



Streamlining Authorization Processes

December 21, 2020

The Alliance is working to improve authorization processes to support our Providers in the provision of timely and accessible care. We have identified several services for which authorizations have been required which have a very high approval rate and/or are allowed without authorization by other health plans.

Accordingly beginning January 1, 2021, the codes included below will not require prior authorization. Providers are highly encouraged not to submit prior authorization requests for these specific codes. If an authorization request is submitted for the codes below, the Alliance will void the request and send such notification back to the submitting provider. This does not mean that the authorization was denied, just that the authorization was voided as not required.

The Alliance is pleased to make this change in support of efficiency for our staff and providers. We will continue to evaluate additional codes for which authorization is not required, and will communicate those updates accordingly. Please contact your Provider Relations Representative with any questions.

Codes No Longer Requiring Authorization Effective January 1, 2021:

| Procedure Code | Procedure Name |
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| 95810 | Polysomnography; Age 6 Years or Older, Sleep Staging With 4 Or More Additional Parameters of Sleep, Attended by A Technologist |
| 95811 | Polysomnography; Age 6 Years or Older, Sleep Staging With 4 Or More Additional Parameters of Sleep, With Initiation of Continuous Positive Airway Pres |
| A7038 | Filter, Disposable, Used with Positive Airway Pressure Device |
| A7035 | Headgear Used with Positive Airway Pressure Device |
| 95886 | Needle Electromyography, Each Extremity, With Related Paraspinal Areas, When Performed, Done with Nerve Conduction, Amplitude and Latency/Velocity Stu |
| A7046 | Water Chamber for Humidifier, Used with Positive Airway Pressure Device, Replacement, each (Special Coverage Instructions Apply. See Cim: 60-17) |
| A4604 | Tubing with Integrated Heating Element for Use with Positive Airway Pressure Device |
| A7030 | Full Face Mask Used with Positive Airway Pressure Device, Each |
| A7031 | Face Mask Interface, Replacement for Full Face Mask, Each |



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| A7039 | Filter, Non-Disposable, Used with Positive Airway Pressure Device |
| E0570 | Nebulizer, With Compressor |
| A7034 | Nasal Interface (Mask or Cannula Type) Used with Positive Airway Pressure Device, With or Without Head Strap |
| A7032 | Cushion for Use on Nasal Mask Interface, Replacement Only, Each |
| A7037 | Tubing Used with Positive Airway Pressure Device |
| A7005 | Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable |
| A7033 | Pillow for Use on Nasal Cannula Type Interface, Replacement Only, Pair |
| A7015 | Aerosol Mask, Used with DME Nebulizer |
| A7036 | Chinstrap Used with Positive Airway Pressure Device |
| 94729 | Diffusing Capacity (e.g., Carbon Monoxide, Membrane) (List Separately in Addition to Code for Primary Procedure) |
| 94727 | Gas Dilution or Washout for Determination of Lung Volumes And, When Performed, Distribution of Ventilation and Closing Volumes |
| 66984 | Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (e.g., irrigation and a |
| A7029 | Nasal Pillows for Combination Oral/Nasal Mask, Replacement Only, Pair |
| A7027 | Combination Oral/Nasal Mask, Used with Continuous Positive Airway Pressure Device, Each |
| A7028 | Oral Cushion for Combination Oral/Nasal Mask, Replacement Only, Each |
| A5513 | For Diabetics Only, Multiple Density Insert, Custom Molded from Model of Patient's Foot, Total Contact with Patient's Foot, Including Arch, Base Lay |
| A7013 | Filter, Disposable, Used with Aerosol Compressor or Ultrasonic Generator |
| B9999 | Noc For Parenteral Supplies |
| 66982 | Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (e.g., irrigation and a |
| 92928 | Percutaneous Transcatheter Placement of Intracoronary Stent(s), With Coronary Angioplasty When Performed; Single Major Coronary Artery or Branch |
| 93460 | Catheter Placement in Coronary Artery(s) For Coronary Angiography, Including Intraprocedural Injection(s) For Coronary Angiography, Imaging Supervision |
| 54640 | Orchiopexy, inguinal or scrotal approach |

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| E0466 | Home Ventilator, Any Type, Used with Non-Invasive Interface, (E.G., Mask, Chest Shell) (Special Coverage Instructions Apply. See Mcm: 60-9) |
| 49650 | Laparoscopy, Surgical; Repair Initial Inguinal Hernia |
| Z5946 | EPSDT Supplemental Service - Hearing Aid |
| 67311 | Strabismus Surgery, Recession or Resection Procedure; 1 Horizontal Muscle |
| 92920 | Percutaneous Transluminal Coronary Angioplasty; Single Major Coronary Artery or Branch |
| 93613 | Intracardiac Electrophysiologic 3-Dimensional Mapping (List Separately in Addition To Code For Primary Procedure) |
| 92626 | Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); first hour |
| A4248 | Chlorhexidine Containing Antiseptic, 1 MI |
| Z4303 | EPSDT: CCs Patient Report -- Complex / Periodic |
| V2629 | Prosthetic Eye, Other Type |
| 93451 | Right Heart Catheterization Including Measurement(s) Of Oxygen Saturation and Cardiac Output, When Performed |
| V2628 | Fabrication and Fitting of Ocular Conformer |
| 75574 | Computed Tomographic Angiography, Heart, Coronary Arteries and Bypass Grafts (When Present), With Contrast Material, Including 3d Image Postprocessing |
| 92929 | Percutaneous Transcatheter Placement of Intracoronary Stent(s), With Coronary Angioplasty When Performed; Each Additional Branch of A Major Coronary A |
| S8189 | Tracheostomy Supply, Not Otherwise Classified |
| 93656 | Comprehensive Electrophysiologic Evaluation Including Transseptal Catheterizations, Insertion and Repositioning of Multiple Electrode Catheters With I |
| 92627 | Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); each addition |
| A9281 | Reaching/Grabbing Device, Any Type, Any Length, Each |