laparoscopic surgeries |  | 58150 | 58152 |                                     | July 1, 2017                       |   |
|   |  | 58180 | 58541 |                                     |                                    |   |
|   |  | 58542 | 58543 |                                     |                                    |   |
|   |  | 58544 | 58550 |                                     |                                    |   |
|   |  | 58552 | 58553 |                                     |                                    |   |
|   |  | 58554 | 58570 |                                     |                                    |   |
|   |  | 58571 | 58572 |                                     |                                    |   |
| <b>Injectable Medications</b>   | Adakveo®   | J0791 |       |                                     | July 1, 2020                       |   |
|   | Givlaari®  | J0223 |       |                                     |                                    |   |
|   | Reblozyl®  | J0896 |       |                                     |                                    |   |
|   | Zolgensma®   | J3399 |       |                                     |                                    |   |
|   | Onpattro™  | J0222 |       |                                     | Oct. 1, 2019                       |   |
|   | Ultomiris™   | J1303 |       |                                     |                                    |   |
|   | Soliris®   | J1300 |       |                                     | July 1, 2019                       |   |
|   | Crysvita®  | J0584 |       |                                     | Jan. 1, 2019                       |   |
|   | Luxturna™  | J3398 |       |                                     |                                    |   |
|   | Radicava®  | J1301 |       |                                     |                                    |   |
|   | Spinraza™  | J2326 |       |                                     | April 1, 2018                      |   |
| <b>Injectable Medications – Step Therapy</b>  | Colony-Stimulating Factors                                 | Q5120 |       |                                     | July 1, 2020                       |   |
|   | Hyaluronic Acid Polymers (FDA approved as medical devices) | J7333 |       |                                     |                                    |   |

| Category  | Subcategory  | Code                                      |   | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|---|--|---|---|----------------|------------------------------------|--|
| Injectable Medications – Step Therapy (continued) | Immuno-modulators  | Q5121                                     |   |                |                                    |  |
|   | Colony-Stimulating Factors                                 | J1442<br>Q5108                            | J1447<br>Q5110                            |                | May 1, 2020                        |  |
|   | Erythropoiesis Stimulating Agents                          | J0881                                     | J0885*                                    |                | Jan. 1, 2020                       | * For code J0885, prior authorization is required for Procrit only (does not include Epopen).  |
|   | Hyaluronic Acid Polymers (FDA approved as medical devices) | J7320<br>J7322<br>J7324<br>J7327<br>J7331 | J7321<br>J7323<br>J7326<br>J7329<br>J7332 |                |                                    |  |
|   | Immuno-modulators  | J1745                                     |   |                |                                    |  |
|   |  |   |   |                |                                    |  |
|   |  |   |   |                |                                    |  |
| Inpatient Admissions                              |  |   |   |                |                                    | Notification required  |
| Inpatient Admissions Post-Acute Services:         |  |   |   |                |                                    | <p>Prior authorization and notification of admission date is required for these facilities providing post-acute inpatient services:</p> <ul style="list-style-type: none"> <li>• Acute care hospitals</li> <li>• Acute inpatient rehabilitation</li> <li>• Critical access hospitals</li> <li>• Long-term acute care hospitals</li> <li>• Skilled nursing facilities</li> </ul> <p><b>Note:</b> These plans are excluded from the skilled nursing facility prior authorization requirement: UnitedHealthcare Assisted Living Plans (HMO SNP), (HMO-POS SNP), (PPO SNP) UnitedHealthcare Nursing Home</p> |

| Category  | Subcategory | Code  |   | Diagnosis Code | Prior Authorization Effective Date                | Additional Information/How to Obtain Prior Authorization  |
|---|-------------|---|---|----------------|---|---|
| <b>Joint Replacement</b><br>Joint, total hip and knee replacement procedures        |             | 23470<br>24360<br>24362<br>26340<br>27122<br>27130<br>27134<br>27138<br>27445<br>27447<br>27487<br>29867<br>G0428<br>S2112  | 23472<br>24361<br>24363<br>27120<br>27125<br>27132<br>27137<br>27412<br>27446<br>27486<br>29866<br>29868<br>J7330   |                | Jan. 1, 2015                                      |   |
| <b>Non-Emergent Air Transport</b>   |             | A0430<br>A0435  | A0431<br>A0436  |                | Jan. 1, 2015                                      |   |
| <b>Non-Emergent Air Ambulance Transport</b>   |             | A0140   | A0424   |                | Jan. 1, 2015                                      |   |
| <b>Non-Emergent Ground Ambulance TX MANDATE</b>                                     |             | A0398<br>A0422<br>A0425<br>A0428<br>A0434<br><br>A0382  | A0420<br>A0424<br>A0426<br>A0433  |                | April 1, 2016<br><br><br><br><br><br>Jan. 1, 2015 |   |
| <b>Orthognathic Surgery</b><br>Treatment of maxillofacial/jaw functional impairment |             | 21120<br>21122<br>21125<br>21141<br>21143<br>21146<br>21150<br>21154<br>21159<br>21188<br>21194<br>21196<br>21199<br>21210<br>21240<br>21243<br>21245<br>21247<br>21249 | 21121<br>21123<br>21127<br>21142<br>21145<br>21147<br>21151<br>21155<br>21160<br>21193<br>21195<br>21198<br>21206<br>21215<br>21242<br>21244<br>21246<br>21248<br>21255 |                | Jan. 1, 2015                                      |   |
| <b>Orthotics</b>  |             | L0140<br>L0170<br>L0220<br>L0466<br>L0622<br>L0631<br>L1499<br>L1640<br>L1834   | L0150<br>L0200<br>L0452<br>L0468<br>L0623<br>L1001<br>L1630<br>L1730<br>L1904   |                | July 1, 2017                                      | Prior authorization is required for Orthotics codes listed with a retail purchase or cumulative rental cost of more than \$1,000. |

| Category              | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |       |       |  |              |  |
|-----------------------|-------------|-------|-------|----------------|------------------------------------|--|-------|-------|--|--------------|--|
| Orthotics (continued) |             | L1920 | L2000 |                |                                    |  |       |       |  |              |  |
|                       |             | L2010 | L2030 |                |                                    |  |       |       |  |              |  |
|                       |             | L2040 | L2050 |                |                                    |  |       |       |  |              |  |
|                       |             | L2060 | L2070 |                |                                    |  |       |       |  |              |  |
|                       |             | L2080 | L2090 |                |                                    |  |       |       |  |              |  |
|                       |             | L2232 | L2320 |                |                                    |  |       |       |  |              |  |
|                       |             | L2387 | L2520 |                |                                    |  |       |       |  |              |  |
|                       |             | L2526 | L2800 |                |                                    |  |       |       |  |              |  |
|                       |             | L2861 | L3160 |                |                                    |  |       |       |  |              |  |
|                       |             | L3201 | L3202 |                |                                    |  |       |       |  |              |  |
|                       |             | L3203 | L3204 |                |                                    |  |       |       |  |              |  |
|                       |             | L3206 | L3207 |                |                                    |  |       |       |  |              |  |
|                       |             | L3208 | L3209 |                |                                    |  |       |       |  |              |  |
|                       |             | L3211 | L3212 |                |                                    |  |       |       |  |              |  |
|                       |             | L3213 | L3214 |                |                                    |  |       |       |  |              |  |
|                       |             | L3215 | L3250 |                |                                    |  |       |       |  |              |  |
|                       |             | L3251 | L3252 |                |                                    |  |       |       |  |              |  |
|                       |             | L3253 | L3254 |                |                                    |  |       |       |  |              |  |
|                       |             | L3255 | L3257 |                |                                    |  |       |       |  |              |  |
|                       |             | L3265 | L3320 |                |                                    |  |       |       |  |              |  |
|                       |             | L3485 | L3674 |                |                                    |  |       |       |  |              |  |
|                       |             | L3720 | L3764 |                |                                    |  |       |       |  |              |  |
|                       |             | L3765 | L3891 |                |                                    |  |       |       |  |              |  |
|                       |             | L3921 | L3956 |                |                                    |  |       |       |  |              |  |
|                       |             | L4030 | L4040 |                |                                    |  |       |       |  |              |  |
|                       |             | L4045 | L4050 |                |                                    |  |       |       |  |              |  |
|                       |             | L4055 |       |                |                                    |  |       |       |  |              |  |
|                       |             |       |       |                |                                    |  | L0112 | L0480 |  | Jan. 1, 2015 |  |
|                       |             |       |       |                |                                    |  | L0482 | L0484 |  |              |  |
|                       |             |       |       |                |                                    |  | L0486 | L0624 |  |              |  |
|                       |             |       |       |                |                                    |  | L0629 | L0632 |  |              |  |
|                       |             |       |       |                |                                    |  | L0634 | L0636 |  |              |  |
|                       |             |       |       |                |                                    |  | L0638 | L0700 |  |              |  |
|                       |             |       |       |                |                                    |  | L0710 | L0810 |  |              |  |
|                       |             |       |       |                |                                    |  | L0820 | L0830 |  |              |  |
|                       |             |       |       |                |                                    |  | L0859 | L1200 |  |              |  |
|                       |             |       |       |                |                                    |  | L1300 | L1310 |  |              |  |
|                       |             |       |       |                |                                    |  | L1680 | L1685 |  |              |  |
|                       |             |       |       |                |                                    |  | L1700 | L1710 |  |              |  |
|                       |             |       |       |                |                                    |  | L1720 | L1755 |  |              |  |
|                       |             |       |       |                |                                    |  | L1844 | L1846 |  |              |  |
|                       |             |       |       |                |                                    |  | L2005 | L2020 |  |              |  |
|                       |             |       |       |                |                                    |  | L2034 | L2036 |  |              |  |
|                       |             |       |       |                |                                    |  | L2037 | L2038 |  |              |  |
|                       |             |       |       |                |                                    |  | L2126 | L2525 |  |              |  |
|                       |             |       |       |                |                                    |  | L2627 | L2628 |  |              |  |
|                       |             | L3020 | L3649 |                |                                    |  |       |       |  |              |  |
|                       |             | L3766 | L3900 |                |                                    |  |       |       |  |              |  |
|                       |             | L3901 | L3904 |                |                                    |  |       |       |  |              |  |
|                       |             | L3961 | L3967 |                |                                    |  |       |       |  |              |  |
|                       |             | L3971 | L3973 |                |                                    |  |       |       |  |              |  |
|                       |             | L3975 | L3976 |                |                                    |  |       |       |  |              |  |
|                       |             | L3977 | L3978 |                |                                    |  |       |       |  |              |  |
|                       |             | L4000 | L4631 |                |                                    |  |       |       |  |              |  |

| Category   | Subcategory | Code   |   | Diagnosis Code   | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization  |
|--|-------------|--|---|--|------------------------------------|---|
| Outpatient Therapy                                     |             | 92521<br>92523<br>92610<br>97162<br>97165<br>97167   | 92522<br>92524<br>97161<br>97163<br>97166   |  | Nov. 1, 2019                       | Prior authorization is required for all ST/OT and PT services (evaluations, re-evaluations and therapy visits).   |
|  |             | G0515  | S9128   |  | Jan. 1, 2018                       | Prior authorization should be submitted online through the Optum Physical Health portal <a href="http://myoptumphysicalhealth.com">myoptumphysicalhealth.com</a>  |
|  |             | 70371<br>92508<br>92627<br>92633<br>97024<br>97035<br>97139<br>97164*<br>97530<br>97535<br>97542<br>97546<br>97755<br>97761<br>G0152<br>S9129<br>S9152 | 92507<br>92626<br>92630<br>96105<br>97032<br>97036<br>97150<br>97168*<br>97533<br>97537<br>97545<br>97750<br>97760<br>G0151<br>G0283<br>S9131 |  | July 1, 2017                       | All prior authorization requests will require: <ul style="list-style-type: none"> <li>• Optum Physical Health Patient Summary Form (PSF-750)</li> <li>• Texas Medicaid Pediatric Supplement to the PSF-750 Form (for members younger than 21 only)</li> <li>• For questions about prior authorization or Optum Physical Health portal assistance, please contact Optum Physical Health 800-873-4575.</li> </ul> |
|  |             | 92526<br>97012<br>97016<br>97022<br>97028<br>97034<br>97110<br>97113<br>97124<br>97799<br>G0281<br>S8990   | 97010<br>97014<br>97018<br>97026<br>97033<br>97039<br>97112<br>97116<br>97140<br>G0129<br>G0282   |  | Jan. 1, 2015                       | *Prior authorization is not required for nursing facilities.  |
|  |             | OR billed with these revenue codes:  | 419<br>421<br>423<br>429<br>431<br>433<br>439<br>441**<br>978   | 420<br>422<br>424<br>430<br>432<br>434<br>440**<br>977 |                                    |   |
| Potentially Unproven Services (and/or Linked Services) |             | 28890<br>64405   | 36514   |  | Jan. 1, 2015                       |   |
| Private Duty Nursing                                   |             | T1000  |   |  | Jan. 1, 2015                       |   |

| Category    | Subcategory | Code  |   | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|-------------|-------------|---|---|----------------|------------------------------------|--|
| Prosthetics |             | L5795<br>L5960<br>L6895<br>L8039<br>L8505<br>L8699  | L5818<br>L6026<br>L7499<br>L8049<br>L8604   |                | July 1, 2017                       | Prior authorization is required for prosthetic codes listed with a retail purchase or cumulative rental cost of more than \$1,000. |
|             |             | L5010<br>L5050<br>L5100<br>L5150<br>L5200<br>L5220<br>L5250<br>L5280<br>L5312<br>L5331<br>L5500<br>L5510<br>L5530<br>L5560<br>L5580<br>L5595<br>L5610<br>L5613<br>L5616<br>L5643<br>L5651<br>L5683<br>L5701<br>L5703<br>L5724<br>L5728<br>L5781<br>L5814<br>L5824<br>L5828<br>L5840<br>L5848<br>L5857<br>L5930<br>L5966<br>L5973<br>L5979<br>L5981<br>L5988<br>L6000<br>L6020<br>L6055<br>L6110<br>L6130<br>L6205<br>L6300<br>L6320<br>L6360<br>L6400<br>L6500<br>L6570<br>L6582<br>L6586 | L5020<br>L5060<br>L5105<br>L5160<br>L5210<br>L5230<br>L5270<br>L5301<br>L5321<br>L5341<br>L5505<br>L5520<br>L5540<br>L5570<br>L5590<br>L5600<br>L5611<br>L5614<br>L5639<br>L5649<br>L5681<br>L5700<br>L5702<br>L5707<br>L5726<br>L5780<br>L5782<br>L5822<br>L5826<br>L5830<br>L5845<br>L5856<br>L5858<br>L5961<br>L5968<br>L5976<br>L5980<br>L5987<br>L5990<br>L6010<br>L6050<br>L6100<br>L6120<br>L6200<br>L6250<br>L6310<br>L6350<br>L6370<br>L6450<br>L6550<br>L6580<br>L6584<br>L6588 |                | Jan. 1, 2015                       |  |

| Category                           | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization  |
|------------------------------------|-------------|-------|-------|----------------|------------------------------------|---|
| <b>Prosthetics<br/>(continued)</b> |             | L6590 | L6621 |                |                                    |   |
|                                    |             | L6624 | L6638 |                |                                    |   |
|                                    |             | L6646 | L6648 |                |                                    |   |
|                                    |             | L6693 | L6696 |                |                                    |   |
|                                    |             | L6697 | L6707 |                |                                    |   |
|                                    |             | L6709 | L6712 |                |                                    |   |
|                                    |             | L6713 | L6714 |                |                                    |   |
|                                    |             | L6715 | L6721 |                |                                    |   |
|                                    |             | L6722 | L6880 |                |                                    |   |
|                                    |             | L6881 | L6882 |                |                                    |   |
|                                    |             | L6883 | L6884 |                |                                    |   |
|                                    |             | L6885 | L6900 |                |                                    |   |
|                                    |             | L6905 | L6910 |                |                                    |   |
|                                    |             | L6920 | L6925 |                |                                    |   |
|                                    |             | L6930 | L6935 |                |                                    |   |
|                                    |             | L6940 | L6945 |                |                                    |   |
|                                    |             | L6950 | L6955 |                |                                    |   |
|                                    |             | L6960 | L6965 |                |                                    |   |
|                                    |             | L6970 | L6975 |                |                                    |   |
|                                    |             | L7007 | L7008 |                |                                    |   |
|                                    |             | L7009 | L7040 |                |                                    |   |
|                                    |             | L7045 | L7170 |                |                                    |   |
|                                    |             | L7180 | L7181 |                |                                    |   |
|                                    |             | L7185 | L7186 |                |                                    |   |
|                                    |             | L7190 | L7191 |                |                                    |   |
|                                    |             | L8035 | L8041 |                |                                    |   |
|                                    |             | L8042 | L8043 |                |                                    |   |
|                                    |             | L8044 | L8499 |                |                                    |   |
|                                    | L8609       | L8629 |       |                |                                    |   |
|                                    | L8631       | L8659 |       |                |                                    |   |
|                                    | V2627       |       |       |                |                                    |   |
| <b>Psychological Testing</b>       |             | 96116 | 96121 |                | Oct. 1, 2019                       |   |
|                                    |             | 96130 | 96131 |                |                                    |   |
|                                    |             | 96132 | 96133 |                |                                    |   |
|                                    |             | 96136 | 96137 |                |                                    |   |
| <b>Radiology</b>                   |             | 78830 | 78831 |                | Jan. 1, 2020                       | Care providers ordering an advanced outpatient imaging procedure are responsible for providing notification prior to scheduling the procedure.<br><br>For prior authorization, please submit requests online by using the Prior Authorization and Notification tool on Link. Go to <b>UHCprovider.com</b> and click on the Link button in the top right corner. Then, select the Prior Authorization and Notification tile on your Link dashboard. Or, call 866-889-8054. |
|                                    |             | 78832 |       |                | Jan. 1, 2015                       |   |
|                                    |             | 76376 | 76377 |                |                                    |   |
|                                    |             | 78012 | 78013 |                |                                    |   |
|                                    |             | 78014 | 78015 |                |                                    |   |
|                                    |             | 78016 | 78018 |                |                                    |   |
|                                    |             | 78070 | 78071 |                |                                    |   |
|                                    |             | 78072 | 78075 |                |                                    |   |
|                                    |             | 78099 | 78102 |                |                                    |   |
|                                    |             | 78103 | 78104 |                |                                    |   |
|                                    |             | 78185 | 78195 |                |                                    |   |
|                                    |             | 78199 | 78201 |                |                                    |   |
|                                    |             | 78202 | 78215 |                |                                    |   |
|                                    |             | 78216 | 78226 |                |                                    |   |
|                                    |             | 78227 | 78231 |                |                                    |   |
|                                    |             | 78232 | 78258 |                |                                    |   |
|                                    |             | 78261 | 78262 |                |                                    |   |
|                                    |             | 78264 | 78265 |                |                                    |   |
|                                    |             | 78266 | 78278 |                |                                    |   |
|                                    |             | 78282 | 78290 |                |                                    |   |
|                                    | 78291       | 78299 |       |                |                                    |   |
|                                    | 78300       | 78305 |       |                |                                    |   |
|                                    | 78306       | 78315 |       |                |                                    |   |

| Category   | Subcategory | Code   |   | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|--|-------------|--|---|----------------|------------------------------------|--|
| <b>Radiology (continued)</b>   |             | 78320<br>78428<br>78451<br>78453<br>78456<br>78458<br>78466<br>78469<br>78473<br>78483<br>78492<br>78496<br>78579<br>78582<br>78598<br>78600<br>78605<br>78608<br>78610<br>78635<br>78650<br>78699<br>78701<br>78708<br>78740<br>78799<br>78801<br>78803<br>78811<br>78813<br>78815<br>78999 | 78399<br>78445<br>78452<br>78454<br>78457<br>78459<br>78468<br>78472<br>78481<br>78491<br>78494<br>78499<br>78580<br>78597<br>78599<br>78601<br>78606<br>78609<br>78630<br>78645<br>78660<br>78700<br>78707<br>78709<br>78761<br>78800<br>78802<br>78804<br>78812<br>78814<br>78816 |                |                                    | For more details, please visit <a href="http://UHCprovider.com/TX">UHCprovider.com/TX</a> > CommunityPlan > Prior Authorization and Notification Resources > Radiology Prior Authorization and Notification Program. |
| <b>Rhinoplasty and Septoplasty</b><br>Treatment of nasal functional impairment and septal deviation  |             | 30400<br>30420<br>30435<br>30460<br>30465  | 30410<br>30430<br>30450<br>30462<br>30520   |                | Jan. 1, 2015                       |  |
| <b>Sleep Apnea Procedures &amp; Surgeries</b><br>Maxillomandibular advancement and oral-pharyngeal tissue reduction for treatment of obstructive sleep apnea |             | 21685<br>41599<br>42299  | 41512<br>42145<br>S2080   |                | Jan. 1, 2015                       |  |



| Category       | Subcategory | Code  |       | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |
|----------------|-------------|-------|-------|----------------|------------------------------------|--|
| Spinal Surgery |             | 0095T | 0098T |                | Jan. 1, 2015                       |  |
|                |             | 0163T | 0164T |                |                                    |  |
|                |             | 0165T | 0202T |                |                                    |  |
|                |             | 0219T | 0220T |                |                                    |  |
|                |             | 0221T | 0222T |                |                                    |  |
|                |             | 0232T | 22100 |                |                                    |  |
|                |             | 22101 | 22102 |                |                                    |  |
|                |             | 22103 | 22110 |                |                                    |  |
|                |             | 22112 | 22114 |                |                                    |  |
|                |             | 22116 | 22206 |                |                                    |  |
|                |             | 22207 | 22208 |                |                                    |  |
|                |             | 22210 | 22212 |                |                                    |  |
|                |             | 22214 | 22216 |                |                                    |  |
|                |             | 22220 | 22222 |                |                                    |  |
|                |             | 22224 | 22226 |                |                                    |  |
|                |             | 22526 | 22527 |                |                                    |  |
|                |             | 22532 | 22533 |                |                                    |  |
|                |             | 22534 | 22548 |                |                                    |  |
|                |             | 22551 | 22552 |                |                                    |  |
|                |             | 22554 | 22556 |                |                                    |  |
|                |             | 22558 | 22585 |                |                                    |  |
|                |             | 22590 | 22595 |                |                                    |  |
|                |             | 22600 | 22610 |                |                                    |  |
|                |             | 22612 | 22614 |                |                                    |  |
|                |             | 22630 | 22632 |                |                                    |  |
|                |             | 22633 | 22634 |                |                                    |  |
|                |             | 22800 | 22802 |                |                                    |  |
|                |             | 22804 | 22808 |                |                                    |  |
|                |             | 22810 | 22812 |                |                                    |  |
|                |             | 22818 | 22819 |                |                                    |  |
|                |             | 22830 | 22840 |                |                                    |  |
|                |             | 22841 | 22842 |                |                                    |  |
|                |             | 22843 | 22844 |                |                                    |  |
|                |             | 22845 | 22846 |                |                                    |  |
|                |             | 22847 | 22848 |                |                                    |  |
|                |             | 22849 | 22850 |                |                                    |  |
|                |             | 22852 | 22855 |                |                                    |  |
|                |             | 22856 | 22857 |                |                                    |  |
|                |             | 22861 | 22862 |                |                                    |  |
|                |             | 22864 | 22865 |                |                                    |  |
|                |             | 22899 | 62287 |                |                                    |  |
|                |             | 63001 | 63003 |                |                                    |  |
|                |             | 63005 | 63011 |                |                                    |  |
|                |             | 63012 | 63015 |                |                                    |  |
|                |             | 63016 | 63017 |                |                                    |  |
|                |             | 63020 | 63030 |                |                                    |  |
|                |             | 63035 | 63040 |                |                                    |  |
|                |             | 63042 | 63043 |                |                                    |  |
|                |             | 63044 | 63045 |                |                                    |  |
|                |             | 63046 | 63047 |                |                                    |  |
|                | 63048       | 63050 |       |                |                                    |  |
|                | 63051       | 63055 |       |                |                                    |  |
|                | 63056       | 63057 |       |                |                                    |  |
|                | 63064       | 63066 |       |                |                                    |  |
|                | 63075       | 63076 |       |                |                                    |  |
|                | 63077       | 63078 |       |                |                                    |  |
|                | 63081       | 63082 |       |                |                                    |  |
|                | 63085       | 63086 |       |                |                                    |  |
|                | 63087       | 63088 |       |                |                                    |  |
|                | 63090       | 63091 |       |                |                                    |  |

| Category  | Subcategory            | Code  |   | Diagnosis Code | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization |               |  |
|---|------------------------|---|---|----------------|------------------------------------|--|---------------|--|
| <b>Spinal Surgery (continued)</b>   |                        | 63101   | 63102   |                |                                    |  |               |  |
|   |                        | 63103   | 63170   |                |                                    |  |               |  |
|   |                        | 63172   | 63173   |                |                                    |  |               |  |
|   |                        | 63180   | 63182   |                |                                    |  |               |  |
|   |                        | 63185   | 63190   |                |                                    |  |               |  |
|   |                        | 63191   | 63194   |                |                                    |  |               |  |
|   |                        | 63195   | 63196   |                |                                    |  |               |  |
|   |                        | 63197   | 63198   |                |                                    |  |               |  |
|   |                        | 63199   | 63200   |                |                                    |  |               |  |
|   |                        | 63250   | 63251   |                |                                    |  |               |  |
|   |                        | 63252   | 63265   |                |                                    |  |               |  |
|   |                        | 63267   | 63268   |                |                                    |  |               |  |
|   |                        | 63270   | 63271   |                |                                    |  |               |  |
|   |                        | 63272   | 63286   |                |                                    |  |               |  |
|   |                        | 63300   | 63301   |                |                                    |  |               |  |
|   |                        | 63302   | 63303   |                |                                    |  |               |  |
|   |                        | 63304   | 63305   |                |                                    |  |               |  |
|   |                        | 63306   | 63307   |                |                                    |  |               |  |
|   | 63308                  | 64633   |   |                |                                    |  |               |  |
|   | 64634                  | S2348   |   |                |                                    |  |               |  |
| <b>Stimulators</b><br>Implantation of a device that sends electrical impulses | Bone Growth Stimulator | E0747<br>E0749  | E0748<br>E0760  |                | Jan. 1, 2015                       |  |               |  |
|   | Neurostimulator        | 64590   |   |                | July 1, 2019                       |  |               |  |
|   |                        | 61850   |   |                | July 1, 2018                       |  |               |  |
|   |                        | 61863<br>61867<br>61885<br>63650<br>63685<br>64555<br>64570 | 61864<br>61868<br>61886<br>63655<br>64553<br>64568<br>64595 |                | Jan. 1, 2015                       |  |               |  |
|   | <b>Transplants</b>     | CAR T-Cell Therapy  | 0537T<br>0539T<br>Q2042                                     | 0538T<br>0540T |                                    |  | Jan. 1, 2019  | For transplant and CAR T-Cell therapy services including Kymriah™ (tisagenlecleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management team at 800-418-4994 or the notification number on the back of the member's health plan ID card. |
|   |                        |   | Q2041   |                |                                    |  | April 1, 2018 |  |
|   | Transplant Services    | 32850   | 32851   |                | Jan. 1, 2015                       |  |               |  |
| 32852   |                        | 32853   |   |                |                                    |  |               |  |
| 32854   |                        | 32855   |   |                |                                    |  |               |  |
| 32856   |                        | 33930   |   |                |                                    |  |               |  |
| 33933   |                        | 33935   |   |                |                                    |  |               |  |
| 33940   |                        | 33944   |   |                |                                    |  |               |  |
| 33945   |                        | 38208   |   |                |                                    |  |               |  |
| 38209   |                        | 38210   |   |                |                                    |  |               |  |
| 38212   |                        | 38213   |   |                |                                    |  |               |  |
| 38214   |                        | 38215   |   |                |                                    |  |               |  |
| 38240   |                        | 38241   |   |                |                                    |  |               |  |
| 38242   |                        | 44132   |   |                |                                    |  |               |  |
| 44133   | 44135                  |   |   |                |                                    |  |               |  |
| 44136   | 44137                  |   |   |                |                                    |  |               |  |
| 44715   | 44720                  |   |   |                |                                    |  |               |  |
| 44721   | 47133                  |   |   |                |                                    |  |               |  |
| 47135   | 47140                  |   |   |                |                                    |  |               |  |
| 47141   | 47142                  |   |   |                |                                    |  |               |  |

| Category  | Subcategory | Code  |  | Diagnosis Code    | Prior Authorization Effective Date | Additional Information/How to Obtain Prior Authorization   |
|---|-------------|---|--|-------------------|------------------------------------|--|
| <b>Transplants (continued)</b>  |             | 47143<br>47145<br>47147<br>48552<br>50300<br>50323<br>50340<br>50365<br>50380<br>S2060<br>S2152 | 47144<br>47146<br>48551<br>48554<br>50320<br>50325<br>50360<br>50370<br>50547<br>S2061 |                   |                                    |  |
|   |             | 38232   |  | Oncology DX codes |                                    |  |
| <b>Vagus Nerve Stimulation</b><br>Implantation of a device that sends electrical impulses into one of the cranial nerves  |             | 61888<br>C1767<br>L8681   | 64569<br>C1778<br>L8689  |                   | Jan. 1, 2015                       |  |
| <b>Vein Procedures</b><br>Removal and ablation of the main trunks and named branches of the saphenous veins for treating venous disease and varicose veins of the extremities |             | 36473<br>36478<br>37718<br>37780  | 36475<br>37700<br>37722  |                   | Oct. 1, 2018                       |  |
|   |             | 36476<br>37735  | 36479<br>37785   |                   | Jan. 1, 2015                       |  |
| <b>Ventricular Assist Device (VAD)</b><br>A mechanical pump that takes over the function of the damaged ventricle of the heart and restores normal blood flow                 |             | 33927<br>33929  | 33928  |                   | Jan. 1, 2018                       | Please call the notification number on the back of the member's health plan ID card. Then, fax the form provided by the nurse to the Optum VAD Case Management team at <b>855-282-8929</b> . |
|   |             | 33975<br>33979<br>33982   | 33976<br>33981<br>33983  |                   | Jan. 1, 2015                       |  |

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