

PROVIDERALERT



To: AmeriHealth Caritas Louisiana Providers

Date: January 16, 2024

Subject: Prior Authorization Service List

Summary: Updates to Prior Authorization Service List

AmeriHealth Caritas Louisiana would like to make you aware of changes to the [Prior Authorization Service List](#) that have been approved by the Louisiana Department of Health, in accordance with La. R.S. 46:460.54, effective for dates of service 2/15/2024 and after.

Questions:

Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana's Provider Services department at 1-888-922-0007 or your [Provider Network Management Account Executive](#).

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PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	AUTHORIZATION RULES
0364U	Oncology (hematolymphoid neoplasm), genomic sequence analysis using multiplex (PCR) and next-generation sequencing with algorithm, quantification of dominant clonal sequence(s), reported as presence or absence of minimal residual disease (MRD) with quanti	Prior Authorization Required
0365U	Oncology (bladder), analysis of 10 protein biomarkers (A1AT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of bladder cancer	Prior Authorization Required
0366U	Oncology (bladder), analysis of 10 protein biomarkers (A1AT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of recurrent bladder cancer	Prior Authorization Required
0367U	Oncology (bladder), analysis of 10 protein biomarkers (A1AT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, diagnostic algorithm reported as a risk score for probability of rapid recurrence of recurrent or persistent cancer	Prior Authorization Required
0368U	Oncology (colorectal cancer), evaluation for mutations of APC, BRAF, CTNNB1, KRAS, NRAS, PIK3CA, SMAD4, and TP53, and methylation markers (MYO1G, KCNQ5, C9ORF50, FLI1, CLIP4, ZNF132 and TWIST1), multiplex quantitative polymerase chain reaction (qPCR), cir	Prior Authorization Required
0369U	Infectious agent detection by nucleic acid (DNA and RNA), gastrointestinal pathogens, 31 bacterial, viral, and parasitic organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique	Prior Authorization Required
0370U	Infectious agent detection by nucleic acid (DNA and RNA), surgical wound pathogens, 34 microorganisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, wound swab	Prior Authorization Required
0371U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogen, semiquantitative identification, DNA from 16 bacterial organisms and 1 fungal organism, multiplex amplified probe technique via quantitative polymerase chain reaction (qPCR),	Prior Authorization Required
0372U	Infectious disease (genitourinary pathogens), antibiotic-resistance gene detection, multiplex amplified probe technique, urine, reported as an antimicrobial stewardship risk score	Prior Authorization Required

0373U	Infectious agent detection by nucleic acid (DNA and RNA), respiratory tract infection, 17 bacteria, 8 fungus, 13 virus, and 16 antibiotic-resistance genes, multiplex amplified probe technique, upper or lower respiratory specimen	Prior Authorization Required
0374U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 21 bacterial and fungal organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, urine	Prior Authorization Required
0375U	Oncology (ovarian), biochemical assays of 7 proteins (follicle stimulating hormone, human epididymis protein 4, apolipoprotein A-1, transferrin, beta-2 macroglobulin, prealbumin [ie, transthyretin], and cancer antigen 125), algorithm reported as ovarian c	Prior Authorization Required
0376U	Oncology (prostate cancer), image analysis of at least 128 histologic features and clinical factors, prognostic algorithm determining the risk of distant metastases, and prostate cancer-specific mortality, includes predictive algorithm to androgen depriva	Prior Authorization Required
0377U	Cardiovascular disease, quantification of advanced serum or plasma lipoprotein profile, by nuclear magnetic resonance (NMR) spectrometry with report of a lipoprotein profile (including 23 variables)	Prior Authorization Required
0378U	RFC1 (replication factor C subunit 1), repeat expansion variant analysis by traditional and repeat-primed PCR, blood, saliva, or buccal swab	Prior Authorization Required
0379U	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA (523 genes) and RNA (55 genes) by next-generation sequencing, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tu	Prior Authorization Required
0380U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis, 20 gene variants and CYP2D6 deletion or duplication analysis with reported genotype and phenotype	Prior Authorization Required
0384U	Nephrology (chronic kidney disease), carboxymethyllysine, methylglyoxal hydroimidazolone, and carboxyethyl lysine by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and HbA1c and estimated glomerular filtration rate (GFR), with risk score r	Prior Authorization Required

0385U	Nephrology (chronic kidney disease), apolipoprotein A4 (ApoA4), CD5 antigen-like (CD5L), and insulin-like growth factor binding protein 3 (IGFBP3) by enzyme-linked immunoassay (ELISA), plasma, algorithm combining results with HDL, estimated glomerular fil	Prior Authorization Required
0386U	Gastroenterology (Barrett's esophagus), P16, RUNX3, HPP1, and FBN1 methylation analysis, prognostic and predictive algorithm reported as a risk score for progression to high-grade dysplasia or esophageal cancer	Prior Authorization Required
A2019	Kerecis Omega3 MariGen Shield, per sq cm	Prior Authorization Required
A2020	AC5 Advanced Wound System (AC5)	Prior Authorization Required
A2021	NeoMatriX, per sq cm	Prior Authorization Required
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each	Prior authorization required for billed chargers greater than or equal to \$750.00
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each	Prior authorization required for billed chargers greater than or equal to \$750.00
A4560	Neuromuscular electrical stimulator (NMES), disposable, replacement only	Prior authorization required for billed chargers greater than or equal to \$750.00
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month	Prior authorization required for billed chargers greater than or equal to \$750.00
A6591	External urinary catheter; non-disposable, for use with suction pump, per month	Prior authorization required for billed chargers greater than or equal to \$750.00
A7049	Expiratory positive airway pressure intranasal resistance valve	Prior authorization required for billed chargers greater than or equal to \$750.00
C9145	Injection, aprepitant, (Aponvie), 1 mg	Prior Authorization Required
C9146	Injection, mirvetuximab soravtansine-gynx, 1 mg	Prior Authorization Required
C9147	Injection, tremelimumab-actl, 1 mg	Prior Authorization Required
C9148	Injection, teclistamab-cqyv, 0.5 mg	Prior Authorization Required
C9149	Injection, teplizumab-mzwv, 5 mcg	Prior Authorization Required
E0677	Nonpneumatic sequential compression garment, trunk	Prior authorization required for billed

		chargers greater than or equal to \$750.00
E1905	Virtual reality cognitive behavioral therapy device (CBT), including preprogrammed therapy software	Prior authorization required for billed chargers greater than or equal to \$750.00
J0208	Injection, sodium thiosulfate, 100 mg	Prior Authorization Required
J0218	Injection, olipudase alfa-rpcp, 1 mg	Prior Authorization Required
J0612	Injection, calcium gluconate (Fresenius Kabi), per 10 mg	Prior Authorization Required
J0613	Injection, calcium gluconate (WG Critical Care), per 10 mg	Prior Authorization Required
J1411	Injection, etranacogene dezaparvovec-drlb, per therapeutic dose	Prior Authorization Required
J1449	Injection, eflapegrastim-xnst, 0.1 mg	Prior Authorization Required
J1747	Injection, spesolimab-sbzo, 1 mg	Prior Authorization Required
J2403	Chloroprocaine HCl ophthalmic, 3% gel, 1 mg	Prior Authorization Required
J9196	Injection, gemcitabine hydrochloride (Accord), not therapeutically equivalent to J9201, 200 mg	Prior Authorization Required
J9294	Injection, pemetrexed (Hospira), not therapeutically equivalent to J9305, 10 mg	Prior Authorization Required
J9296	Injection, pemetrexed (Accord), not therapeutically equivalent to J9305, 10 mg	Prior Authorization Required
J9297	Injection, pemetrexed (Sandoz), not therapeutically equivalent to J9305, 10 mg	Prior Authorization Required
K1035	Molecular diagnostic test reader, nonprescription self-administered and self-collected use, FDA approved, authorized or cleared	Prior authorization required for billed chargers greater than or equal to \$750.00
L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month	Prior authorization required for billed chargers greater than or equal to \$750.00
Q4265	NeoStim TL, per sq cm	Prior Authorization Required
Q4266	NeoStim Membrane, per sq cm	Prior Authorization Required
Q4267	NeoStim DL, per sq cm	Prior Authorization Required
Q4268	SurGraft FT, per sq cm	Prior Authorization Required
Q4269	SurGraft XT, per sq cm	Prior Authorization Required
Q4270	Complete SL, per sq cm	Prior Authorization Required
Q4271	Complete FT, per sq cm	Prior Authorization Required

Q5127	Injection, pegfilgrastim-fpgk (Stimufend), biosimilar, 0.5 mg	Prior Authorization Required
Q5128	Injection, ranibizumab-eqrn (Cimerli), biosimilar, 0.1 mg	Prior Authorization Required
Q5129	Injection, bevacizumab-adcd (Vegzelma), biosimilar, 10 mg	Prior Authorization Required
Q5130	Injection, pegfilgrastim-pbbk (Fylnetra), biosimilar, 0.5 mg	Prior Authorization Required
S9563	Home injectable therapy, immunotherapy, including administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	Prior Authorization Required
0387U	Oncology (melanoma), autophagy and beclin 1 regulator 1 (AMBRA1) and loricrin (AMLo) by immunohistochemistry, formalin-fixed paraffin-embedded (FFPE) tissue, report for risk of progression	Prior Authorization Required
0388U	Oncology (non-small cell lung cancer), next-generation sequencing with identification of single nucleotide variants, copy number variants, insertions and deletions, and structural variants in 37 cancer-related genes, plasma, with report for alteration det	Prior Authorization Required
0389U	Pediatric febrile illness (Kawasaki disease [KD]), interferon alpha-inducible protein 27 (IFI27) and mast cell-expressed membrane protein 1 (MCEMP1), RNA, using reverse transcription polymerase chain reaction (RT-qPCR), blood, reported as a risk score for	Prior Authorization Required
0391U	Oncology (solid tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded (FFPE) tissue, 437 genes, interpretive report for single nucleotide variants, splice-site variants, insertions/deletions, copy number alterations	Prior Authorization Required
0392U	Drug metabolism (depression, anxiety, attention deficit hyperactivity disorder [ADHD]), gene-drug interactions, variant analysis of 16 genes, including deletion/duplication analysis of CYP2D6, reported as impact of gene-drug interaction for each drug	Prior Authorization Required
0393U	Neurology (eg, Parkinson disease, dementia with Lewy bodies), cerebrospinal fluid (CSF), detection of misfolded a-synuclein protein by seed amplification assay, qualitative	Prior Authorization Required
0394U	Perfluoroalkyl substances (PFAS) (eg, perfluorooctanoic acid, perfluorooctane sulfonic acid), 16 PFAS compounds by liquid chromatography with tandem mass spectrometry (LC-MS/MS), plasma or serum, quantitative	Prior Authorization Required

0395U	Oncology (lung), multi-omics (microbial DNA by shotgun next-generation sequencing and carcinoembryonic antigen and osteopontin by immunoassay), plasma, algorithm reported as malignancy risk for lung nodules in early-stage disease	Prior Authorization Required
0396U	Obstetrics (pre-implantation genetic testing), evaluation of 300000 DNA single-nucleotide polymorphisms (SNPs) by microarray, embryonic tissue, algorithm reported as a probability for single-gene germline conditions	Prior Authorization Required
0397U	Oncology (non-small cell lung cancer), cell-free DNA from plasma, targeted sequence analysis of at least 109 genes, including sequence variants, substitutions, insertions, deletions, select rearrangements, and copy number variations	Prior Authorization Required
0398U	Gastroenterology (Barrett esophagus), P16, RUNX3, HPP1, and FBN1 DNA methylation analysis using PCR, formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as risk score for progression to high-grade dysplasia or cancer	Prior Authorization Required
0399U	Neurology (cerebral folate deficiency), serum, detection of anti-human folate receptor IgG-binding antibody and blocking autoantibodies by enzyme-linked immunoassay (ELISA), qualitative, and blocking autoantibodies, using a functional blocking assay for I	Prior Authorization Required
0400U	Obstetrics (expanded carrier screening), 145 genes by nextgeneration sequencing, fragment analysis and multiplex ligationdependent probe amplification, DNA, reported as carrier positive or negative	Prior Authorization Required
0401U	Cardiology (coronary heart disease [CAD]), 9 genes (12 variants), targeted variant genotyping, blood, saliva, or buccal swab, algorithm reported as a genetic risk score for a coronary event	Prior Authorization Required
0792T	Application of silver diamine fluoride 38%, by a physician or other qualified health care professional	Prior Authorization Required
0793T	Percutaneous transcatheter thermal ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	Prior Authorization Required
0794T	Patient-specific, assistive, rules-based algorithm for ranking pharmaco-oncologic treatment options based on the patient's tumor-specific cancer marker information obtained from prior molecular pathology, immunohistochemical, or other pathology results wh	Prior Authorization Required
0795T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or program	Prior Authorization Required

0796T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or program	Prior Authorization Required
0797T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or program	Prior Authorization Required
0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantifica	Prior Authorization Required
0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including da	Prior Authorization Required
0810T	Subretinal injection of a pharmacologic agent, including vitrectomy and 1 or more retinotomies	Prior Authorization Required
C9150	Xenon Xe-129 hyperpolarized gas, diagnostic, per study dose	Prior Authorization Required
C9151	Injection, pegcetacoplan, 1 mg	Prior Authorization Required
C9784	Gastric restrictive procedure, endoscopic sleeve gastropasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	Prior Authorization Required
J0206	Injection, allopurinol sodium, 1 mg	Prior Authorization Required
J1440	Fecal microbiota, live - jslm, 1 ml	Prior Authorization Required
J1941	Injection, furosemide (Furoscix), 20 mg	Prior Authorization Required
J2329	Injection, ublituximab-xiiy, 1mg	Prior Authorization Required
J2561	Injection, phenobarbital sodium (Sezaby), 1 mg	Prior Authorization Required
J2598	Injection, vasopressin, 1 unit	Prior Authorization Required
J2599	Injection, vasopressin (American Regent) not therapeutically equivalent to J2598, 1 unit	Prior Authorization Required
J7213	Injection, coagulation factor IX (recombinant), Ixinity, 1 IU	Prior Authorization Required
J9029	Injection, nadofaragene firadenovec-vncg, per therapeutic dose	Prior Authorization Required

J9056	Injection, bendamustine HCl (Vivimusta), 1 mg	Prior Authorization Required
J9058	Injection, bendamustine HCl (Apotex), 1 mg	Prior Authorization Required
J9059	Injection, bendamustine HCl (Baxter), 1 mg	Prior Authorization Required
J9063	Injection, mirvetuximab soravtansine-gynx, 1 mg	Prior Authorization Required
J9259	Injection, paclitaxel protein-bound particles (American Regent) not therapeutically equivalent to J9264, 1 mg	Prior Authorization Required
J9322	Injection, pemetrexed (BluePoint) not therapeutically equivalent to J9305, 10 mg	Prior Authorization Required
J9323	Injection, pemetrexed (Hospira) not therapeutically equivalent to J9305, 10 mg	Prior Authorization Required
J9347	Injection, tremelimumab-actl, 1 mg	Prior Authorization Required
J9350	Injection, mosunetuzumab-axgb, 1 mg	Prior Authorization Required
J9380	Injection, teclistamab-cqyv, 0.5 mg	Prior Authorization Required
J9381	Injection, teplizumab-mzww, 5 mcg	Prior Authorization Required
Q4272	Esano A, per sq cm	Prior Authorization Required
Q4273	Esano AAA, per sq cm	Prior Authorization Required
Q4274	Esano AC, per sq cm	Prior Authorization Required
Q4275	Esano ACA, per sq cm	Prior Authorization Required
Q4276	ORION, per sq cm	Prior Authorization Required
Q4277	WoundPlus membrane or E-Graft, per sq cm	Prior Authorization Required
Q4278	EPIEFFECT, per sq cm	Prior Authorization Required
Q4280	Xcell Amnio Matrix, per sq cm	Prior Authorization Required
Q4281	Barrera SL or Barrera DL, per sq cm	Prior Authorization Required
Q4282	Cygnus Dual, per sq cm	Prior Authorization Required
Q4283	Biovance Tri-Layer or Biovance 3L, per sq cm	Prior Authorization Required
Q4284	DermaBind SL, per sq cm	Prior Authorization Required
Q5131	Injection, adalimumab-aacf (Idacio), biosimilar, 20 mg	Prior Authorization Required
C9152	Injection, aripiprazole, (Abilify Asimtufii), 1 mg	Prior Authorization Required
C9153	Injection, amisulpride, 1 mg	Prior Authorization Required

C9154	Injection, buprenorphine extended-release (Brixadi), 1 mg	Prior Authorization Required
C9155	Injection, epcoritamab-bysp, 0.16 mg	Prior Authorization Required
C9157	Injection, tofersen, 1 mg	Prior Authorization Required
C9158	Injection, risperidone, (Uzedy), 1 mg	Prior Authorization Required
J0174	Injection, lecanemab-irmb, 1 mg	Prior Authorization Required
J0349	Injection, rezafungin, 1 mg	Prior Authorization Required
J0801	Injection, corticotropin (Acthar Gel), up to 40 units	Prior Authorization Required
J0802	Injection, corticotropin (ANI), up to 40 units	Prior Authorization Required
J0874	Injection, daptomycin (Baxter), not therapeutically equivalent to J0878, 1 mg	Prior Authorization Required
J0889	Daprodustat, oral, 1 mg, (for ESRD on dialysis)	Prior Authorization Required
J2781	Injection, pegcetacoplan, intravitreal, 1 mg	Prior Authorization Required
J7214	Injection, Factor VIII/von Willebrand factor complex, recombinant (Altuviiiio), per Factor VIII IU	Prior Authorization Required
J7353	Anacaulase-bcdb, 8.8% gel, 1 gm	Prior Authorization Required
J9051	Injection, bortezomib (MAIA), not therapeutically equivalent to J9041, 0.1 mg	Prior Authorization Required
J9064	Injection, cabazitaxel (Sandoz), not therapeutically equivalent to J9043, 1 mg	Prior Authorization Required
J9345	Injection, retifanlimab-dlwr, 1 mg	Prior Authorization Required
0019M	Cardiovascular disease, plasma, analysis of protein biomarkers by aptamer-based microarray and algorithm reported as 4-year likelihood of coronary event in high-risk populations	Prior Authorization Required
0403U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch post-digital rectal examination urine (or processed first-catch urine), algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer	Prior Authorization Required
0404U	Oncology (breast), semiquantitative measurement of thymidine kinase activity by immunoassay, serum, results reported as risk of disease progression	Prior Authorization Required
0405U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected	Prior Authorization Required
0406U	Oncology (lung), flow cytometry, sputum, 5 markers (meso-tetra [4-carboxyphenyl] porphyrin [TCPP], CD206, CD66b, CD3, CD19), algorithm reported as likelihood of lung cancer	Prior Authorization Required

0407U	Nephrology (diabetic chronic kidney disease [CKD]), multiplex electrochemiluminescent immunoassay (ECLIA) of soluble tumor necrosis factor receptor 1 (sTNFR1), soluble tumor necrosis receptor 2 (sTNFR2), and kidney injury molecule 1 (KIM-1) combined with	Prior Authorization Required
0409U	Oncology (solid tumor), DNA (80 genes) and RNA (36 genes), by next-generation sequencing from plasma, including single nucleotide variants, insertions/deletions, copy number alterations, microsatellite instability, and fusions, report showing identified m	Prior Authorization Required
0410U	Oncology (pancreatic), DNA, whole genome sequencing with 5-hydroxymethylcytosine enrichment, whole blood or plasma, algorithm reported as cancer detected or not detected	Prior Authorization Required
0411U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication analysis of CYP2D6	Prior Authorization Required
0412U	Beta amyloid, AB42/40 ratio, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and qualitative ApoE isoform-specific proteotyping, plasma combined with age, algorithm reported as presence or absence of	Prior Authorization Required
0413U	Oncology (hematolymphoid neoplasm), optical genome mapping for copy number alterations, aneuploidy, and balanced/complex structural rearrangements, DNA from blood or bone marrow, report of clinically significant alterations	Prior Authorization Required
0414U	Oncology (lung), augmentative algorithmic analysis of digitized whole slide imaging for 8 genes (ALK, BRAF, EGFR, ERBB2, MET, NTRK1-3, RET, ROS1), and KRAS G12C and PD-L1, if performed, formalin-fixed paraffin-embedded (FFPE) tissue, reported as positive	Prior Authorization Required
0415U	Cardiovascular disease (acute coronary syndrome [ACS]), IL-16, FAS, FASLigand, HGF, CTACK, EOTAXIN, and MCP-3 by immunoassay combined with age, sex, family history, and personal history of diabetes, blood, algorithm reported as a 5-year (deleted risk) sco	Prior Authorization Required
0416U	Infectious agent detection by nucleic acid (DNA), genitourinary pathogens, identification of 20 bacterial and fungal organisms, including identification of 20 associated antibiotic-resistance genes, if performed, multiplex amplified probe technique, urine	Prior Authorization Required

0417U	Rare diseases (constitutional/heritable disorders), whole mitochondrial genome sequence with heteroplasmy detection and deletion analysis, nuclear-encoded mitochondrial gene analysis of 335 nuclear genes, including sequence changes, deletions, insertions,	Prior Authorization Required
0418U	Oncology (breast), augmentative algorithmic analysis of digitized whole slide imaging of 8 histologic and immunohistochemical features, reported as a recurrence score	Prior Authorization Required
0419U	Neuropsychiatry (eg, depression, anxiety), genomic sequence analysis panel, variant analysis of 13 genes, saliva or buccal swab, report of each gene phenotype	Prior Authorization Required
A2022	InnovaBurn or InnovaMatrix XL, per sq cm	Prior Authorization Required
A2023	InnovaMatrix PD, 1 mg	Prior Authorization Required
A2024	Resolve Matrix, per sq cm	Prior Authorization Required
A2025	Miro3D, per cu cm	Prior Authorization Required
A9268	Programmer for transient, orally ingested capsule	Prior Authorization Required
A9269	Programmable, transient, orally ingested capsule, for use with external programmer, per month	Prior Authorization Required
B4148	Enteral feeding supply kit; elastomeric control fed, per day, includes but not limited to feeding/flushing syringe, administration set tubing, dressings, tape	Prior authorization required for billed chargers greater than or equal to \$750.00
C9789	Instillation of antineoplastic pharmacologic/biologic agent into renal pelvis, any method, including all imaging guidance, including volumetric measurement if performed	Prior Authorization Required
C9790	Histotripsy (i.e., nonthermal ablation via acoustic energy delivery) of malignant renal tissue, including image guidance	Prior Authorization Required
C9792	Blinded or nonblinded procedure for symptomatic New York Heart Association (NYHA) Class II, III, IVA heart failure; transcatheter implantation of left atrial to coronary sinus shunt using jugular vein access, including all imaging necessary to intra proce	Prior Authorization Required
E0490	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by hardware remote	Prior Authorization Required
E0491	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by hardware remote, 90-day supply	Prior Authorization Required
H2040	Coordinated specialty care, team-based, for first episode psychosis, per month	Prior Authorization Required

H2041	Coordinated specialty care, team-based, for first episode psychosis, per encounter	Prior Authorization Required
K1036	Supplies and accessories (e.g., transducer) for low frequency ultrasonic diathermy treatment device, per month	Prior Authorization Required
L1681	Hip orthosis (HO), bilateral hip joints and thigh cuffs, adjustable flexion, extension, abduction control of hip joint, postoperative hip abduction type, prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a s	Prior Authorization Required
L5991	Addition to lower extremity prostheses, osseointegrated external prosthetic connector	Prior Authorization Required
Q4285	NuDYN DL or NuDYN DL MESH, per sq cm	Prior Authorization Required
Q4286	NuDYN SL or NuDYN SLW, per sq cm	Prior Authorization Required
V2526	Contact lens, hydrophilic, with blue-violet filter, per lens	Prior Authorization Required