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PA Category	Name	Code(s)	Additional Notes	
CHEMICAL DEPENDENCY	Chemical Dependency/Substance Abuse* (MA Only)	90849	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		90853	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		90865	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		90870	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		90899	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96150	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96151	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96152	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96153	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96154	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
		96155	ICD10 Mental, Behavioral and Neurodevelopmental disorders grouping, toxic effect of alcohol grouping.	
CLINICAL TRIALS	Clinical Trials	Not specific to codes, must be indicated on submitted request. May have 8 digit trial ID, or primary or secondary Dx of Z00.6		
DME	Bone growth stimulators	E0747		
		E0748		
		E0760		
	Chest compression devices	E0483		
		C-Pap*	E0561	
			E0562	
	E0601			
	Bi-Pap*	E0470		
		E0471		
		E0472		
	Enteral/Parenteral Feedings* For individuals 21 and over	B4100		
		B4102		
		B4103		
		B4149		
B4150				
B4152				
B4153				

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DME	Enteral/Parenteral Feedings* For individuals 21 and over	B4154			
		B4155			
		B4157			
		B4158			
		B4159			
		B4160			
		B4161			
		B4162			
		B4164			
		B4168			
		B4172			
		B4176			
		B4178			
		B4180			
		B4185			
		B4189			
		B4193			
		B4197			
		B4199			
		B4216			
		B4220			
		B4222			
		B4224			
		B5000			
		B5100			
		B9000			
		B9002			
		B9004			
		B9006			
		B9998			
		B9999			
			Hospital beds & accessories*	E0193	
				E0194	
				E0250	
				E0251	
				E0255	
E0256					
E0260					
E0261					
E0266					

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DME	Hospital beds & accessories*	E0277	
		E0290	
		E0291	
		E0292	
		E0293	
		E0294	
		E0295	
		E0296	
		E0297	
		E0300	
		E0301	
		E0302	
		E0303	
		E0304	
		E0316	
		E0328	
		E0329	
	E0371		
	E0372		
	E0373		
	Oxygen*	E1390	
		E1391	
		E1392	
		E0441	
		E0442	
		E0443	
		E0444	
	E0445		
	Ventilators*	A4611	
		A4612	
		A4613	
		E0465	
		E0466	
	Wheelchair/Scooters*	E1029	
		E1030	
		E1031	
		E1060	
		E1070	
		E1229	
		E1230	
		E1231	
		E1232	

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PA Category	Name	Code(s)	Additional Notes
DME	Wheelchair/Scooters*	E1233	
		E1234	
		E1235	
		E1236	
		E1237	
		E1238	
		E1239	
		K0001	
		K0002	
		K0003	
		K0004	
		K0005	
		K0006	
		K0007	
		K0009	
		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			

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PA Category	Name	Code(s)	Additional Notes
DME	Wheelchair/Scooters*	K0839	
		K0840	
		K0841	
		K0842	
		K0843	
		K0848	
		K0849	
		K0850	
		K0851	
		K0852	
		K0853	
		K0854	
		K0855	
		K0856	
		K0857	
		K0858	
		K0859	
		K0860	
		K0861	
		K0862	
		K0863	
		K0890	
		K0891	
K0898			
DME	Wound Vac	A6550	
		E2402	
	All DME > \$500 allowed amount per line item or > \$1000 total allowed amount. For specific codes refer to the plans fee schedule.		
GENETIC TESTING/COUNSELING	Genetic counseling not related to pregnancy* (pregnancy indicated by Dx)	81201	
		81202	
		81203	
		81206	
		81207	
		81208	
		81209	
		81210	
		81211	
		81212	
		81213	
		81214	
		81215	

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PA Category	Name	Code(s)	Additional Notes
GENETIC TESTING/COUNSELING	63012	81216	
		81217	
		81224	
		81225	
		81226	
		81227	
		81228	
		81229	
		81235	
		81240	
		81241	
		81245	
		81246	
		81256	
		81261	
		81262	
		81263	
		81264	
		81267	
		81268	
		81270	
		81275	
		81288	
		81291	
		81292	
		81293	
		81294	
		81295	
		81296	
		81297	
81298			
81299			
81300			
81301			
81310			
81313			
81315			

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GENETIC TESTING/COUNSELING	Genetic counseling not related to pregnancy* (pregnancy indicated by Dx)	81316	
		81317	
		81318	
		81319	
		81321	
		81322	
		81323	
		81326	
		81327	
		81332	
		81340	
		81341	
		81342	
		81355	
		81370	
		81371	
		81372	
		81373	
		81374	
		81375	
		81376	
		81377	
		81378	
		81379	
		81380	
		81381	
		81382	
		81383	
		81402	
		81403	
		81404	
		81405	
		81406	
		81407	
		81408	
		81410	
		81411	
		81413	
81414			
81415			
81416			
81417			

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GENETIC TESTING/COUNSELING	Genetic counseling not related to pregnancy* (pregnancy indicated by Dx)	81420	
		81422	
		81425	
		81426	
		81427	
		81430	
		81431	
		81435	
		81436	
		81439	
		81440	
		81445	
		81450	
		81455	
		81460	
		81465	
		81470	
		81471	
		81479	
		88240	
		88241	
		88245	
		88248	
		88249	
		88261	
		88262	
		88263	
		88264	
		88271	
		88272	
		88273	
		88274	
		88275	
		88280	
		88283	
		88285	
88289			
88291			
88299			
96040			
G9143			
S3620			

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INJECTABLE DRUGS	Abatacept (Orencia)	J0129	
	Adalimumab (Humira)	J0135	
	Ado-trastuzumab Emtansine (Kadcyla)	J9354	
	Alemtuzumab (Lemtrada)	J0202	
	Ziv-Afibercept (Zaltrap)	J9400	
	Aripiprazole Lauroxil (Aristada) - (WAH only)	J0400	
	Aripiprazole Lauroxil (Aristada) - (WAH only)	J0401	
	Belimumab (Benlysta)	J0490	
	Botulinum Toxin (Botox/Myobloc/Dysport/Xeomin)	J0585	
		J0586	
		J0587	
		J0588	
	Brentuximab (Adcetris)	J9042	
	Canakinumab (Ilaris)	J0638	
	Cetuxumab (Erbix)	J9055	
	Denosumab (Prolia/ Xgeva)	J0897	
	Docetaxel (Taxotere)	J9171	
	Ecallantide (Kalbitor)	J1290	
	Epoprostenol (Flolan, Veletri)	J1325	
	Erythropoiesis-Stimulating Agents (Darbepoetin/Epoetin)	J0881	
		J0882	
		J0885	
		J0887	
		J0888	
		Q4081	
	GnRH Agonists (Lupron)	J1950	
	Golimimumab (Simponi Aria)	J1602	
	Granulocyte-Colony Stimulating Factor (G-Csf) (e.g., Pegfilgrastim, Filgastrim, Sargramostim)	J1447	
		J1442	
		J2505	
		J2820	
	Growth Hormone (Somatropin)	J2941	
	Hyaluronic Acid Derivatives (Synvisc, Hyalgan)	J7321	
		J7323	
		J7324	
		J7325	
		J7326	
	Hyaluronic Acid Derivatives (Synvisc, Hyalgan)	J7327	
		J7328	

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INJECTABLE DRUGS	Hyaluronic Acid Derivatives (Synvisc, Hyalgan)	Q9980	
	Hydroxyprogesterone Caproate (Makena)	J1725	Medicaid: Pharmacy Benefit - Please direct prescription to Accredo Specialty Pharmacy, phone 1-800-903-8224. Medicare: Prior Authorization is required.
	Ibandronate (Boniva)	J1740	
	Infliximab (Remicade)	J1745	
	Intravenous Immunoglobulin	J0588	
	Intravenous Immunoglobulin	J1459	
		J1557	
		J1561	
		J1566	
		J1568	
		J1569	
		J1572	
		J7504	
		J1575	
	Ipilimumab (Yervoy)	J9228	
	Mempolizumab (Nacala)	J2182	
	Natalizumab (Tysabri)	J2323	
	Nivolumab (Opdivo)	J9299	
	Omalizumab (Xolair)	J2357	
	Paclitaxel protein bound (Abraxane)	J9264	
	Paclitaxel (Taxol)	J9267	
	Palivizumab (Synagis)	90378	
	Panitumumab (Vectibix)	J9303	
	Paliperidone Palmitate (Invega Trinza) - (WAH only)	J2426	
	Pegloticase (Krystexxa)	J2507	
	Pembrolizumab (Keytruda)	J9271	
	Pemetrexed (Alimta)	J9305	
	Pertuzumab (Perjeta)	J9306	
	Ramucirumab (Cyramza)	J9308	
	Ranibizumab (Lucentis)	J2778	
	Rituximab (Rituxan)	J9310	
	Trastuzumab (Herceptin)	J9355	
	Tocilizumab (Actemra)	J3262	
Treprostinil (Remodulin)	J3285		
Treprostinil (Remodulin)	J7686		
Ustekinumab (Stelara)	J3357		

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PA Category	Name	Code(s)	Additional Notes
INJECTABLE DRUGS	Vedolizumab (Entyvio)	J3380	
	Zoledronic Acid (Zometa, Reclast)	J3489	
OUTPATIENT SPECIALTY SERVICES	Chiropractic* (greater than 12 visits MA and qualifying AH under age 20)	98940	
		98941	
		98942	
	Hyperbaric Oxygen Treatment	G0277	
		99183	
		99184	
	Orthoptic/Pleoptic Training: therapy services associated with orthoptic and pleoptic will require a PA. See PT and OT therapy notes below.	92065	
		92499	
	Physical Therapy* (after 12 visits MA; age 20 and under WAH; after 6 hours(24 units) WAH age 21 and over) **EXCEPTION TO THE ABOVE: • ICD 10 codes, R94.113, F81 (complete series), H49-H53 (complete series) will require a PA before services can be performed. • Optometrist billing for therapy services will require a PA regardless of diagnosis before services begin.	97161	
		97162	
		97163	
		97164	
		97169	
		97170	
		97171	
		97172	
		97032	
		97033	
		97034	
		97035	
		97036	
		97039	
		97110	
		97112	
		97113	
		97116	
		97124	
		97139	
	97140		
	97150		
97530			
97533			
97537			
97542			
97750			

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OUTPATIENT SPECIALTY SERVICES	Occupational Therapy* (after 12 visits MA; age 20 and under WAH; after 6 hours(24 units) WAH age 21 and over) **EXCEPTION TO THE ABOVE: • ICD 10 codes, R94.113, F81 (complete series), H49-H53 (complete series) will require a PA before services can be performed. • Optometrist billing for therapy services will require a PA regardless of diagnosis before services begin.	97165			
		97166			
		97167			
		97168			
		97032			
		97033			
		97034			
		97035			
		97039			
		97110			
		97112			
		97113			
		97140			
		97150			
		97530			
		97532			
		97533			
		97537			
		97542			
		97750			
		OTHER PSYCHIATRIC SERVICES	Speech Therapy* (after 12 visits MA; after 6 visits WAH 21 and over).	92507	
				92521	
				92522	
92523					
92524					
92610					
97532					
90870					
90867					
90868					
90869					
IMAGING/RADIOLOGY	Bone and Joint studies (WAH only)	77080			
		77081			
		77085			
	Medical Radiation Physics, dosimetry, treatment devices and special services (WAH only)	77301			
		77338			
		77370			
		77385			
		77386			
G6016					

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IMAGING/RADIOLOGY	MRI	70540	
		70542	
		70543	
		70551	
		70552	
		70553	
		70554	
		70555	
		70557	
		70558	
		70559	
		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			
75565			

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IMAGING/RADIOLOGY	MRI	76390		
		76498		
		77021		
		77022		
		77058		
		77059		
		77084		
		C8903		
		C8904		
		C8905		
		C8906		
		C8907		
		C8908		
		MRA	70544	
			70545	
	70546			
	70547			
	70548			
	70549			
	71555			
	72159			
	72198			
	73225			
	73725			
	74185			
	75557			
	75559			
	75561			
	75563			
	C8900			
	C8901			
	C8902			
	C8909			
	C8910			
	C8911			
	C8912			
	C8920			
	C8931			
	C8932			
	C8933			
C8934				

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PA Category	Name	Code(s)	Additional Notes
IMAGING/RADIOLOGY	MRA	C8935	
		C8936	
	Proton Beam Treatment (WAH only)	77520	
		77522	
		77523	
SURGICAL PROCEDURES	Bariatric surgery	43644	
		43645	
		43770	
		43771	
		43772	
		43773	
		43774	
		43775	
		43842	
		43843	
		43845	
		43846	
		43847	
		43848	
		43886	
		43887	
	43888		
	Cardiac Stents - WAH	C1874	
		C1875	
		C1876	
		C1877	
		92928	
		92929	
		92933	
		92934	
		92937	
		92938	
		92941	
		92943	
		92944	
		C9600	
		C9601	
		C9602	
C9603			
C9604			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Cardiac Stents - WAH	C9605	
		C9606	
		C9607	
		C9608	
	Cochlear implant	69714	
		69715	
		69717	
		69718	
		69930	
	Extracorporeal Membrane Oxygenation Therapy (ECMO)	33946	
		33947	
		33948	
		33949	
		33951	
		33952	
		33953	
		33954	
		33955	
		33956	
		33957	
		33958	
		33959	
		33962	
		33963	
		33964	
		33965	
		33966	
		33969	
		33984	
	Extracorporeal Membrane Oxygenation Therapy (ECMO)	33985	
		33986	
		33987	
		33988	
		33989	
	Endovenous laser/Radiofrequency ablation	36473	
		36474	
		36475	
		36476	
		36478	
		36479	

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Hysterectomy	58150	
		58152	
		58180	
		58200	
		58210	
		58240	
		58260	
		58262	
		58263	
		58267	
		58270	
		58275	
		58280	
		58285	
		58290	
		58291	
		58292	
		58293	
		58294	
		58541	
		58542	
		58543	
		58544	
		58548	
		58550	
		58552	
		58553	
		58554	
	58570		
	58571		
	58572		
	58573		
	Knee Arthroscopy	29866	
		29867	
		29868	
		29870	
		29871	
		29873	
		29874	
		29875	
		29876	
		29877	

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Knee Arthroscopy	29879	
		29880	
		29881	
		29882	
		29883	
		29884	
		29885	
		29886	
		29887	
		29888	
		29889	
	Mammoplasty (Augmentation/Reduction)**	11920	
		11921	
		11960	
		11970	
		11971	
		19301	
		19302	
		19303	
		19304	
		19316	
		19318	
		19324	
		19325	
		19340	
		19342	
		19350	
		19357	
		19361	
		19364	
		19366	
		19367	
	Mammoplasty (Augmentation/Reduction) **excludes ICD 10 cancer dx	19368	
		19369	
		19370	
		19371	
		19380	
		19396	
		19499	
		S2066	
	S2067		
	S2068		

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SURGICAL PROCEDURES	Nervous system (facet neurotomy)	64633	
		64634	
		64635	
		64636	
	Reconstructive plastic surgery & supplies	21193	
		21194	
		21195	
		21196	
		21198	
		21199	
		21206	
		21208	
		21209	
		21210	
		21215	
		21230	
		21245	
		21246	
		21247	
	21248		
	21249		
	Rhinoplasty and septoplasty	30400	
		30410	
		30420	
		30430	
		30435	
		30450	
		30460	
		30462	
		30465	
		30520	
	Sclerotherapy, leg veins	36468	
		36470	
		36471	
	Shoulder Arthroscopy	29805	
		29806	
		29807	
		29819	
		29820	
		29821	
		29822	
		29823	

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Shoulder Arthroscopy	29824	
		29825	
		29826	
		29827	
		29828	
	Spinal Injections	27096	
		62310	
		62311	
		62320	
		62321	
		62322	
		62323	
		62324	
		62325	
		62326	
		62327	
		62380	
		64479	
		64480	
		64483	
		64484	
		64490	
		64491	
		64492	
		64493	
	64494		
	64495		
	Spinal surgeries	64633	
		64634	
		64635	
		64636	
		22100	
		22101	
		22102	
		22103	
		22110	
		22112	
	22116		
	22206		
	22207		
	22208		
22210			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Spinal surgeries	22212	
		22214	
		22216	
		22220	
		22222	
		22224	
		22226	
		22305	
		22310	
		22315	
		22318	
		22319	
		22325	
		22326	
		22327	
		22328	
		22510	
		22511	
		22512	
		22513	
		22514	
		22515	
		22526	
		22527	
		22532	
		22533	
		22534	
		22548	
		22551	
		22552	
		22554	
		22556	
		22558	
		22585	
22590			
22595			
22600			
22610			
22612			
22614			
22630			
22632			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Spinal surgeries	22633	
		22634	
		22800	
		22802	
		22804	
		22808	
		22810	
		22812	
		22818	
		22819	
		22830	
		22840	
		22841	
		22842	
		22843	
		22844	
		22845	
		22846	
		22847	
		22848	
		22849	
		22850	
		22851	
		22852	
		22853	
		22854	
		22855	
		22856	
		22857	
		22858	
		22859	
		22861	
		22862	
		22864	
		22865	
		22867	
		22868	
		22869	
		22870	
		22899	
63001			
63003			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Spinal surgeries	63005	
		63011	
		63012	
		63015	
		63016	
		63017	
		63020	
		63030	
		63035	
		63040	
		63042	
		63043	
		63044	
		63045	
		63046	
		63047	
		63048	
		63050	
		63051	
		63055	
		63056	
		63057	
		63064	
		63066	
		63075	
		63076	
		63077	
		63078	
		63081	
		63082	
		63085	
		63086	
		63087	
		63088	
		63090	
		63091	
		63101	
		63102	
63103			
63170			
63172			
63173			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Spinal surgeries	63180	
		63182	
		63185	
		63190	
		63191	
		63194	
		63195	
		63196	
		63197	
		63198	
		63199	
		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			

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PA Category	Name	Code(s)	Additional Notes
SURGICAL PROCEDURES	Spinal surgeries	63306	
		63307	
		63308	
	Tympanostomy Tubes - WAH for ages 16 and under	69433	
		69436	
TRANSPLANTS	Transplant	32851	
		32852	
		32853	
		32854	
		33935	
		33940	
		33945	
		38204	
		38205	
		38206	
		38230	
		38232	
		38240	
		38241	
		38242	
		44132	
		44135	
		44136	
		47133	
		47135	
		47140	
		47141	
		47142	
		48160	
		48554	
		48556	
		50300	
		50320	
		50360	
		50365	
		50380	
		50547	
60512			

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TRANSPLANTS	Transplant Eval and WorkUp	<i>Transplant evaluation and workup includes standard office visits for determining patients viability for services. Tests and treatments outside of the approved evaluation and treatment will be subject to review under the remainder of the PA List</i>	
		86828	
		86829	
		86830	
	Transplant Eval and WorkUp	86831	
		86832	
		86833	
		86834	
		86835	