

## Prior Authorization List

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Code	Description
03.09	Spinal surgery - other exploration and decompression of spinal canal
80.50	Spinal surgery - Excision or destruction of intervertebral disc, unspecified
80.51	Spinal surgery - Excision of intervertebral disc, unspecified
80.59	Spinal surgery - Other excision or destruction of intervertebral disc, unspecified
81.00	Spinal fusion - Not otherwise specified
81.04	Spinal fusion - Dorsal and dorsolumbar fusion, anterior technique
81.05	Spinal fusion - Dorsal and dorsolumbar fusion, posterior technique
81.06	Spinal fusion - Lumbar and lumbosacrular fusion, anterior technique
81.07	Spinal fusion - Lumbar and lumbosacrular fusion, lateral transverse process technique
81.08	Spinal fusion - Lumbar and lumbosacrular fusion, posterior technique
00810	Anesthesia with GI procedures
11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.0 sq cm or less (when specified for nipple/areola reconstruction)
11950	Injection of collagen or other filling material
11951	Injection of collagen or other filling material
11952	Injection of collagen or other filling material
11954	Injection of collagen or other filling material
15775	Hair transplant (hairplasty), punch graft, 1 to 15 punch grafts
15776	Hair transplant (hairplasty), punch graft, more than 15 punch grafts
15780	Facial dermabrasion or acid peel/Scar revision (of any kind)
15781	Scar revision (of any kind) - dermabrasion; segmental, face
15782	Scar revision (of any kind) - dermabrasion; regional, other than face
15783	Scar revision (of any kind) - dermabrasion; superficial, any site (eg. tattoo removal)

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15786	Scar revision (of any kind) - abrasion; single lesion (eg. keratosis, scar)
15787	Scar revision (of any kind) - abrasion, each additional four lesions or less
15788	Scar revision (of any kind) - chemical peel, facial; epidermal
15789	Scar revision (of any kind) - chemical peel, facial; dermal
15792	Scar revision (of any kind) - chemical peel, non-facial; epidermal
15793	Scar revision (of any kind) - chemical peel, non-facial; dermal
15819	Cervicoplasty
15820	Blepharoplasty - lower eyelid
15821	Blepharoplasty - lower eyelid with extensive herniated fat pad
15822	Blepharoplasty - upper eyelid
15823	Blepharoplasty - upper eyelid; with excessive skin weighing down lid
15824	Rhytidectomy - brow or face lift
15825	Rhytidectomy; neck with platysmal tightening (platysmal flap, P-flap)
15826	Rhytidectomy; glabellar frown lines
15828	Malar (cheek) implants
15829	Rhytidectomy; superficial musculoaponeurotic system (SMAS) flap
15830	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen, infraumbilical panniculectomy
15832	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh
15833	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg
15834	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip
15835	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock
15836	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm

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15837	Lipectomy/Liposuction procedures -
15838	Lipectomy/Liposuction procedures -
15839	Lipectomy/Liposuction procedures - Excision, excessive skin and subcutaneous tissue (includes lipectomy), other area
15840	Graft for facial nerve paralysis; free fascia graft (including obtaining fascia)
15841	Graft for facial nerve paralysis; free muscle graft (including obtaining graft)
15842	Graft for facial nerve paralysis; free muscle flap by microsurgical technique
15845	Graft for facial nerve paralysis; regional muscle transfer
15847	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen (eg, abdominoplasty)
15876	Lipectomy/Liposuction procedures - Suction assisted lipectomy; head and neck
15877	Lipectomy/Liposuction procedures - Suction assisted lipectomy; trunk
15878	Lipectomy/Liposuction procedures - Suction assisted lipectomy; upper extremity
15879	Lipectomy/Liposuction procedures - Suction assisted lipectomy; lower extremity
17106	Rosacea treatment - destruction of cutaneous vascular proliferative lesions by laser
17107	Rosacea treatment - destruction of cutaneous vascular proliferative lesions by laser
17108	Rosacea treatment - destruction of cutaneous vascular proliferative lesions by laser
19105	Ablation, cryosurgical, of fibroadenoma, including ultrasound guidance, each fibroadenoma
19300	Gynecomastia repair
19316	Mastopexy
19318	Breast Reduction (mammoplasty)
19324	Augmentation of breast - mammoplasty
19325	Augmentation of breast - mammoplasty
19328	Removal of breast implant/material (periprosthetic capsulectomy)
19330	Removal of breast implant/material (periprosthetic capsulectomy)

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19340	Breast procedure - Immediate insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19342	Breast procedure - Delayed insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction
19350	Breast procedure - Nipple/areola reconstruction
19355	Breast procedure - Correction of inverted nipples
19357	Breast procedure - Breast reconstruction, immediate or delayed, with tissue expander, including subsequent expansion
19361	Breast procedure - Breast reconstruction with latissimus dorsi flap, with or without prosthetic implant
19364	Breast procedure - Breast reconstruction with free flap
19366	Breast procedure - Breast reconstruction with other technique
19367	Breast procedure - Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site
19368	Breast procedure - Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site, with microvascular anastomosis (supercharging)
19369	Breast procedure - Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), double pedicle, including closure of site
19380	Breast procedure - Revision of reconstructed breast
19396	Breast procedure - Preparation of moulage for custom breast implant
19499	Breast ductal lavage
19499	Unlisted Breast Procedure
20605	Temporomandibular Disorders: Arthodesis, aspiration and/or injection; intermediate joint or bursa
20974	Bone Growth Stimulator - electrical stimulation to aid bone healing
20975	Bone Growth Stimulator – low intensity ultrasound stimulation to aid bone healing
20979	Bone Growth Stimulators - Low intensity ultrasound stimulation to aid bone healing, noninvasive (non operative)
20982	Ablation, bone tumor(s) (e.g., osteoid osteoma, metastasis) radiofrequency, percutaneous, including computed tomographic guidance

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20985	Computer-assisted surgical navigational procedure
21010	Temporomandibular Disorders: Arthrotomy, temporomandibular joint
21050	Temporomandibular Disorders: Condylectomy, temporomandibular joint (separate procedure)
21060	Temporomandibular Disorders: Meniscectomy, partial or complete, temporomandibular joint (separate procedure)
21073	Temporomandibular Disorders: Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (i.e., general or monitored anesthesia care)
21083	Nasal (dorsal-external) implants
21087	Nasal (dorsal-external) implants
21116	Temporomandibular Disorders: Injection procedure for temporomandibular joint arthrography
21120	Mandibular/Maxillary (Orthognathic) Surgery - Anterior horizontal mandibular osteotomy (chin)-genioplasty
21121	Mandibular/Maxillary (Orthognathic) Surgery - Anterior horizontal mandibular osteotomy (chin)-genioplasty
21122	Mandibular/Maxillary (Orthognathic) Surgery - Anterior horizontal mandibular osteotomy (chin)-genioplasty
21123	Mandibular/Maxillary (Orthognathic) Surgery - Anterior horizontal mandibular osteotomy (chin)-genioplasty
21125	Mandibular/Maxillary (Orthognathic) Surgery - Augmentation, mandibular body or angle; prosthetic material
21127	Mandibular/Maxillary (Orthognathic) Surgery - Augmentation, lower jaw bone
21137	Forehead Reduction
21138	Forehead Reduction
21139	Forehead Reduction
21141	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)
21142	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)
21143	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)
21145	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)
21146	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)

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21147	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort)
21150	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort II)
21151	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort II)
21154	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort III)
21155	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (LeFort III)
21159	Mandibular Osteotomies, Reconstruction Midface (LeFort)
21160	Mandibular Osteotomies, Reconstruction Midface (LeFort)
21172	Mandibular Osteotomies, Reconstruction superior-lateral orbital rim and lower forehead
21175	Mandibular Osteotomies, Reconstruction bifrontal, superior-lateral orbital rims and lower forehead
21179	Mandibular Osteotomies, Reconstruction entire or majority of forehead and/or supraorbial rims
21180	Mandibular Osteotomies, Reconstruction entire or majority of forehead and/or supraorbial rims
21188	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction Midface (other than LeFort type)
21193	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft
21194	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular rami, horizontal, vertical, C or L osteotomy; with bone graft
21195	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular rami and/or body, sagittal split; without internal rigid fixation
21196	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation
21198	Mandibular/Maxillary (Orthognathic) Surgery - Osteotomy, mandible, segmental
21199	Mandibular Osteotomies, segmental with genioglossus advancement
21206	Mandibular/Maxillary (Orthognathic) Surgery - Osteotomy, maxilla, segmental (e.g., Wassmund or Schuchard)

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21208	Mandibular/Maxillary (Orthognathic) Surgery - Osteoplasty, facial bones; augmentation (autograft, allograft, or prosthetic implant)
21209	Mandibular/Maxillary (Orthognathic) Surgery - Osteoplasty, facial bones; reduction
21210	Mandibular/Maxillary (Orthognathic) Surgery - Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)
21215	Mandibular/Maxillary (Orthognathic) Surgery - Graft, bone; mandible (includes obtaining graft)
21230	Graft; rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)
21235	Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft)
21240	Temporomandibular Disorders: Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)
21242	Temporomandibular Disorders: Arthroplasty, temporomandibular joint, with allograft
21243	Temporomandibular Disorders: Arthroplasty, temporomandibular joint, with prosthetic joint replacement
21244	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandible extraoral, with transosteal bone plate (eg, mandibular staple bone plate)
21245	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandible or maxilla, subperiosteal implant
21246	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction mandible or maxilla, subperiosteal implant; complete
21247	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts)(e.g., for hemifacial microsomia)
21248	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandible or maxilla, endosteal implant
21249	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandible or maxilla, endosteal implant
21255	Reconstruction zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)
21256	Mandibular Osteotomies, Reconstruction of orbit (includes obtaining autografts)
21270	Malar (cheek) implants
21335	Nasal reconstruction
21685	Hyoid myotomy and suspension
21740	Reconstructive repair of pectus excavatum or carinatum; open

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21742	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), without thoracoscopy
21743	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), with thoracoscopy
22505	Manipulation of spine under anesthesia
22520	Kyphoplasty - Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; thoracic
22521	Kyphoplasty - Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; lumbar
22522	Kyphoplasty - Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; each additional thoracic or lumbar body
22523	Kyphoplasty - Percutaneous vertebral augmentation, including cavity creation using mechanical device, one vertebral body, unilateral
22524	Kyphoplasty - Percutaneous vertebral augmentation, including cavity creation using mechanical device, one vertebral body, unilateral
22525	Kyphoplasty - Percutaneous vertebral augmentation, including cavity creation using mechanical device, one vertebral body, unilateral
22526	Percutaneous Intradiscal Electrothermal Annuloplasty
22527	Percutaneous Intradiscal Electrothermal Annuloplasty
22533	Spinal fusion - Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar
22558	Spinal fusion - Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar
22612	Spinal fusion - Arthrodesis, posterior or posterolateral technique, single level; lumbar (with or without lateral transverse

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Code	Description
	technique)
22630	Spinal fusion - Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar
22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; lumbar
22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; each additional interspace and segment (List separately in addition to code for primary procedure)
22856	Artificial Intervertebral Discs - total disc arthroplasty, anterior approach, including discectomy with end plate preparation (includes osteophyctomy for nerve root or spinal cord decompression and microdissection), single interspace, cervical
22857	Artificial Intervertebral Discs - total disc arthroplasty, anterior approach, including discectomy to prepare interspace;(other than for decompression), lumbar, single interspace
22861	Artificial Intervertebral Discs - Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical
22862	Artificial Intervertebral Discs - revision including replacement of total disc arthroplasty, lumbar, single interspace
22864	Artificial Intervertebral Discs - Removal of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical
22865	Artificial Intervertebral Discs - removal of total disc arthroplasty, anterior approach, lumbar, single interspace
22899	Kyphoplasty - unlisted procedure; spine
22999	Unlisted procedure, abdomen, musculoskeletal system
27412	Autologous chondrocyte transplantation - knee
27415	Autologous/Osteochondral allograft, knee, open
27416	Osteochondral autograft(s), knee, open
27702	Ankle Replacement
28446	Open osteochondral autograft-talus

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28890	Extracorporeal shock wave therapy (Orthotripsy)/Orthotripsy (heel) Ossatron
28899	Subtalar Arthroereisis - Unlisted procedure, foot or toes (Orthotripsy)
29800	Temporomandibular Disorders: Arthroscopy, temporomandibular joint, diagnostic, with or without synovial biopsy
29804	Temporomandibular Disorders: Arthroscopy, temporomandibular joint, surgical
29866	Autologous chondrocyte transplantation/Arthroscopy knee, surgical; osteochondral autograft(s) (eg. Mosaicplasty) (includes harvesting of the autograft)
29867	Autologous chondrocyte transplantation/Arthroscopy knee, surgical; osteochondral autograft(s) (eg. Mosaicplasty)
29868	Meniscal Transplantation
29892	Ankle arthroscopy/surgery
29999	Electrothermal capsular shrinkage (i.e. thermal capsulorrhaphy, electrothermal capsulorrhaphy, thermal capsular shrinkage, electrothermal arthroscopy) as a technique for use in arthroscopic or open surgery for tightening the capsular or ligamentous structures of ankles, hips, knees, or wrists.
30110	Excision, nasal polyp(s), simple
30115	Excision, nasal polyp(s), extensive
30120	Rosacea treatment - excision or surgical planing of skin of nose for rhinophyma
30130	Excision inferior turbinate, partial or complete, any method
30140	Submucous resection inferior turbinate, partial or complete, any method
30400	Rhinoplasty
30410	Rhinoplasty
30420	Rhinoplasty
30430	Rhinoplasty
30435	Rhinoplasty
30450	Rhinoplasty

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30465	Repair of nasal vestibular stenosis (eg, spreader grafting, lateral nasal wall reconstruction)
30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft
30801	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (eg, electrocautery, radiofrequency ablation, or tissue volume reduction); superficial
30802	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (eg, electrocautery, radiofrequency ablation, or tissue volume reduction); intramural (i.e., submucosal)
31200	Ethmoidectomy; intranasal, anterior
31201	Ethmoidectomy; intranasal, total
31205	Ethmoidectomy, extranasal, total
31237	Nasal/sinus endoscopy, surgical; with biopsy, polypectomy or debridement
31240	Nasal/sinus endoscopy, surgical; with concha bullosa resection
31254	Nasal/sinus endoscopy, surgical; with ethmoidectomy, partial (anterior)
31255	Nasal/sinus endoscopy, surgical; with ethmoidectomy, total (anterior and posterior)
31256	Nasal/sinus endoscopy, surgical, with maxillary antrostomy
31267	Nasal/sinus endoscopy, surgical, with maxillary antrostomy; with removal of tissue from maxillary sinus
31276	Nasal/sinus endoscopy, surgical with frontal sinus exploration, with or without removal of tissue from frontal sinus
31287	Nasal/sinus endoscopy, surgical, with sphenoidotomy
31288	Nasal/sinus endoscopy, surgical, with sphenoidotomy; with removal of tissue from the sphenoid sinus
31295	Nasal/sinus endoscopy, surgical; with dilation of maxillary sinus ostium (eg, balloon dilation), transnasal or via canine fossa
31296	Nasal/sinus endoscopy, surgical; with dilation of frontal sinus ostium (eg, balloon dilation)
31297	Nasal/sinus endoscopy, surgical; with dilation of sphenoid sinus ostium (eg, balloon dilation)
32664	Thoracic Sympathectomy (for hyperhidrosis)
32998	Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, radiofrequency, unilateral

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33202	Insertion of epicardial electrode(s); open incision (e.g., thoracotomy, median sternotomy, subxiphoid approach)
33203	Insertion of epicardial electrode(s); endoscopic approach (eg, thoracoscopy, pericardioscopy)
33207	Cardiac Resynchronization Therapy - Insertion or replacement of permanent pacemaker with transvenous electrode(s); ventricular
33208	Cardiac Resynchronization Therapy - Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular
33211	Cardiac Resynchronization Therapy - Insertion or replacement of temporary transvenous dual chamber pacing electrodes
33213	Cardiac Resynchronization Therapy - Insertion or replacement of pacemaker pulse generator only; dual chamber
33214	Cardiac Resynchronization Therapy - Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber
33216	Insertion of a single transvenous electrode, permanent pacemaker or cardioverter-defibrillator
33217	Insertion of 2 transvenous electrodes, permanent pacemaker or cardioverter-defibrillator
33224	Cardiac Resynchronization Therapy - Insertion of pacing electrode, cardiac venous system, for left ventricular pacing; with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator
33225	Cardiac Resynchronization Therapy - Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter defibrillator or pacemaker pulse generator
33226	Cardiac Resynchronization Therapy - Repositioning of previously implanted cardiac venous system (left ventricular) electrode (including removal, insertion and/or replacement of generator)
33240	Cardiac Resynchronization Therapy - Insertion of single or dual chamber pacing cardioverter-defibrillator pulse generator
33249	Cardiac Resynchronization Therapy - Insertion or repositioning of electrode lead(s) for single or dual chamber pacing cardioverter-defibrillator and insertion of pulse generator
35475	Carotid, Vertebral and Intracranial Artery Angioplasty - Transluminal balloon angioplasty, percutaneous; brachiocephalic trunk or branches, each vessel
36468	Sclerotherapy
36469	Sclerotherapy

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36470	Sclerotherapy
36471	Sclerotherapy
36475	Radiofrequency ablation of varicose veins
36476	Radiofrequency ablation of varicose veins
36478	Radiofrequency ablation of varicose veins
36479	Radiofrequency ablation of varicose veins
37204	Uterine artery embolization
37215	Carotid, Vertebral and Intracranial Artery Angioplasty - Transcatheter placement of stent, cervical carotid artery with distal embolic protection
37216	Carotid, Vertebral and Intracranial Artery Angioplasty - Transcatheter placement of stent, cervical carotid artery without distal embolic protection
41512	Tongue base suspension, permanent suture technique
41530	Tongue - Submucosal ablation of the tongue base, radiofrequency, one or more sites per session
41599	Glossectomy – unlisted procedure, tongue, floor of mouth
41870	Periodontal Mucosal Grafting
41874	Alveoplasty - as a result of accident or injury
42145	Palatopharyngoplasty - UPPP, LAUP's, and somnoplasty
42299	Somnoplasty for snoring
43257	Endoscopic treatment of GERD (Stretta or Endocinch)
43499	Stretta or Endocinch procedure, Endoscopic treatment of GERD
43632	Gastrectomy, partial distal; with gastrojejunostomy
43644	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43645	Gastric Bypass - gastroplasty - Need BMI, psychiatric evaluation, and nutritional consult

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43647	Gastric Pacemaker
43648	Gastric Pacemaker
43659	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43770	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43771	Gastric Bypass - revision of adjustable gastric restrictive device component only.
43772	Gastric Bypass - removal of adjustable gastric restrictive device component only.
43773	Gastric Bypass - removal and replacement of adjustable gastric restrictive device component only.
43774	Gastric Bypass - removal of adjustable gastric restrictive device and subcutaneous port components.
43775	Gastric restrictive procedure - Laparoscopy, surgical; longitudinal gastrectomy (i.e., sleeve gastrectomy)
43842	Gastric Bypass - gastroplasty - Need BMI, psychiatric evaluation, and nutritional consult
43843	Gastric Bypass - gastroplasty - Need BMI, psychiatric evaluation, and nutritional consult
43845	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43846	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43847	Gastric Bypass - Need BMI, psychiatric evaluation, and nutritional consult
43848	Gastric Bypass - revision, open, of gastric restrictive procedure for morbid obesity, other than adjustable gastric restrictive device (separate procedure).
43881	Gastric Pacemaker
43882	Gastric Pacemaker
43886	Gastric restrictive procedure open; revision of subcutaneous port component only
43887	Gastric restrictive procedure open; removal of subcutaneous port component only
43888	Gastric restrictive procedure open; removal and replacement of subcutaneous port component only
46505	Chemodenervation of internal anal sphincter
47120	Hepatectomy, resection of liver; partial lobectomy

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Code	Description
50250	Ablation, open, 1 or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound, if performed
50542	Ablation of renal mass lesion(s), including intraoperative ultrasound guidance and monitoring, when performed - Laparoscopy, surgical
50592	Ablation, 1 or more renal tumor(s), percutaneous, unilateral, radiofrequency
50593	Ablation, renal tumor(s), unilateral, percutaneous, cryotherapy
52647	Laser surgery of prostate
52648	Contact laser vaporization of prostate
52649	Laser enucleation of the prostate with morcellation, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation
53850	Transurethral destruction of prostate tissue; by microwave thermotherapy
53852	Transurethral destruction of prostate tissue; by radiofrequency thermotherapy
54125	Gender Reassignment Surgery - Amputation of penis; complete
54360	Penis plastic surgery
54400	Penile Prosthesis Implantation - Insertion of penile prosthesis; non-inflatable (semi-rigid)
54401	Penile Prosthesis Implantation - Insertion of penile prosthesis; inflatable (self-contained)
54405	Penile Prosthesis Implantation - Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir
54410	Penile Prosthesis Implantation - Removal and replacement of all component(s) of a multi-component, inflatable penile prosthesis at the same operative session
54411	Penile Prosthesis Implantation - Removal and replacement of all components of a multi-component inflatable penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue
54416	Penile Prosthesis Implantation - Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis at the same operative session
54417	Penile Prosthesis Implantation - Removal and replacement of a non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue

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Code	Description
54440	Plastic operation on penis for injury
54520	Gender Reassignment Surgery - Orchiectomy, simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach
54660	Gender Reassignment Surgery - Insertion of testicular prosthesis
54690	Gender Reassignment Surgery - Laparoscopy, surgical; orchiectomy
55180	Gender Reassignment Surgery - Scrotoplasty; complicated
55873	Cryosurgical ablation of the prostate (includes ultrasonic guidance and monitoring)
55970	Gender Reassignment Surgery - Intersex surgery; male to female
55980	Gender Reassignment Surgery - Intersex surgery; female to male
56625	Gender Reassignment Surgery - Vulvectomy, simple; complete
56800	Gender Reassignment Surgery - Plastic repair of introitus
56805	Gender Reassignment Surgery - Clitoroplasty for intersex state
56810	Perineoplasty, repair of perineum, nonobstetrical (separate procedure)
57110	Gender Reassignment Surgery - Vaginectomy, complete removal of vaginal wall
57291	Gender Reassignment Surgery - Construction of artificial vagina; without graft
57292	Gender Reassignment Surgery - Construction of artificial vagina; with graft
57295	Gender Reassignment Surgery - Revision (including removal) of prosthetic vaginal graft; vaginal approach
57296	Gender Reassignment Surgery - Revision (including removal) of prosthetic vaginal graft; open abdominal approach
57335	Vaginoplasty for intersex state
58578	HALT procedure (Unlisted laparoscopy procedure, uterus)
61630	Carotid, Vertebral and Intracranial Artery Angioplasty - Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous
61635	Carotid, Vertebral and Intracranial Artery Angioplasty - Transcatheter placement of intravascular stent(s), intracranial (e.g., atherosclerotic stenosis), including balloon angioplasty, if performed

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Code	Description
61640	Carotid, Vertebral and Intracranial Artery Angioplasty - Balloon dilatation of intracranial vasospasm, percutaneous; initial vessel
61641	Carotid, Vertebral and Intracranial Artery Angioplasty - Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in same vascular family (list separately in addition to code for primary procedure)
61642	Carotid, Vertebral and Intracranial Artery Angioplasty - Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in different vascular family (list separately in addition to code for primary procedure)
61796	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; 1 simple cranial lesion
61797	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; each additional cranial lesion, simple
61798	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; 1 complex cranial lesion
61799	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; each additional cranial lesion, complex
61800	Stereotactic Radiosurgery - Application of stereotactic headframe
61863	Deep Brain Stimulation - Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperat
61864	Deep Brain Stimulation - Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array
61867	Deep Brain Stimulation - Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array
61868	Deep Brain Stimulation - Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array
61870	Craniectomy for implantation of neurostimulator electrodes, cerebellar; cortical
61875	Craniectomy for implantation of neurostimulator electrodes, cerebellar; subcortical

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Code	Description
61885	Deep Brain Stimulation - Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array
61886	Deep Brain Stimulation - Incision and subcutaneous placement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to two or more electrode arrays
62263	Percutaneous Lysis of Epidural Adhesions using Solution Injection or Mechanical means including Radiologic Localization, Multiple Adhesiolysis Sessions, 2 or more days
62264	Percutaneous Lysis of Epidural Adhesions using Solution Injection or Mechanical means including Radiologic Localization, Multiple Adhesiolysis Sessions, 1 day
62287	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method, single or multiple levels, lumbar
63005	Spinal surgery - Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; lumbar, except for spondylolisthesis
63012	Spinal surgery - Laminectomy with removal of abnormal facets and/or pars inter-articularis with decompression of cauda equina and nerve roots for spondylolisthesis, lumbar (Gill type procedure)
63017	Spinal surgery - Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; lumbar
63030	Spinal surgery - Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, including open and endoscopically-assisted approaches; 1 interspace, lumbar
63042	Spinal surgery - Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; lumbar
63047	Spinal surgery - Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; lumbar
63056	Spinal surgery - Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; lumbar (including transfacet, or lateral extraforaminal approach) (eg, far lateral herniated intervertebral disc)

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Code	Description
63081	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, single segment
63082	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)
63085	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, single segment
63087	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment
63090	Vertebral corpectomy (vertebral body resection), partial or complete; transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment
63091	Vertebral corpectomy (vertebral body resection), partial or complete; transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment
63185	Laminectomy with rhizotomy, one or two segments
63190	Laminectomy with rhizotomy; more than two segments
63620	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; 1 spinal lesion
63621	Stereotactic Radiosurgery (Particle beam, Gamma Ray or Linear Accelerator); Cyberknife; each additional spinal lesion
63650	Neurostimulator Implantation - Percutaneous implantation of neurostimulator electrode array, epidural
63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural
63685	Neurostimulator Implantation - Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling
64553	Neurostimulator Implantation - Percutaneous implantation of neurostimulator electrodes; cranial nerve
64555	Neurostimulator Implantation - Percutaneous implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve)
64561	Neurostimulator Implantation - Percutaneous implantation of neurostimulator electrodes; sacral nerve (transforaminal placement)
64575	Incision for implantation of neurostimulator electrodes; peripheral nerve
64581	Neurostimulator Implantation - Incision for implantation of neurostimulator electrodes; sacral nerve (transforaminal placement)

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Code	Description
64590	Neurostimulator Implantation - Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling
64595	Gastric Pacemaker
64600	Destruction by neurolytic agent, trigeminal nerve; supraorbital, infraorbital, mental, or inferior alveolar
64612	Chemodenervation of muscle(s); muscle(s) innervated by facial nerve
64613	Chemodenervation of muscle(s); neck (EG, for spasmodic torticollis, spasmodic dysphonia)
64614	Chemodenervation of muscle; cervical spine muscle
64633	Destruction by neurolytic agent paravertebral facet joint nerve; lumbar or sacral, single level
64634	Destruction by neurolytic agent, paravertebral facet joint nerve; lumbar or sacral, each additional level [when specified as radiofrequency facet neurolysis]
64635	Destruction by neurolytic agent; cervical or thoracic, single level
64636	Destruction by neurolytic agent; cervical or thoracic, each additional level
64640	Destruction by neurolytic agent; other peripheral nerve or branch
64650	Chemodenervation of eccrine glands
64653	Chemodenervation of other area(s)
64716	Neuroplasty and/or transposition; cranial nerve
64732	Transection or avulsion of; supraorbital nerve
64734	Transection or avulsion of; infraorbital nerve
64736	Transection or avulsion of; mental nerve
64738	Transection or avulsion of; inferior alveolar nerve by osteotomy
64740	Transection or avulsion of; lingual nerve
64742	Transection or avulsion of; facial nerve, differential or complete



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Code	Description
64864	Suture of facial nerve; extracranial
64865	Suture of facial nerve; infratemporal, with or without grafting
64866	Anastomosis; facial-spinal accessory
64868	Anastomosis; facial-hypoglossal
64870	Anastomosis; facial-phrenic
66174	Canaloplasty - Transluminal dilation of aqueous outflow canal; without retention of device or stent
66175	Canaloplasty - Transluminal dilation of aqueous outflow canal; with retention of device or stent
67220	Treatment of choroid lesion
67345	Chemodervation of extraocular muscle
67900	Blepharoplasty - repair of brow ptosis ( supraciliary, mid-forehead or corneal approach)
67901	Blepharoplasty - repair of blepharoptosis; frontalis muscle technique with suture or other material (eg, banked fascia)
67902	Blepharoplasty - repair of blepharoptosis; frontalis muscle technique with autologous facial sling (includes obtaining fascia)
67903	Blepharoplasty - repair of blepharoptosis; (tarso) levator resection or advancement, internal approach
67904	Blepharoplasty - repair of blepharoptosis; (tarso) levator resection or advancement, external approach
67906	Blepharoplasty - repair of blepharoptosis; superior rectus technique with facial sling (includes obtaining fascia)
67908	Blepharoplasty - repair of blepharoptosis; conjunctivo-tarso-Muller's muscle-levator resection (eg, Fasanella-Servat type)
67917	Ectropion Repair
69090	Ear piercing
69300	Otoplasty, protruding ear, with or without size reduction
69710	Implant/replace hearing aid
69714	Implantable hearing aids
69715	Implantation, osseointegrated implant, temporal bone, with percutaneous attachment to exte
69717	Bone-Anchored Hearing Aids -Replacement (including removal of existing device), osseointegrated implant, temporal bone

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Code	Description
69718	Bone-Anchored Hearing Aids - Replacement (including removal of existing device), osseointegrated implant, temporal bone
69930	Cochlear device implantation, with or without mastoidectomy
69955	Total facial nerve decompression and/or repair (may include graft)
71250	Ultra fast CT - Computed tomography, thorax without contrast material
71260	Ultra fast CT - Computerized axial tomography, thorax with contrast material
71270	Ultra fast CT - Computerized axial tomography, thorax with contrast material, followed by contrast material
72291	Kyphoplasty - Radiological supervision and interpretation, percutaneous vertebroplasty or vertebral augmentation including cavity creation, per vertebral body; under fluoroscopic guidance
72292	Kyphoplasty - Radiological supervision and interpretation, percutaneous vertebroplasty or vertebral augmentation including cavity creation, per vertebral body; under CT guidance
74261	Virtual Colonoscopy - Computed tomographic (CT) colonography, diagnostic, including image post processing; without contrast material
74262	Virtual Colonoscopy - Computed tomographic (CT) colonography, diagnostic, including image post processing; with contrast material(s) including non-contrast images, if performed
74263	Virtual Colonoscopy - Computed tomographic (CT) colonography, screening, including image post processing
75571	Ultra fast CT - Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium
75894	Uterine artery embolization
76376	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound or other tomographic modality; not requiring image post processing on an independent workstation.
76377	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound or other tomographic modality; requiring image post processing on an independent workstation.
76390	Magnetic Resonance Spectroscopy
76499	Unlisted Diagnostic Radiographic Procedure

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Code	Description
77058	MRI - Breast
77059	MRI - Breast
77301	IMRT - Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications
77338	IMRT - Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan
77418	IMRT - Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session
77520	Proton Beam Therapy
77522	Proton Beam Therapy
77523	Proton Beam Therapy
77525	Proton Beam Therapy
89344	Cryopreservation of Oocytes or Ovarian Tissue - Storage, (per year); reproductive tissue, testicular/ovarian [specified as ovarian tissue]
89346	Cryopreservation of Oocytes or Ovarian Tissue - Storage, (per year); oocyte(s)
89354	Cryopreservation of Oocytes or Ovarian Tissue - Thawing of cryopreserved; reproductive tissue, testicular/ovarian [specified as ovarian tissue]
89356	Cryopreservation of Oocytes or Ovarian Tissue - Thawing of cryopreserved; oocytes (each aliquot)
91110	Capsule Endoscopy - Gastrointestinal tract imaging, intraluminal, esophagus through ileum, with physician interpretation and report
91111	Capsule Endoscopy - Gastrointestinal tract imaging, intraluminal, esophagus, with physician interpretation and report
93228	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; physician review and interpretation with report

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Code	Description
93229	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and physician prescribed transmission of daily and emergent data reports
93580	Transcatheter closure of a patent foramen ovale - Percutaneous transcatheter closure of congenital interatrial communication (i.e., fontan fenestration, atrial septal defect) with implant
95803	Sleep study/Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording)
95805	Sleep study/Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness
95965	Magnetoencephalography (MEG)
95966	Magnetoencephalography (MEG)
95967	Magnetoencephalography (MEG)
97605	Negative pressure wound therapy (e.g., vacuum assisted drainage collection), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters (code associated with wound vac)
97606	Negative pressure wound therapy (e.g., vacuum assisted drainage collection), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters (code associated with wound vac)
99183	Physician attendance and supervision of hyperbaric oxygen therapy, per session
0019T	Extracorporeal shock wave therapy (Orthotripsy)/Orthotripsy (heel) Ossatron
0054T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on fluoroscopic images
0055T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on CT/MRI images
0071T	Focused ultrasound ablation of uterine leiomyomata
0072T	Focused ultrasound ablation of uterine leiomyomata

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Code	Description
0073T	IMRT - Compensator-based beam modulation treatment delivery of inverse planned treatment using three or more high resolution (milled or cast) compensator convergent beam modulated fields, per treatment session
0075T	Carotid, Vertebral and Intracranial Artery Angioplasty - Transcatheter placement of extracranial vertebral or intrathoracic carotid artery stent(s); initial vessel
0076T	Carotid, Vertebral and Intracranial Artery Angioplasty - Transcatheter placement of extracranial vertebral or intrathoracic carotid artery stent(s); each additional vessel
0092T	Artificial Intervertebral Discs - total disc arthroplasty, anterior approach, including discectomy to prepare interspace; cervical - each additional interspace
0095T	Artificial Intervertebral Discs - Removal of total disc arthroplasty, anterior approach cervical; each additional interspace
0098T	Artificial Intervertebral Discs - Revision of total disc arthroplasty, anterior approach cervical; each additional interspace
0101T	Extracorporeal shock wave therapy (Orthotripsy)
0102T	Extracorporeal shock wave therapy (Orthotripsy)
0155T	Gastric Electrical Stimulation - Laparoscopy, surgical; implantation or replacement of gastric stimulation electrodes, lesser curvature
0156T	Gastric Electrical Stimulation - Revision or removal of gastric stimulation electrodes, lesser curvature
0157T	Gastric Electrical Stimulation -Laparotomy, implantation or replacement of gastric stimulation electrodes, lesser curvature
0158T	Gastric Electrical Stimulation - Laparotomy, revision or removal of gastric stimulation electrodes, lesser curvature
0163T	Artificial Intervertebral Discs - total disc arthroplasty, anterior approach, including discectomy to prepare interspace (other than for decompression); lumbar, each additional interspace
0164T	Artificial Intervertebral Discs - Removal of total disc arthroplasty, anterior approach, lumbar, each additional interspace
0165T	Artificial Intervertebral Discs - Revision of total disc arthroplasty, anterior approach, lumbar, each additional interspace
0166T	Transcatheter closure of a patent foramen ovale - Transmyocardial transcatheter closure of ventricular septal defect, with implant; without cardiopulmonary bypass
0167T	Transcatheter closure of a patent foramen ovale - Transmyocardial transcatheter closure of ventricular septal defect, with implant; with cardiopulmonary bypass

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Code	Description
0171T	Insertion of posterior spinous process distraction device , lumbar; single level
0172T	Insertion of posterior spinous process distraction device, lumbar; each additional level
0186T	Suprachoroidal delivery of pharmacologic agent (does not include supply of medication)
0191T	Insertion of anterior segment aqueous drainage device, without extraocular reservoir; internal approach
0192T	Insertion of anterior segment aqueous drainage device, without extraocualr reservoir, external approach
0195T	Spinal fusion - Arthrodesis, pre-sacral interbody technique, including instrumentation, imaging (when performed), and discectomy to prepare interspace, lumbar; single interspace
0196T	Spinal fusion - Arthrodesis, pre-sacral interbody technique, including instrumentation, imaging (when performed), and discectomy to prepare interspace, lumbar; each additional interspace (List separately in addition to code for primary procedure)
0219T	Spinal surgery - Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; cervical
0220T	Spinal surgery - Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; thoracic
0221T	Spinal surgery - Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; lumbar
0222T	Spinal surgery - Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; each additional vertebral segment
A0430	Ambulance service, conventional air services, transport, one way (fixed wing)
A0431	Ambulance service, conventional air services, transport, one way (rotary wing)
A0435	Ambulance service - Fixed wing air mileage, per statute mile
A0436	Ambulance service - Rotary wing air mileage, per statute mile
A0999	Ambulance service - Unlisted [when specified as ambulance service, water transport]
A6550	Wound care set, for negative pressure wound therapy electrical pump, includes all supplies and accessories (code associated with wound vac)
A7025	High frequency chest wall oscillation system vest, replacement for use with patient owned equipment

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Code	Description
A9274	External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories
C1721	Cardioverter-defibrillator, dual chamber (implantable)
C1722	Cardioverter-defibrillator, single chamber (implantable)
C1777	Cardiac Resynchronization Therapy - Lead, cardioverter-defibrillator, endocardial single coil (implantable)
C1789	Breast procedure - Prosthesis, breast (implantable)
C1882	Cardioverter-defibrillator, other than single or dual chamber (implantable)
C1895	Cardiac Resynchronization Therapy - Lead, cardioverter-defibrillator, endocardial dual coil (implantable)
C1896	Cardiac Resynchronization Therapy - Lead, cardioverter-defibrillator, other than endocardial single or dual coil (implantable)
C8903	MRI - Breast
C8904	MRI - Breast
C8905	MRI - Breast
C8906	MRI - Breast
C8906	MRI - Breast
C8908	MRI - Breast
C9727	Insertion of implants into the soft palate; minimum of three implants
D7810	Temporomandibular Disorders: Open reduction of dislocation
D7820	Temporomandibular Disorders: Closed reduction of dislocation
D7830	Temporomandibular Disorders: Manipulation under anesthesia
D7840	Temporomandibular Disorders: Condylectomy
D7850	Temporomandibular Disorders: Surgical discectomy with/without implant-excision of the intra-articular disc of a joint
D7852	Temporomandibular Disorders: Disc repair
D7854	Temporomandibular Disorders: Synovectomy
D7856	Temporomandibular Disorders: Myotomy

## Prior Authorization List

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Code	Description
D7858	Temporomandibular Disorders: Joint reconstruction
D7860	Temporomandibular Disorders: Arthrotomy
D7865	Temporomandibular Disorders: Arthroplasty
D7870	Temporomandibular Disorders: Arthrocentesis
D7871	Temporomandibular Disorders: Nonarthroscopic lysis and lavage
D7873	Temporomandibular Disorders: Arthroscopy-surgical: lavage and lysis of adhesions
D7874	Temporomandibular Disorders: Arthroscopy - surgical: debridement
D7875	Temporomandibular Disorders: Arthroscopy - surgical: synovectomy
D7876	Temporomandibular Disorders: Arthroscopy - surgical: discectomy
D7877	Temporomandibular Disorders: Arthroscopy - surgical: debridement
D7940	Mandibular/Maxillary (Orthognathic) Surgery - Osteoplasty - for orthognathic deformities
D7941	Mandibular/Maxillary (Orthognathic) Surgery - Osteotomy; mandibular rami
D7943	Mandibular/Maxillary (Orthognathic) Surgery - Osteotomy; mandibular rami with bone graft; includes obtaining the graft
D7944	Mandibular/Maxillary (Orthognathic) Surgery - Osteotomy-segmented or subapical-per sextant or quadrant
D7945	Mandibular/Maxillary (Orthognathic) Surgery -Osteotomy-body of mandible
D7946	Mandibular/Maxillary (Orthognathic) Surgery - LeFort I (maxilla, total)
D7947	Mandibular/Maxillary (Orthognathic) Surgery - LeFort I (maxilla - segmented)
D7948	Mandibular/Maxillary (Orthognathic) Surgery - LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion); without bone graft
D7949	Mandibular/Maxillary (Orthognathic) Surgery - LeFort II or LeFort III; with bone graft
D7950	Mandibular/Maxillary (Orthognathic) Surgery - Osseous graft to mandible
D7995	Mandibular/Maxillary (Orthognathic) Surgery - Synthetic graft, mandible or facial bones, by report
D7996	Mandibular/Maxillary (Orthognathic) Surgery - Implant-mandible or augmentation purposes (excluding alveolar ridge)

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Code	Description
E0481	Intrapulmonary percussive ventilation system and related accessories
E0483	High frequency chest wall oscillation air-pulse generator system, includes hoses and vest
E0638	Standing frame system, one position (e.g. upright,
E0641	Standing frame system, multi-position (e.g. three-
E0642	Standing frame system, mobile (dynamic stander), any size including pediatric
E0652	Pneumatic compressor, segmental home model with calibrated gradient pressure
E0745	Neuromuscular stimulator, electronic shock unit
E0747	Bone Growth Stimulators - Osteogenesis stimulator; electrical, noninvasive, other than spinal applications
E0748	Bone Growth Stimulators - Osteogenesis stimulator; electrical, noninvasive, spinal applications
E0749	Bone Growth Stimulator - electrical surgically implanted
E0760	Bone Growth Stimulators - Low intensity ultrasound stimulation to aid bone healing, noninvasive (non operative)
E0761	Nonthermal pulsed high frequency radiowaves, high peak power electromagnetic energy treatment device
E0764	Functional neuromuscular stimulator, transcutaneous stimulation of sequential muscle groups of ambulation with computer control, used for walking by spinal cord injured, entire system, after completion of training program
E0770	Functional electrical stimulator, transcutaneous stimulation of nerve and/or muscle groups, any type, complete system, not otherwise specified
E0784	Insulin Pump
E1002	Wheelchair accessory, power seating system
E1003	Wheelchair accessory, power seating system
E1004	Wheelchair accessory, power seating system
E1005	Wheelchair accessory, power seating system
E1006	Wheelchair accessory, power seating system
E1007	Wheelchair accessory, power seating system

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Code	Description
E1008	Wheelchair accessory, power seating system
E1230	Wheelchair - Power operated vehicle (three- or four-wheel non highway)
E1239	Wheelchair - Power wheelchair, pediatric size, not otherwise specified
E1399	Misc/Unlisted DME code
E1902	Speech Generating Devices - Communication board, non-electronic augmentative or alternative communication device
E2120	Pulse generator system for tympanic treatment of inner ear endolymphatic fluid
E2351	Power wheelchair accessory, electronic interface to operate speech generating device using
E2402	Wound Vac - Negative pressure wound therapy electrical pump, stationary or portable
E2500	Speech generating device, digitized speech, using prerecorded messages, less than or equal to 8 minutes recording time
E2502	Speech generating device, digitized speech, using prerecorded messages, greater than 8 minutes but less than or equal to 20 minutes recording time
E2504	Speech generating device, digitized speech, using prerecorded messages, greater than 20 minutes but less than or equal to 40 minutes recording time
E2506	Speech generating device, digitized speech, using prerecorded messages, greater than 40 minutes recording time
E2508	Speech generating device, synthesized speech, requiring message formulation by spelling and access by physical contact with the device
E2510	Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access
G0173	Stereotactic radiosurgery, complete course of therapy in one session (special coverage ins
G0251	Stereotactic radiosurgery - linear accelerator based delivery including collimator changes
J7330	Autologous cultured chondrocytes knee, implant
K0005	Wheelchair - Ultra lightweight
K0010	Wheelchair - Motorized/power
K0011	Wheelchair - Motorized/power



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Code	Description
K0012	Wheelchair - Motorized/power
K0014	Wheelchair - Motorized/power
K0800	Wheelchair - Power operated vehicle, group 1
K0801	Wheelchair - Power operated vehicle, group 1
K0802	Wheelchair - Power operated vehicle, group 1
K0806	Wheelchair - Power operated vehicle, group 2
K0807	Wheelchair - Power operated vehicle, group 2
K0808	Wheelchair - Power operated vehicle, group 2
K0812	Wheelchair - Power operated vehicle, not otherwise classified [scooter]
K0813	Wheelchair - Power wheelchair, group 1 standard
K0814	Wheelchair - Power wheelchair, group 1 standard
K0815	Wheelchair - Power wheelchair, group 1 standard
K0816	Wheelchair - Power wheelchair, group 1 standard
K0820	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0821	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0822	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0823	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0824	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0825	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0826	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0827	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0828	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0829	Wheelchair - Power wheelchair, group 2 standard/heavy duty

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Code	Description
K0830	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0831	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0835	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0836	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0837	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0838	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0839	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0840	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0841	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0842	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0843	Wheelchair - Power wheelchair, group 2 standard/heavy duty
K0848	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0849	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0850	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0851	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0852	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0853	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0854	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0855	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0856	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0857	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0858	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0859	Wheelchair - Power wheelchair, group 3 standard/heavy duty

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Code	Description
K0860	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0861	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0862	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0863	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0864	Wheelchair - Power wheelchair, group 3 standard/heavy duty
K0868	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0869	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0870	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0871	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0877	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0878	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0879	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0880	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0884	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0885	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0886	Wheelchair - Power wheelchair, group 4 standard/heavy duty
K0890	Wheelchair - Power wheelchair, group 5 pediatric
K0891	Wheelchair - Power wheelchair, group 5 pediatric
K0898	Wheelchair - Power wheelchair, not otherwise classified
K0899	Wheelchair - Power mobility device, not coded by DME PDAC or does not meet criteria
L5856	Custom prosthesis - Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing and stance phase

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Code	Description
L5857	Custom prosthesis - Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing phase only
L5858	Custom prosthesis - Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, stance phase only
L6025	Custom prosthesis - Partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm section, electrodes and cables, two batteries, charger, myoelectric control of terminal device
L6611	Custom prosthesis - Addition to upper extremity prosthesis, external powered, additional switch, any type
L6677	Custom prosthesis - Upper extremity addition, harness, triple control, simultaneous operation of terminal device and elbow
L6881	Custom Prosthesis - Automatic grasp feature, addition to upper limb prosthetic terminal device
L6925	Custom prosthesis - Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell
L6935	Custom prosthesis - Below elbow, external power, self-suspended inner socket, removable forearm shell
L6945	Custom prosthesis - Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device
L6955	Custom prosthesis - Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm
L6965	Custom prosthesis - Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm
L6975	Custom prosthesis - Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm
L7007	Custom Prosthesis - Adult electric hand
L7008	Custom prosthesis - Electric hand, switch or myoelectric controlled, pediatric
L7009	Custom prosthesis - Electric hook, switch or myoelectric controlled, adult
L7045	Custom prosthesis - Electronic hook, child, michigan or equal, switch controlled
L7180	Custom prosthesis - Electronic elbow, Boston, Utah or equal, myoelectronically controlled
L7181	Custom prosthesis - Electronic elbow, microprocessor simultaneous control of elbow and terminal device
L7190	Custom prosthesis - Electronic elbow, adolescent, Variety Village or equal, myoelectronically controlled

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Code	Description
L7191	Custom prosthesis - Electronic elbow, child, variety village or equal, myoelectronically controlled
L8600	Breast procedure - Implantable breast prosthesis, silicone or equal
L8614	Cochlear device, includes all internal and external components
L8619	Cochlear Implant - external speech processor and controller, integrated system, replacement
L8627	Cochlear Implant - external speech processor, component, replacement
L8628	Cochlear Implant - external controller component, replacement
L8680	Neurostimulator Implantation – Implantable Neurostimulator Electrode
L8682	Neurostimulator Implantation - Implantable Neurostimulator Radiofrequency Receiver
L8683	Neurostimulator Implantation - Radiofrequency Transmitter (external) For Use With Implantable Neurostimulator Radiofrequency Receiver
L8684	Neurostimulator Implantation - Radiofrequency transmitter (external) for use with implantable sacral root neurostimulator receiver for bowel and bladder management, replacement
L8685	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, single array, rechargeable, includes extension
L8686	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, single array, non-rechargeable, includes extension
L8687	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, dual array, rechargeable, includes extension
L8688	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, dual array, non-rechargeable, includes extension
L8690	Bone-Anchored Hearing Aids - Auditory osseointegrated device, includes all internal and external components
L8691	Cochlear Implant - Auditory osseointegrated device, external sound processor, replacement
L8699	Prosthetic implant, not otherwise specified [when describing replacement components of an auditory brain stem implant]
S2066	Breast procedure - Breast reconstruction with gluteal artery perforator (GAP) flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral
S2067	Breast procedure - Breast reconstruction of a single breast with "stacked" deep inferior epigastric perforator (DIEP) flap(s) and/or gluteal artery perforator

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Code	Description
S2068	Breast procedure - Breast reconstruction with deep inferior epigastric perforator flap or superficial inferior epigastric artery flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral
S2080	Laser-assisted uvulopalatoplasty
S2112	Autologous chondrocyte transplantation/Arthroscopy knee, surgical harvesting of cartilage (chondrocyte cells)
S2117	Subtalar Arthroereisis - Arthroereisis, subtalar
S2202	Sclerotherapy
S2230	Implantation of magnetic component of semi-implantable hearing device on ossicles in middle ear
S2235	Cochlear Implant - implantation of auditory brain stem implant
S2300	Electrothermal capsular shrinkage - Arthroscopy, shoulder, surgical; with thermally-induced capsulorrhaphy
S2342	Nasal endoscopy for post-operative debridement following functional endoscopic sinus surgery, nasal and/or sinus cavity(s), unilateral or bilateral
S2360	Kyphoplasty - Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; cervical
S2361	Kyphoplasty - Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; each additional cervical (list separately in addition to primary procedure)
S3818	Genetic testing for cancer susceptibility - Complete gene sequence analysis
S3819	Genetic testing for cancer susceptibility - Complete gene sequence analysis
S3820	Genetic testing for cancer susceptibility - Complete gene sequence analysis
S3822	Genetic testing for cancer susceptibility - Single mutation analysis (in individual with a known BRCA1 or BRCA2 mutation in the family) for susceptibility to breast and ovarian
S3823	Genetic testing for cancer susceptibility - Three-mutation BRCA 1 and BRCA 2 analysis for susceptibility to breast and ovarian cancer in Ashkenazi individuals
S3828	Genetic testing for cancer susceptibility - Complete gene sequence analysis; MLH1 and/or MSH2 gene(s)
S3829	Genetic testing for cancer susceptibility - Complete gene sequence analysis; MLH1 and/or MSH2 gene(s)



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Code	Description
S3830	Genetic testing for cancer susceptibility - Complete gene sequence analysis; MLH1 and/or MSH2 gene(s)
S3831	Genetic testing for cancer susceptibility - Single-mutation analysis (in individual with a known MLH1 and MSH2 mutation in the family) for hereditary nonpolyposis colorectal cancer (HNPCC) genetic testing
S3833	Genetic testing for cancer susceptibility - Complete APC gene sequence analysis for susceptibility to familial adenomatous polyposis (FAP) and attenuated FAP
S3834	Genetic testing for cancer susceptibility - Single-mutation analysis (in individuals with a known APC mutation in the family) for susceptibility to familial adenomatous polyposis (FAP) and attenuated FAP
S3840	Genetic testing for cancer susceptibility - DNA analysis for germline mutations of the RET proto-oncogene for susceptibility to multiple endocrine neoplasia type 2 (MENS 2)
S8030	Proton Beam Therapy
S8092	Ultra fast CT - Electron beam computed tomography
Unlisted codes	<b>Unlisted CPT codes</b>
V2788	Presbyopia correcting function of intraocular lens