Humana

Medicare Advantage and Dual Eligible Special Needs Plans Preauthorization and Notification List

Effective date: January 1, 2025 Revision date: May 1, 2025

	age and Dual Eligible Special horization and Notification Li	
Category	Details/Notes	Codes
Abdominoplasty		15830, 15847
Ablation	Bone, liver, kidney and prostate cancer Evolent (formerly New Century Health) will manage all preauthorization requests. Requests can be submitted via: Evolent's website at https://my.newcenturyhealth.co m Or call Evolent (formerly New Century Health) at 844-926-4528, option 5 for Surgical Services, to speak to a live representative, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. eFax # 213-596-3783 or efax-carepro-oncology@newcenturyhealth.com.	20982, 20983, 47370, 47371, 47380, 47381, 47382, 47383, 50250, 50541, 50542, 50592, 50593, 51721*, 53850, 53852, 53854, 55873, 55881*, 55882* 0421T, 0582T
	Cardiac ablation/electrophysiology	93650, 93653, 93654, 93656
Behavioral health services	Partial hospitalization Transcranial magnetic stimulation (TMS)	900, 904, 910, 912, 913, 914, 915, 916, 918, 942 90867, 90868, 90869, E0732
Bladder slings	stillutation (11·10)	57288

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Blepharoplasty		15820, 15821, 15822, 15823, 67900, 67903, 67904, 67908, 67909, 67911, 67914, 67916, 67917, 67921, 67923, 67924, 67950
Bone growth stimulators		E0747, E0748, E0760
Breast procedures	Breast cancer biopsy (excisional)	19120, 19125
	Evolent (formerly New Century Health) will manage all preauthorization requests. Requests can be submitted via: Evolent's website at https://my.newcenturyhealth.co m • Or call Evolent (formerly New Century Health) at 844-926-4528, option 5 for Surgical Services, to speak to a live representative, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. • eFax # 213-596-3783 or efax-carepro-oncology@newcenturyhealt h.com	
	Breast lumpectomy	19301, 19302
	Evolent (formerly New Century Health) will manage all preauthorization requests. Requests can be submitted via: Evolent's website at https://my.newcenturyhealth.com Or call Evolent (formerly New Century Health) at 844-926-4528, option 5 for Surgical Services, to speak to a live representative,	

	Monday – Friday, 8 a.m. – 8 p.m., Eastern time. • eFax # 213-596-3783 or efax-carepro-oncology@newcenturyhealt h.com Other breast procedures (excludes breast reconstruction following medically necessary mastectomies for breast cancer)	11971, 19316, 19318, 19325, 19328, 19330, 19340, 19342, 19350, 19357, 19370, 19371, 19380, C1789, L8600
	Simple mastectomy and gynecomastia surgery (excludes radical and modified) Evolent (formerly New Century Health) will manage all preauthorization requests.	19300, 19303
	Requests can be submitted via: Evolent's website at https://my.newcenturyhealth.co m Or call Evolent (formerly New Century Health) at 844- 926-4528, option 5 for Surgical Services, to speak to a live representative, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.	
	eFax # 213-596-3783 or efax-carepro- oncology@newcenturyhealt h.com	01110 01111 01112
Capsule endoscopy		91110, 91111, 91113, 0651T
Cardiac devices	Aortic repair	33875, 33877, 33880, 33881, 33883, 33886, 34701, 34702, 34703, 34704, 34705, 34706,

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	34830, 34831, 34832,
	34841, 34842, 34843,
	34844, 34845, 34846,
	34847, 34848
Cardiac implantable	33206, 33207, 33208,
devices (e.g., CardioMEMS	33210, 33211, 33212,
pacemakers, leadless	33213, 33214, 33216,
pacemakers, left atrial	33217, 33221, 33224,
appendage closure	33227, 33228, 33229,
[LAAC], defibrillators	33230, 33231, 33233,
[implantable and	33234, 33235, 33240,
subcutaneous] and	33241, 33244, 33249,
cardiac resynchronization	33262, 33263, 33264,
therapy)	33270, 33271, 33272,
	33273, 33274, 33275,
	33289, 33340, 93264,
	0266T, 0267T, 0268T,
	0269T, 0270T, 0271T,
	0272T, 0273T, 0408T,
	0409T, 0410T, 0411T,
	0412T, 0413T, 0414T,
	0415T, 0416T, 0417T,
	0418T, 0571T, 0572T,
	0573T, 0574T, 0580T,
	0614T, 0795T, 0796T,
	0797T, 0798T, 0799T,
	0800T, 0801T, 0802T,
	0803T, 0823T, 0824T,
	0825T, 0826T, 0915T*
	0916T*, 0917T*, 0918T*,
	0919T*, 0920T*, 0921T*,
	0922T*, 0923T*, 0924T*,
	0925T*, 0926T*, 0927T*,
	0933T*, 0934T*,C1605,
	C1721, C1722, C1777,
	C1779, C1785, C1786,
	C1825, C1824, C1882,
	C1895, C1896, C1898,

	Implantable Carotid Sinus Stimulator Internal loop recorders Wearable cardiac monitoring devices	C1899, C1900, C2619, C2620, C2621, C2624, G0555* 0266T, 0267T, 0268T, 0269T, 0270T, 0271T, 0272T, 0273T, C1825 33285, 33286 93228, 93229
Cardiac procedures/surgeries	Cardiac catheterizations	93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93593, 93594, 93595, 93596, 93597
	Carotid revascularization	35301, 37215, 37216, 37217, 37218
	Coronary angioplasty/stent	92920, 92924, 92928, 92933, 92937, 92943, 92972, 0913T*, 0914T, C1761, C9600, C9602, C9604, C9607
	Patent foramen ovale (PFO) and atrial septal defect (ASD) closure	93580
	Transcatheter valve surgeries (TMVR, TAVR/TAVI and MitraClip)	33361, 33362, 33363, 33364, 33365, 33366, 33418, 0345T, 0805T, 0806T
Cellular (including chimeric antigen receptor T-cell therapy (CAR T)), genetic, tissue and transplant therapies	Preauthorization requests will be reviewed by the Humana National Transplant Network • Submit by fax to 502-508-9300. • Submit by telephone to 866-421-5663. • Submit by email to	38225*, 38226*, 38227*, 38228*, 38999, 60699*, C9399, J3392* J3393*, J3394*, J3490, J3590, J9999*, Q2041, Q2042, Q2053, Q2054, Q2055, Q2056, XW0338A*, XW0438A*, XW033C7, XW033G7, XW033H7,

	transplant@humana.com.	XW033J7, XW033K7, XW033L7*, XW033M7, XW033N7, XW043C7, XW043G7, XW043H7, XW043J7, XW043K7, XW043L7*, XW043M7, XW043N7, XW133G8*, XW143G8*, XW133J8, XW143J8
Chemotherapy agents, supportive drugs and symptom management drugs category Chiropractic and acupuncture therapy	Cellular (including chimeric antigen receptor T-cell therapy (CAR T)), genetic, tissue and transplant therapy Tivity Health/WholeHealth Living (WHL) will manage all preauthorization requests from providers within the WHL network for chiropractic therapy services for South Florida. Tivity Health/WholeHealth Living (WHL) will manage all preauthorization requests for acupuncture therapy from providers in the WHL network in the following states: Arizona, Colorado, Connecticut, Delaware, District of Columbia, Florida, Idaho, Kentucky,* Maine, Maryland, Massachusetts,	This list is subject to change as new drugs are brought to market. Please follow link (left) for current codes. 20560, 20561, 97810, 97811, 97813, 97814, 98940, 98941, 98942, 98943
	Montana, New Hampshire, New Jersey, New Mexico,	

New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, Texas,* Utah, Vermont, Virginia, Washington and Wyoming.

*Certain plans in these states do not use the WholeHealth Living network and use the Humana network.

To submit a preauthorization request:

• Use the <u>Tivity Health</u> online portal.

(www.wholehealthpro.com/)

- Call 855-800-9804
- Fax 888-492-1025

(American Specialty Health (ASH) will manage all preauthorization requests for chiropractic and acupuncture with plans in Southern California.

To submit a preauthorization request:

 Chiropractic therapy: Fax 877-427-4777 (Southern CA)

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	 Acupuncture 	
	therapy: Fax 877	
	248-2746	
	Note: Preauthorization is	
	not required in states not	
	listed above.	
Colonoscopy (repeat only)		45378, 45380
Cutaneous vascular lesion removal		17106, 17107, 17108
Decompression of peripheral nerve		29848, 64721
(i.e., carpal tunnel surgery)		
Diagnostic/cardiac imaging	Computed tomography	70450, 70460, 70470,
	(CT) scan	70480, 70481, 70482,
The following services will now be managed		70486, 70487, 70488,
via Cohere. Please submit authorizations to		70490, 70491, 70492,
www.Next.Coherehealth.com. If not registered, please use		70496, 70498, 71250,
www.Coherehealth.com/register.		71260, 71270, 71275,
		72125, 72126, 72127,
Preauthorization requests for services		72128, 72129, 72130,
managed by Cohere		72131, 72132, 72133,
Requests can be submitted via: • Cohere Health's portal (online):		72191, 72192, 72193,
 Information and to request a new 		72194, 73200, 73201,
account:		73202, 73206, 73700,
www.Coherehealth.com/register		73701, 73702, 73706,
Additional provider information:		74150, 74160, 74170,
www.coherehealth.com/provider/res ources		74174, 74175,74176,
Portal login (preauthorization		74177, 74178, 74261,
request): Next.Coherehealth.com		74262, 75572, 75573,
 Phone: 833-283-0033, Monday – 		75574, 75635, 76380
Friday, 8 a.m. – 8 p.m., Eastern time	Electrophysiology Study	93600, 93602, 93603,
• Fax: 857-557-6787	(EPS) or EPS with 3D	93610, 93612, 93618,
Expedited/urgent cases can be submitted and monitored on the	mapping	93619, 93620, 93624,
Cohere portal at		93631, 93640, 93641,
Next.Coherehealth.com.		93642, 93644, 0577T
For questions, call Cohere: 833-283-	Magnetic resonance	70544, 70545, 70546,
0033.	angiography (MRA)	70547, 70548, 70549,
		71555, 72159, 72198,
		73225, 73725, 74185,
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		C8900, C8901, C8902,
		C8909, C8910, C8911,
		C8912, C8913, C8914,
		C8918, C8919, C8920,
		C8931, C8932, C8933,
		C8934, C8935, C8936
	Magnetic resonance	70336, 70540, 70542,
	imaging (MRI)	70543, 70551, 70552,
		70553, 70554, 70555,
		71550, 71551, 71552,
		72141, 72142, 72146,
		72147, 72148, 72149,
		72156, 72157, 72158,
		72195, 72196, 72197,
		73218, 73219, 73220,
		73221, 73222, 73223,
		73718, 73719, 73720,
		73721, 73722, 73723,
		74181, 74182, 74183,
		74712, 75557, 75559,
		75561, 75563, 77046,
		77047, 77048, 77049,
		77084, C8903, C8905,
		C8906, C8908, C9762,
		C9763, C9791
	Myocardial perfusion	78451, 78452
	imaging single photon	
	emission computed	
	tomography (MPI-SPECT)	
	Nuclear stress test	78453, 78454, 78466,
		78468, 78469, 78472,
		78473, 78481, 78483,
		93350, 93351, C8928,
		C8930
	Transthoracic	93306, 93307, 93308,
	echocardiogram (TTE)	C8923, C8924, C8929
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	Note: The Constant	
	Note: The 6 codes	
	contained in the (TTE)	
	subcategory only require a	
	preauthorization for repeat	
	requests inside of a rolling	
	12-month year.	
	Peripheral angiography	36245, 36246, 36247
	Positron emission	78429, 78430, 78431,
	tomography (PET)	78432, 78433, 78459,
	scan/National Oncology	78491, 78492, 78608,
	PET Registry (NOPR)	78609, 78811, 78812,
		78813, 78814, 78815,
		78816, G0219, G0235,
		G0252
	Prostate-specific	A9587, A9593,
	membrane antigen	A9594, A9595, A9596,
	(PSMA/PET CT)C	A9597, A9608, A9800
	Single-photon emission	78494
	computerized tomography	
	(SPECT) scan	
	Transesophageal	93312, 93313, 93314,
	echocardiogram (TEE)	93315, 93316, 93317,
		93318, 93355, C8925,
		C8926, C8927
Electric beds		E0193, E0194, E0265,
		E0266, E0296, E0297
Emerging technology/new indications		31647, 31648, 31649,
for existing technology		31651, 43284, 53865*,
		53866*, 0446T, 0447T,
		0448T, <u>0716T (Managed</u>
		by Cohere), 0745T, 0746T,
		0747T, C1735*, C1736*,
		0935T*, 0947T*, E0738,
		E0739, G0564*, G0565*
Epidural injections (outpatient only)		62320, 62321, 62322,
		62323, 64479, 64480,
		64483, 64484, 64999,
		0777T

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Esophagogastroduodenoscopy (EGD)		43235, 43237, 43238,
		43239, 43242, 43252,
		43253, 43259
Facet injections		64490, 64491, 64492,
		64493, 64494, 64495,
		64633, 64634, 64635,
		64636, 64999, 0213T,
		0214T, 0215T, 0216T,
		0217T, 0218T
Facility based along studies (DCC)	The following services will now	
Facility-based sleep studies (PSG)	be managed via Cohere. Please	95807, 95808, 95810,
	submit authorizations to	95811
	www.Next.Coherehealth.com.	
	If not registered, please use	
	www.Coherehealth.com/regist	
	<u>er</u> .	
	.	
	Preauthorization requests for services managed by Cohere	
	Requests can be submitted via:	
	Cohere Health's portal	
	(online):	
	 Information and to 	
	request a new account:	
	www.Coherehealth.co	
	<u>m/register</u>	
	 Additional provider 	
	information:	
	www.coherehealth.co	
	m/provider/resourcesPortal login	
	(preauthorization	
	request):	
	Next.Coherehealth.co	
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	• Phone: 833-283-0033,	
	Monday – Friday, 8 a.m.	
	– 8 p.m., Eastern time	
	• Fax: 857-557-6787	
	Expedited/urgent cases son be submitted and	
	can be submitted and monitored on the	
	Cohere portal at	
	Next.Coherehealth.co	
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	For questions, call	
	Cohere: 833-283-0033 .	
Foot surgeries, bunionectomy and		26535, 26536, 28110,
hammertoe		28240, 28285, 28289,
		28291, 28292, 28295,
		28296, 28297, 28298,
		28299, 28306, 28308,
		28310, 28740, 28750,
		L8641
Gastric pacing		43647, 43648, 43881,
		43882
Genicular Nerve Ablation and		64454, 64624
Genicular Nerve Blocks		
High-frequency chest compression		E0483
vests		
Home health/home infusion	All states require	99512, 99600, G0151,
	preauthorization for	G0152, G0153, G0155,
	home health. Please see	G0156, G0157, G0158,
		G0159, G0160, G0161,
	below for state-specific	G0162, G0299, G0300,
	guidance.	G0493, G0494, G0495,
	Tanga will mannaga all	G0496, G2168, G2169
	Tango will manage all	
	preauthorization requests	
	for home health services	
	for Humana Medicare	
	Advantage (MA) [HMO and	
	PPOs] members residing	
	and having a plan in one of	
	these states:	
	Arizona, Colora <u>do or</u>	
	New Mexico	
	Phone: 888-705-5274	
	Fax: 877-612-7066	

Preauthorization requests can be faxed or uploaded through the Tango website at www.tangocare.com.

Please note: Tango participation excludes patients with Humana MA private fee-for-service (PFFS) coverage.

Humana Home Solutions

manages authorizations for home health services for MA, including skilled nursing, home health aide, therapies (PT,OT,ST), wound care, behavioral health and medical social worker for some members residing in and enrolled in plans for the following states: AR, GA, ID, IN Clark, Floyd and Harrison counties only), KS, KY, MO, NC, NJ (Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Mercer and Salem counties only), OH, OK, OR, PA, SC, TX, UT, VA, WA and WV.

- Phone: **800-572- 4317**

- Fax: **502-508-0668** for non-CenterWell® agencies in GA, IN

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Hyperbaric therapy Inpatient admissions Acute hospital (includes inpatient hospice) Acute rehab facilities Long-term acute care	
Inpatient admissions Acute hospital (includes inpatient hospice) Acute rehab facilities Long-term acute care	
inpatient hospice) Acute rehab facilities Long-term acute care	
Acute rehab facilities Long-term acute care	
Long-term acute care	
Mental health and	
substance use treatment	
(including any treatment in	
a residential setting)	
Skilled nursing facilities	
Laparoscopic hiatal hernia repair 43280, 43281, 43282	

Lung biopsy and resection	Evolent (formerly New Century Health) will manage all preauthorization requests. Requests can be submitted via: Evolent's website at https://my.newcenturyhealth.com • Or call Evolent (formerly New Century Health) at 844-926-4528, option 5 for Surgical Services, to speak to a live representative, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. • eFax # 213-596-3783 or efax-carepro-oncology@newcenturyhealt h.com	32096, 32097, 32505, 32607, 32608, 32666
Micro-Invasive Glaucoma Surgery		66989, 66991, 0253T,
(MIGs)		0449T, 0450T, 0474T,
		0660T, 0661T, 0671T
Molecular diagnostic and genetic		81105, 81106, 81107,
testing		81108, 81109, 81110,
		81111, 81112, 81120,
		81121, 81161, 81162,
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83006, 83080, 0004M,
0007M, 0011M, 0012M,
0013M, 0016M, 0017M,
0018M, 0020M, 0005U,
0009U, 0017U, 0018U,
0019U, 0021U, 0022U,
0026U, 0029U, 0030U,
0031U, 0032U, 0033U,
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0036U, 0037U, 0045U,
0047U, 0048U, 0049U,
0050U, 0055U, 0060U,
0067U, 0069U, 0070U,
0071U, 0072U, 0073U,
0074U, 0075U, 0076U,
0079U, 0087U, 0088U,
0089U, 0090U, 0094U,
0101U, 0102U, 0103U,
0111U, 0118U, 0120U,
0129U, 0130U, 0131U,
0132U, 0133U, 0134U,
0135U, 0136U, 0137U,
0138U, 0153U, 0154U,
0155U, 0156U, 0157U,
0158U, 0159U, 0160U,
0161U, 0162U, 0169U,
0170U, 0171U, 0172U,
0173U, 0175U, 0177U,
0179U, 0195U, 0203U,
0205U, 0209U, 0211U,
0212U, 0213U, 0214U,
0215U, 0216U, 0217U,
0218U, 0229U, 0230U,
0231U, 0232U, 0233U,
0234U, 0235U, 0236U,
0237U, 0238U, 0239U,
0242U, 0244U, 0245U,
0250U, 0252U, 0253U,
0254U, 0258U, 0260U,
0262U, 0264U, 0265U,
0266U, 0267U, 0268U,
0269U, 0270U, 0271U,
0272U, 0273U, 0274U,
0276U, 0277U, 0278U,
0285U, 0286U, 0287U,
0288U, 0289U, 0290U,
0291U, 0292U, 0293U,

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0294U, 0296U, 0297U,
0298U, 0299U, 0300U,
0306U, 0307U, 0313U,
0314U, 0315U, 0317U,
0318U, 0319U, 0320U,
0323U, 0326U, 0327U,
0328U, 0329U, 0330U,
0331U, 0332U, 0333U,
0334U, 0335U, 0336U,
0339U, 0340U, 0341U,
0343U, 0345U, 0347U,
0348U, 0349U, 0350U,
0355U, 0356U, 0358U,
0359U, 0360U, 0362U,
0363U, 0368U, 0378U,
0379U, 0388U, 0389U,
0391U, 0392U, 0400U,
0401U, 0403U, 0405U,
0409U, 0410U, 0411U,
0413U, 0414U, 0417U,
0419U, 0420U, 0422U,
0423U, 0424U, 0425U,
0426U, 0433U, 0434U,
0437U, 0438U, 0439U,
0440U, 0444U, 0449U,
0452U, 0453U, 0454U,
0460U, 0461U, 0465U,
0466U, 0467U, 0469U,
0470U, 0471U, 0473U,
0474U, 0475U, 0476U,
0477U, 0478U, 0481U,
0485U, 0486U, 0487U,
0489U, 0493U, 0496U,
0497U, 0498U, 0499U,
0500U, 0506U, 0507U,
0508U, 0509U, 0510U,
0516U, 0523U*, 0529U*,
0530U*

Negative pressure wound therapy		97605, 97606, A6550,
(NPWT)		E2402, K0743
Neuromuscular stimulators		A4593, A4594, E0764,
		C9807*, E0770
Neurostimulators		61860, 61863, 61867,
		61885, 61886, 61889,
		61891, 61892, 64553,
		64555, 64561, 64566,
		64568, 64575, 64581,
		64590, 64596, 64597,
		64598, 0587T, 0588T,
		0720T, 0783T, 0786T,
		0787T, 0816T, 0817T,
		0818T, 0819T, 0908T*,
		0909T*, 0910T*, 0911T*,
		0912T*, C1767, C1787,
		C1826, C1827, E0721,
		E0734, E0735, E0736,
		E0737, E0743, L8683
Noninvasive home ventilators		E0466, E0468
Obesity surgeries		0813T, 43290, 43291,
		43631, 43632, 43633,
		43634, 43644, 43645,
		43770, 43771, 43772,
		43773, 43774, 43775,
		43842, 43843, 43845,
		43846, 43847, 43848,
		43886, 43887, 43888,
		C9784, C9785
Observation	Observation notification	All
	required	
Oral, orthognathic,		20910, 21010, 21050,
temporomandibular joint (TMJ)		21060, 21070, 21085,
surgeries		21100, 21110, 21116,
		21125, 21127, 21141,
		21142, 21143, 21145,
		21146, 21147, 21150,
		21151, 21154, 21155,

21159, 21160, 21188, 21195, 21196, 21198, 21199, 21196, 21198, 21199, 21196, 21198, 21199, 21206, 21208, 21210, 21215, 21240, 21242, 21243, 21244, 21247, 29800, 29804 Orthopedic surgeries: hip, knee and shoulder arthroplasty 23472, 23473, 23474, 27137, 27138, 27134, 27137, 27138, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27447, 27486, 27447, 27486, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29807, 29819, 29820, 29819, 29820, 29819, 29820, 29819, 29820, 29819, 29826, 29827, 29828, 29850, 29851, 29866, 29867, 29868, 29866, 29867, 29871, 29873, 29874, 29873, 29874, 29873, 29874, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29884, 29884, 29885, 29886, 29999, C9781, 17330 Other durable medical equipment (A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0466, E0490, E0491, E0492, E0493, E0650, E0651, E0652, E0660, E0651, E0652, E0660,		
21196, 21198, 21199, 21206, 21208, 21210, 21215, 21206, 21208, 21210, 21215, 21240, 21242, 21243, 21244, 21247, 29800, 29804 Orthopedic surgeries: hip, knee and shoulder arthroplasty 23472, 23473, 23474, 27132, 27134, 27137, 27138, 27437, 27438, 27447, 27445, 27446, 27447, 27445, 27446, 27447, 27445, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 2799, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29866, 29867, 29861, 29866, 29867, 29868, 29877, 29878, 29866, 29867, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29881, 29888, 29870, 29811, 29882, 29888, 29814, 29885, 29886, 29887, 29888, 29881, 29888, 29888, 29881, 29888, 29888, 29881, 29888, 29888, 29881, 29888, 2988		21159, 21160, 21188,
21206, 21208, 21210, 21215, 21240, 21242, 212415, 21240, 21242, 21243, 21244, 21247, 29800, 29804 Orthopedic surgeries: hip, knee and shoulder arthroplasty 23472, 23473, 23474, 27125, 27130, 27132, 27134, 27137, 27138, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 29807, 29819, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29867, 29868, 29877, 29868, 29870, 29871, 29879, 29860, 29861, 29867, 29863, 29861, 29867, 29868, 29877, 29879, 29860, 29871, 29879, 29860, 29871, 29879, 29880, 29881, 29882, 29883, 29844, 29885, 29886, 29887, 29888, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment A2238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0469, E0491, E0492, E0493, E0650,		
21215, 21240, 21242, 21243, 21244, 21247, 29800, 29804		
21243, 21244, 21247, 29800, 29804		21206, 21208, 21210,
Orthopedic surgeries: hip, knee and shoulder arthroplasty 23472, 23473, 23474, 27125, 27130, 27132, 27134, 27137, 27138, 27134, 27137, 27138, 27437, 27438, 27447, 27438, 27444, 27442, 27443, 27445, 27446, 27447, 27486, 27447, 27486, 27447, 27486, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29826, 29827, 29828, 29826, 29827, 29828, 29826, 29827, 29828, 29826, 29827, 29828		21215, 21240, 21242,
Orthopedic surgeries: hip, knee and shoulder arthroplasty 23472, 23473, 23474, 27135, 27132, 27134, 27137, 27138, 27437, 27438, 27443, 27445, 27446, 27447, 27486, 27447, 27486, 27447, 27486, 27447, 27486, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29879, 29880, 29871, 29879, 29881, 29882, 29883, 29884, 29885, 29886, 29877, 29879, 29881, 29882, 29881, 29882, 29881, 29882, 29881, 29882, 29881, 29883, 29884, 29885, 29886, 29914, 29915, 29916, 29999, C9781, 17330 Other durable medical equipment (DME) Other durable medical equipment (DME) Other durable medical equipment (DME) E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0491, E0482, E0499, E0491, E0492, E0493, E0650,		21243, 21244, 21247,
shoulder arthroplasty 27125, 27130, 27132, 27134, 27137, 27138, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29824, 29825, 29826, 29827, 29826, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29867, 29868, 29870, 29871, 29873, 29874, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29881, 29882, 29883, 29884, 2985, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) Other durable medical equipment (DME) E0277, E0301, E0302, E0302, E0303, E0481, E0482, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29800, 29804
27134, 27137, 27138, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29826, 29827, 29828, 29860, 29861, 29862, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29886, 29887, 29888, 29884, 29885, 29886, 29887, 29888, 29884, 29885, 29886, 29887, 29888, 29884, 29885, 29886, 29897, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0469, E0481, E0482, E0468, E0490, E0491, E0492, E0493, E0650,	Orthopedic surgeries: hip, knee and	23472, 23473, 23474,
27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29871, 29873, 29874, 29875, 29876, 29881, 29882, 29883, 29884, 29883, 29884, 29883, 29884, 29885, 29886, 29887, 29888, 29883, 29884, 29885, 29888, 29884, 29885, 29886, 29877, 29879, 29886, 29877, 29879, 29886, 29877, 29879, 29886, 29887, 29888, 29888, 29884, 29885, 29888, 29884, 29885, 29886, 29877, 29878,	shoulder arthroplasty	27125, 27130, 27132,
27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487, C8003* Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29882, 29883, 29884, 29885, 29886, 29867, 29886, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29877, 29888, 29889, 29914, 29915, 29916, 29999, C9781, 17330 Other durable medical equipment (DME) Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		27134, 27137, 27138,
Orthopedic surgeries: hip, knee and shoulder arthroscopy Orthopedic surgeries: hip, knee and 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29826, 29827, 29828, 29826, 29827, 29828, 29860, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29882, 29883, 29884, 29882, 29883, 29884, 29885, 29886, 29867, 29868, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29877, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) Other durable medical equipment (DME) Other durable medical equipment (DME) E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		27437, 27438, 27440,
Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) Other durable medical equipment (DME) Other durable medical equipment (DME)		27441, 27442, 27443,
Orthopedic surgeries: hip, knee and shoulder arthroscopy 23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		27445, 27446, 27447,
shoulder arthroscopy 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29863, 29866, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29885, 29886, 29887, 29888, 29888, 29884, 29885, 29886, 29887, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0466, E0490, E0491, E0492, E0493, E0650,		27486, 27487, C8003*
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29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,	shoulder arthroscopy	27599, 29805, 29806,
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29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29867, 29868, 29870,
29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29871, 29873, 29874,
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29888, 29889, 29914, 29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29882, 29883, 29884,
29915, 29916, 29999, C9781, J7330 Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29885, 29886, 29887,
Other durable medical equipment (DME) Other durable medical equipment (DME) E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29888, 29889, 29914,
Other durable medical equipment (DME) A4238, A4239, A9274, E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		29915, 29916, 29999,
(DME) E0277, E0301, E0302, E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,		C9781, J7330
E0303, E0304, E0328, E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,	Other durable medical equipment	A4238, A4239, A9274,
E0469, E0481, E0482, E0486, E0490, E0491, E0492, E0493, E0650,	(DME)	E0277, E0301, E0302,
E0486, E0490, E0491, E0492, E0493, E0650,		E0303, E0304, E0328,
E0492, E0493, E0650,		E0469, E0481, E0482,
		E0486, E0490, E0491,
E0651, E0652, E0660,		E0492, E0493, E0650,
		E0651, E0652, E0660,

E0665, E0666, E0667,
E0668, E0669, E0670,
E0671, E0672, E0673,
E0675, E0676, E0677,
E0678, E0679, E0680,
E0681, E0682, E0683,
E0691, E0692, E0693,
E0694, E0762, E0766,
E0784, E2102, E2103,
E2500, E2502, E2504,
E2506, E2508, E2510,
E2511, E2599, E3000,
K0900, K1007, K1027,
L0452, L0456, L0457,
L0458, L0460, L0462,
L0464, L0480, L0482,
L0484, L0486, L0488,
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		E0782, E0783, E0785,
		E0786
Penile implant		54405
Percutaneous lumbar intravertebral		0627T, 0628T, 0629T,
disc injection		0630T
Peripheral revascularization		0234T, 0235T, 0236T,
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(autorestating, angreptating)		37221, 37224, 37225,
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Q4338, Q4339, Q4340,	
Q4341, Q4342, Q4343,	
Q4344, Q4345, Q4346*,	
Q4347*, Q4348*, Q4349*,	Q4347*, Q4348*, Q4349*,

	Q4350*, Q4351*, Q4352*, Q4353*
	**For codes Q4116, Q4122 and Q4128, no
	preauthorization is
	required for breast
	reconstruction following
	medically necessary
	mastectomies for breast
	cancer.
Spinal cord stimulators	0784T, 0785T, 63650,
	63655, 63663, 63664,
	63685, 63688, 64999,
	C1816, C1820, C1822,
	L8679, L8682
Spinal fusion, decompression,	20999, 22100, 22101,
kyphoplasty and vertebroplasty	22102, 22103, 22116,
	22510, 22511, 22512,
	22513, 22514, 22515,
	22526, 22527, 22532,
	22533, 22534, 22548,
	22551, 22552, 22554,
	22556, 22558, 22585,
	22586, 22590, 22595,
	22600, 22610, 22612,
	22614, 22630, 22632,
	22633, 22634, 22800,
	22802, 22804, 22808,
	22810, 22812, 22818,
	22819, 22830, 22836,
	22837, 22838, 22840,
	22841, 22842, 22843,
	22844, 22845, 22846,
	22847, 22848, 22849,
	22853, 22854, 22856,
	22857, 22858, 22859,
	22860, 22861, 22862,

20007 20000 20000
22867, 22868, 22869,
22870, 22899, 27278,
27279, 27280, 62287,
62380, 63001, 63003,
63005, 63011, 63012,
63015, 63016, 63017,
63020, 63030, 63035,
63040, 63042, 63043,
63044, 63045, 63046,
63047, 63048, 63050,
63051, 63052, 63053,
63055, 63056, 63057,
63064, 63066, 63075,
63076, 63077, 63078,
63081, 63082, 63085,
63086, 63087, 63088,
63090, 63091, 63101,
63102, 63103, 63170,
63172, 63173, 63185,
63190, 63191, 63197,
63200, 63250, 63251,
63252, 63265, 63266,
63267, 63268, 63270,
63271, 63272, 63273,
63275, 63276, 63277,
63278, 63280, 63281,
63282, 63283, 63285,
63286, 63287, 63290,
63295, 63300, 63301,
63302, 63303, 63304,
63305, 63306, 63307,
63308, 64628, 64629,
0095T, 0098T, 0164T,
0165T, 0202T, 0219T,
0220T, 0221T, 0222T,
0274T, 0275T, 0656T,
0657T, 0719T, 0790T,
C1821, C2614, C9757

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	I	
Surgery for obstructive sleep apnea		21685, 33276, 33277,
		33278, 33279, 33280,
		33281, 33287, 33288,
		41512, 41530, 41599,
		42140, 42145, 42299,
		42950, 64582, 93150,
		93151, 93152, 93153,
		C9727
Surgical nasal/sinus endoscopic	Excludes diagnostic	31237, 31240, 31242*,
procedures and balloon sinus ostial	nasal/sinus endoscopies	31243*, 31253, 31254,
dilation		31255, 31256, 31257,
		31259, 31267, 31276,
		31287, 31288, 31295,
		31296, 31297, 31298,
		69705, 69706
Therapy (physical and occupational)		97010, 97012, 97014,
		97016, 97018, 97022,
		97024, 97026, 97028,
		97032, 97033, 97034,
		97035, 97036, 97037,
		97039, 97110, 97112,
		97113, 97116, 97124,
		97129, 97130, 97139,
		97140, 97150, 97164,
		97168, 97530, 97533,
		97535, 97537, 97542,
		97545, 97546, 97550,
		97551, 97552, 97750,
		97755, 97760, 97761,
		97763, 97799, G0281*,
		G0283
Thyroid surgeries (thyroidectomy and	Evolent (formerly New Century	00200
lobectomy)	Health) will manage all	
tobootomy)	preauthorization requests.	60210, 60212, 60220,
	Requests can be submitted via:	60225, 60240, 60252,
	Evolent's website at https://my.newcenturyhealth.co	60254, 60260, 60270,
	m	60271
	Or call Evolent (formerly	
	New Century Health) at 844 -	
•	33	

	926-4528, option 5 for Surgical Services, to speak to a live representative, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. • eFax # 213-596-3783 or efax-carepro- oncology@newcenturyhealt h.com	
Transplant surgeries		32850, 32851, 32852, 32853, 32854, 33927, 33928, 33929, 33935, 33945, 38205, 38206, 38230, 38232, 38240, 38241, 38243, 44135, 47133, 47135, 48160, 48550, 48554, 48556, 50300, 50320, 50340, 50360, 50365, 50370, 50547, 0584T, 0585T, 0586T, 0668T, 0669T, 0670T, G0341, G0342, G0343, L8698, 02WA3QZ, 02WA4QZ
Varicose vein: surgical treatment and sclerotherapy		36465, 36466, 36468, 36470, 36471, 36473,, 36474, 36475, 36476, 36478, 36479, 36482, 36483, 37700, 37718, 37722, 37735, 37760, 37761, 37765, 37766, 37780, 37785, 0524T
Ventricular assist devices (VADs)	Percutaneous ventricular assist devices (VADs) Ventricular assist devices (VADs)	33990, 33991, 33995 33975, 33976, 33979, 33981, 33982, 33983
Wheelchairs/scooters		E0986, E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009,

E1010, E1012, E1161, E1220, E1234, E1235, E1239, E2207, E2298, E2310, E2311, E2312, E2321, E2322, E2325, E2321, E2322, E2325, E2327, E2328, E2329, E2330, E2331, E2343, E2351, E2358, E2359, E2360, E2362, E2364, E2366, E2362, E2364, E2366, E2362, E2364, E2366, E2362, E2364, E2366, E2366, E2369, E2375, E2376, E2383, E2398, K0005, K0008, K0009, K0013, K0669, K0800, K0801, K0802, K0806, K0807, K0808, K0812, K0813, K0814, K0815, K0816, K0820, K0821, K0822, K0823, K0824, K0825, K0826, K0827, K0828, K0829, K0830, K0831, K0835, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0841, K0855, K0850, K0851, K0855, K0856, K0857, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0860, K0861, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0890, K0891, K0898, K0890, K0891, K0898, K0890, K0891, K0898, K0899, K0800, K0891, K0		
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