Medicaid Prior Authorization Change Summary

Effective 12/1/2024

Service Category	PA Rule	Services	Procedure Codes
Cardiovascular	PA Required	Cardiovascular Procedures	33548
Drug Codes	PA Required	Specialty Drugs	J0480, J0850, J1096, J1290, J1640, J2724, J3031, J3245
		Other Drugs	J7328, J7677, J7682
	No PA Required	Diabetic Drugs and Supplies	A4224, A4225, A4233, A4234, A4235, A4236, A4467
		Specialty Drugs	80220, J0295, J0456, J0500, J1630, J1741, J2360, J2510, J2543, J2795, J2800, J3095, J3360
Durable Medical Equipment	PA Required	Orthotic and Prosthetic	E1800, E1802, E1805, E1810, E1815, E1825, L0636, L0638, L0648, L0999, L1840, L1845, L1851, L1904, L2000, L2010, L2036, L2050, L2060, L2090, L3720, L5010, L5312, L5500, L5700, L6400, L8499, L9900
		Respiratory Devices and Supplies	E0465, E0466, E0470, E0471, E0472, E1390
		Wheelchairs	K0800
		Equipment & Accessories	E0652, E0935
	PA Required except with breast cancer diagnosis	Breast Implants and Prosthesis	L8039
	PA not required if member < 21 years at DOS	Nutritional Services	B4149, B4150, B4152, B4153, B4154, B4155, B4157, B4158, B4159, B4160, B4161, B4162
		Orthotic and Prosthetic	L1907, L1932, L1940, L1945, L1950, L1951, L1960, L1970, L1971, L1990
	No PA Required	Infusion Pump and Supplies	A4220, A4221, A4222, A4223, E0780, K0552, K0603
		Contraceptives	A4267, A4268
		Neurostimulators	A4555, E0720, E0765, L8684
		Respiratory Devices and Supplies	A7047, E0425, E0480, E0484, E0485, E0500, E0550, E0555, E0561, E0570, E0574, E0575, E0580, E0619, E1352, E1353, E1372
		Breast Pump	E0602, E0603
		Equipment & Accessories	A8003, E0160, E0161, E0163, E0165, E0167, E0168, E0175, E0202, E0210, E0215, E0218, E0235, E0275, E0276, E0605, E0606, E0860, E0870, E0900, E0910, E0911, E0940, E0944, E0951, E0952, E1300, E1700, K0105, K0462
		Nutritional Services	B4034, B4035, B4036, B4081, B4082, B4087, B4088, B4100, B9002, B9998, B9999, E0791
		Mobility Devices	E0100, E0105, E0110, E0111, E0112, E0113, E0114, E0116, E0130, E0135, E0140, E0141, E0143, E0144, E0148, E0149, E0153, E0154, E0155, E0156, E0157, E0158, E0159, E0241, E0242, E0243, E0244, E0245, E0246, E0247, E0248, E0621, E0627, E0629, E0705

Service Category	PA Rule	Services	Procedure Codes
Durable Medical Equipment	No PA Required	Beds	E0181, E0182, E0184, E0185, E0186, E0196, E0197, E0199, E0251, E0256, E0266, E0271, E0272, E0277, E0280, E0301, E0304, E0305, E0310, E0371, E0372
		Supplies and Devices	E0188, E0189, E0190, E0191, E0240, E0249, E0325, E0326, E0655, E0660, E0665, E0666, E0667, E0668, E0669, E0671, E0672, E0673, E0710, E0850, E0912, E0936, E2000, E2500, E2511, K0602, K0604, K0605, L8509, S8270, S8420, S8421, S8422, S8423, S8424, S8425, S8426, S8427, S8428
		Cardiac Devices	E0610, E0615, K0607, K0608, K0609, Q0478, Q0479, Q0480, Q0481, Q0482, Q0483, Q0484, Q0485, Q0486, Q0487, Q0488, Q0489, Q0490, Q0491, Q0492, Q0493, Q0494, Q0495, Q0496, Q0497, Q0498, Q0499, Q0500, Q0501, Q0502, Q0503, Q0504, Q0508
		Wheelchairs	E0950, E0954, E0955, E0956, E0957, E0958, E0959, E0960, E0961, E0966, E0967, E0969, E0970, E0971, E0974, E0978, E0980, E0981, E0982, E0984, E0985, E0988, E0990, E0992, E0994, E0995, E1003, E1014, E1015, E1016, E1017, E1018, E1020, E1029, E1030, E1037, E1225, E1226, E1227, E1228, E1231, E2201, E2202, E2203, E2204, E2205, E2206, E2207, E2208, E2209, E2210, E2211, E2212, E2213, E2214, E2215, E2216, E2217, E2218, E2219, E2220, E2221, E2222, E2224, E2225, E2226, E2227, E2228, E2230, E2231, E2291, E2292, E2293, E2294, E2323, E2324, E2326, E2340, E2342, E2359, E2360, E2361, E2362, E2363, E2364, E2365, E2366, E2368, E2369, E2371, E2378, E2381, E2382, E2383, E2384, E2385, E2386, E2387, E2388, E2389, E2390, E2391, E2392, E2394, E2395, E2396, E2397, E2601, E2602, E2603, E2604, E2605, E2606, E2607, E2608, E2611, E2612, E2613, E2614, E2615, E2616, E2619, E2621, E2622, E2623, E2624, E2625, E2626, E2627, E2628, E2630, E2631, E2633, K0001, K0002, K0004, K0006, K0015, K0017, K0018, K0019, K0020, K0037, K0038, K0039, K0040, K0041, K0042, K0043, K0044, K0045, K0046, K0047, K0050, K0051, K0052, K0053, K0056, K0065, K0069, K0070, K0071, K0072, K0073, K0077, K0669, K0733
		Orthotic and Prosthetic	E1801, E1806, E1811, E1816, E1818, E1841, L0120, L0150, L0160, L0170, L0172, L0174, L0180, L0190, L0200, L0220, L0452, L0454, L0455, L0456, L0457, L0458, L0460, L0462, L0464, L0466, L0467, L0468, L0469, L0470, L0472, L0480, L0488, L0490, L0491,

Service Category	PA Rule	Services	Procedure Codes
Durable Medical Equipment	No PA Required	Orthotic and Prosthetic	L0624, L0625, L0626, L0627, L0628, L0629, L0630, L0631, L0633, L0634, L0635, L0639, L0641, L0642, L0643, L0649, L0650, L0972, L0974, L0976, L0978, L0980, L0984, L1001, L1620, L1652, L1660, L1680, L1686, L1690, L1730, L1810, L1812, L1820, L1830, L1831, L1832, L1836, L1843, L1844, L1847, L1848, L1860, L1900, L1910, L2035, L2108, L2112, L2114, L2116, L2136, L2184, L2186, L2188, L2192, L2240, L2270, L2300, L2310, L2320, L2330, L2335, L2340, L2350, L2360, L2370, L2375, L2380, L2395, L2397, L2405, L2492, L2500, L2510, L2520, L2525, L2526, L2530, L2570, L2580, L2600, L2610, L2620, L2622, L2624, L2627, L2628, L2630, L2640, L2650, L2660, L2670, L2680, L2750, L2760, L2785, L2795, L2800, L2810, L2850, L2861, L3031, L3040, L3050, L3060, L3070, L3080, L3090, L3100, L3150, L3170, L3230, L3250, L3260, L3649, L3650, L3670, L3675, L3677, L3678, L3710, L3760, L3761, L3762, L3806, L3807, L3809, L3891, L3908, L3912, L3915, L3916, L3917, L3918, L3923, L3924, L3925, L3927, L3929, L3930, L3931, L3960, L3962, L3980, L3981, L3982, L3984, L3995, L4000, L4002, L4070, L4080, L4210, L4350, L4360, L4361, L4370, L4387, L4396, L4397, L4398, L5150, L5400, L5410, L5616, L5620, L5624, L5640, L5645, L5647, L5648, L5671, L5679, L5682, L5683, L5685, L5816, L5818, L5822, L5828, L5960, L5986, L6623, L6698, L6706, L6707, L6708, L6711, L6712, L6713, L6714, L6721, L6722, L6805, L6905, L7700, L8040, L8041, L8042, L8043, L8044, L8045, L8046, L8047, L8048, L8049, L8300, L8310, L8310, L8330
		Incontinence Supplies	T4521, T4522, T4523, T4524, T4525, T4526, T4527, T4528, T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4544
Gastroenterology	PA Required	Bariatric Surgery	43843
		Digestive System Procedures	S2080
	No PA Required	Bariatric Surgery	43771, 43772, 43773, 43774, 43886
Genetic Analysis	PA Required	Genetic Testing	81235, 81277, 81519, 0172U

Service Category	PA Rule	Services	Procedure Codes
	No PA Required	Genetic Testing	81370, 81371, 81373, 81376, 81379, 81380, 86812, 86813, 86816, 86817, 86825, 86826, 86828, 86831, 88235, 88245, 88248, 88249, 88261, 88263, 88267, 88269, 88271, 88272, 88273, 88274, 88280, 88283, 88285, 88289, 88291
Genitourinary Procedures	PA Required	Genitourinary Procedures	54401, 54405
	PA only required if billed with diagnosis of gender dysphoria	Genitourinary Procedures	54125, 54400, 54420, 54660, 55866, 56625, 56800, 56805, 56810, 57106, 57107, 57111, 57295, 57335, 57426, 58180, 58263, 58270, 58275, 58292, 58294, 58541, 58542, 58543, 58544, 58553, 58661
Hearing Services	PA Required	Hearing Aids	V5286, V5287
	No PA Required	Implants and Supplies	L8616, L8625, L8628, L8629
		Orthotic and Prosthetic	L8694
		Hearing Aids	V5266, V5267, V5281, V5282, V5283, V5284, V5285, V5288, V5289, V5290
Home Services	PA Required	Home Visit	G0156, T1000
		Other Services	S5165
	No PA Required	Infusion Services	S5498, S5501
Laboratory	PA Required	Pathology	81268
		Multianalyte Assays	81510
	No PA Required	Urinalysis	80184
		Lab Tests	G0659
Medical Supplies	PA Required	Skin Grafts	Q4101, Q4102, Q4103, Q4104, Q4105, Q4106, Q4108, Q4110, Q4115, Q4121, Q4132, Q4151, Q4159, Q4160, Q4186, Q4195, Q4196, Q4197
	No PA Required	Supplies	A4212, A4213, A4216, A4217, A4265, A4284, A4310, A4311, A4312, A4313, A4314, A4315, A4316, A4320, A4322, A4326, A4327, A4328, A4331, A4332, A4333, A4334, A4338, A4340, A4344, A4349, A4351, A4352, A4353, A4355, A4356, A4357, A4358, A4360, A4421, A4450, A4452, A4456, A4459, A4463, A4465, A4481, A4556, A4557, A4558, A4565, A4566, A4595, A4604, A4605, A4606, A4615, A4619, A4623, A4624, A4626, A4628, A4629, A4630, A4635, A4636, A4637, A4640, A4660, A4663, A4670, A4927, A4930, A4931, A4932, A5105, A5112, A5113, A5114, A7000, A7002, A7003, A7005, A7006, A7007, A7010, A7012, A7013, A7014,

Service Category	PA Rule	Services	Procedure Codes
Medical Supplies	No PA Required		A7015, A7018, A7020, A7025, A7026, A7027, A7028, A7029, A7030, A7031, A7032, A7033, A7034, A7035, A7036, A7037, A7038, A7039, A7044, A7046, A7048, A7501, A7507, A7520, A7521, A7522, A7523, A7524, A7525, A7526, A7527, A8000, A8002, A8004, S8189, S8210, T4541
		Wound Care	A5200, A6000, A6010, A6011, A6021, A6022, A6023, A6024, A6154, A6196, A6197, A6198, A6199, A6203, A6204, A6205, A6206, A6207, A6208, A6209, A6210, A6211, A6212, A6213, A6214, A6215, A6216, A6217, A6218, A6219, A6220, A6221, A6222, A6223, A6224, A6228, A6229, A6230, A6231, A6232, A6234, A6235, A6236, A6237, A6238, A6240, A6241, A6242, A6243, A6244, A6245, A6246, A6247, A6248, A6250, A6251, A6252, A6253, A6254, A6255, A6256, A6257, A6258, A6259, A6260, A6261, A6262, A6266, A6402, A6403, A6404, A6407, A6410, A6411, A6412, A6441, A6442, A6443, A6444, A6445, A6446, A6447, A6448, A6449, A6450, A6451, A6452, A6453, A6454, A6455, A6456, A6457, A6501, A6502, A6503, A6504, A6505, A6506, A6507, A6508, A6509, A6510, A6511, A6512, A6513, A6530, A6531, A6532, A6533, A6534, A6535, A6536, A6537, A6538, A6539, A6540, A6541, A6544, A6545
Other Medical Services	PA Required	Respite Services	T1005
Pain Management	PA not required if billed on same day as other surgical procedure	Injections & Treatments	64400, 64408, 64415, 64416, 64417, 64418, 64420, 64421, 64430, 64445, 64446, 64447, 64448, 64449, 64450, 64451, 64454, 64461, 64462, 64463, 64480, 64492, 64495, 64625
	No PA Required	Injections	62280, 62324, 62325, 62326, 62327, 64486, 64487, 64488, 64489, 64505, 64620, 64630, 64632, 64680, 64681
Physical Medicine	PA Required	Therapy Services	G0151, G0152, G0153
Physician Services	PA Required	Integumentary Services	10004, 11950, 11951, 11952, 11954
		Abortion Procedures	S0199
	No PA Required	Allergy and Immunology	95004
		Home Visit	99341, 99342, 99344, 99345, 99347, 99348, 99350
Sleep Medicine	PA Required	Sleep Studies	95782, 95805, 95807, 95808, 95810, 95811

Service Category	PA Rule	Services	Procedure Codes
	No PA Required	Monitoring	94774, 94777
Stereotactic Radiosurgery	PA Required	Nervous System Procedures	61799, 0398T
Surgery Procedures	PA Required	Cosmetic Procedures	15819, 17340, 17360, 17380, 30120
		Integumentary Services	15271, 15273, 15275, 15277, 15278
		Eye and Ocular Adnexa Procedures	15820, 15821
		Facial, Cranial and TMJ Procedures	21120, 21121, 21122, 21123, 21125, 21137, 21138, 21139, 21151, 21155, 21208, 21209, 21210, 21215, 42125
		Cardiovascular Procedures	33289, 37220, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 0237T
		Nervous System Procedures	64575, 64624
		Musculoskeletal Procedures	G0259
	PA only required after 12 wound care visits billed	Wound Care	11042, 11043, 11044
	PA only required if billed with diagnosis of gender dysphoria	Integumentary Services	11960, 11970, 14000, 14001, 15100, 15120, 15200, 15570, 15574, 15600, 15620, 15757, 15758, 15769, 15771, 15772, 15773, 15774
		Breast Services	19303
		Genitourinary Procedures	53410, 53415, 53420, 53425, 53460
	PA Required except with breast cancer diagnosis	Breast Services	19330, 19340, 19342, 19350, 19364, 19370, 19371, 19380
	No PA Required	Breast Services	19301, 19396
		Cardiovascular Procedures	33975, 33976, 33979, 33990, 33991
		ENT Procedures	30460, 30462, 30630, 31237
		Genitourinary Procedures	50548
		Eye and Ocular Adnexa Procedures	67915, 67916, 67917, 67921, 67923, 67924
		Bariatric Surgery	95980
Transplant Services	No PA Required	Transplant	33406, 33410, 33411, 33412, 33413, 33930, 33940, 38230, 47133, 47140, 47142, 48550, 48556, 50547
Vision Services	No PA Required	Vision Evaluation	92065