

Molina Healthcare of Texas Prior Authorization Code Matrix Update

Effective: January 1, 2021

Molina is updating the Prior Authorization (PA) Code Matrix for January 1, 2021. This is notification only and does not determine if the benefit is covered by the member's plan. The following codes are being updated:

CPT Code	Code Description	Service Category	Lines of Business (LOB)	NOTES
All Physical and Occupational Therapy Codes	All Physical and Occupational Therapy Codes	Physical and Occupational Therapy (PT/OT)	Marketplace	Prior Authorization requirement update. All PT/OT will change from configured to benefit maximum to Evaluation plus 12 visits without PA. PA required after 12 th visit.
H0015	ALCOHOL AND/OR DRUG SRVCS	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
H2014	SKILLS TRAINING AND DEVELOPMENT PER 15 MINUTES	Behavioral/Mental Health, Alcohol-Chemical Dependency	All LOB	Removed Autism Spectrum Disorder requirement for PA.
H2017	PSYCHOSOCIAL REHAB SERVICES PER 15 MINUTES	Behavioral/Mental Health, Alcohol-Chemical Dependency	All LOB	Removed Autism Spectrum Disorder requirement for PA.
H2019	THERAPEUTIC BEHAVIORAL SERVICES PER 15 MINUTES	Behavioral/Mental Health, Alcohol-Chemical Dependency	All LOB	Removed Autism Spectrum Disorder requirement for PA.
80305	DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80306	DRUG TEST PRSMV READ INSTRMNT ASSTD DIR OPT OBS	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80307	DRUG TEST	Behavioral/Mental	Marketplace	Code currently

	PRSMV INSTRMNT CHEM ANALYZERS PR DATE	Health, Alcohol- Chemical Dependency		requires PA for Medicaid. Adding PA for Marketplace.
80320	DRUG TEST DEF DRUG TESTING PROCEDURES - ALCOHOLS	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80324	DRUG SCREEN QUANT AMPHETAMINES 1 OR 2	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80346	DRUG SCREENING BENZODIAZEPINE S 1-12	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80348	DRUG SCREENING BUPRENORPHINE	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80353	DRUG TEST DEF DRUG TESTING PROCEDURES - COCAINE	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80354	DRUG TEST DEF DRUG TESTING PROCEDURES - FENTANYL	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80356	DRUG TEST DEF DRUG TESTING PROCEDURES - HEROIN METABOLITE	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80358	DRUG TEST DEF DRUG TESTING PROCEDURES - METHADONE	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80359	DRUG TEST DEF DRUG TESTING PROCEDURES - METHYLENEDIOX YAMPHETAMINES (MDA, MDEA, MDMA)	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80361	DRUG TEST DEF DRUG TESTING PROCEDURES - OPTIATES, 1 OR MORE	Behavioral/Mental Health, Alcohol- Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80362	DRUG TEST DEF DRUG TESTING	Behavioral/Mental Health, Alcohol-	Marketplace	Code currently requires PA for

	PROCEDURES - OPIOIDS AND OPTIATE ANALOGS, 1 OR 2	Chemical Dependency		Medicaid. Adding PA for Marketplace.
80365	DRUG TEST DEF DRUG TESTING PROCEDURES - OXYCODONE	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80369	DRUG TEST DEF DRUG TESTING PROCEDURES - SKELETAL MUSCLE RELAXANTS, 1 OR 2	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80372	DRUG TEST DEF DRUG TESTING PROCEDURES - TAPENTADOL	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
80373	DRUG TEST DEF DRUG TESTING PROCEDURES - TRAMADOL	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
G0480	DRUG TEST DEF 1-7 DRUG CLASSES	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
G0481	DRUG TEST DEF 8-14 DRUG CLASSES	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
G0482	DRUG TEST DEF 15-21 DRUG CLASSES	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
G0483	DRUG TEST DEF 22 OR MORE DRUG CLASSES	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
G0659	DRUG TEST DEF SIMPLE ALL CL	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
S9480	INTENSIVE OP PSYCHIATRY	Behavioral/Mental Health, Alcohol-Chemical Dependency	Marketplace	Code currently requires PA for Medicaid. Adding PA for Marketplace.
H0040	ASSERT COMM TX PROG - PER DIEM	Behavioral/Mental Health, Alcohol-Chemical Dependency	Medicaid and Marketplace	Adding PA requirement.

T2023	TARGETED CASE MANAGEMENT, PER MONTH	Behavioral/Mental Health, Alcohol-Chemical Dependency	Medicaid	Adding PA requirement.
H2015	COMP COMMUNITY SUPPORT SERVICES PER 15 MINUTES	Behavioral/Mental Health, Alcohol-Chemical Dependency	Medicaid	Removal of PA requirement for Medicaid only.
30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	Cosmetic, Plastic & Reconstructive Procedures	All LOB	New Code. Adding PA requirement.
93895	CAROTID INTIMA MEDIA & CAROTID ATHEROMA EVAL BI	Experimental & Investigational		Adding PA requirement.
0620T	Endovascular venous arterialization, tibial or peroneal vein, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed	Experimental & Investigational	All LOB	New Code. Adding PA requirement.
0621T	Trabeculostomy ab interno by laser	Experimental & Investigational	All LOB	New Code. Adding PA requirement.
0622T	Trabeculostomy ab interno by laser; with use of ophthalmic endoscope	Experimental & Investigational	All LOB	New Code. Adding PA requirement.

0623T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission, computerized analysis of data, with review of computerized analysis output to reconcile discordant data, interpretation and report	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0624T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0625T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; computerized analysis of data from coronary computed	Experimental & Investigational	All LOB	New Code. Adding PA requirement

	tomographic angiography			
0626T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; review of computerized analysis output to reconcile discordant data, interpretation and report	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0628T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0629T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral	Experimental & Investigational	All LOB	New Code. Adding PA requirement

	injection, with CT guidance, lumbar; first level			
0630T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; each additional level (List separately in addition to code for primary procedure)	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0631T	Transcutaneous visible light hyperspectral imaging measurement of oxyhemoglobin, deoxyhemoglobin, and tissue oxygenation, with interpretation and report, per extremity	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0632T	Percutaneous transcatheter ultrasound ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	Experimental & Investigational	All LOB	New Code. Adding PA requirement
0639T	Wireless skin sensor thermal anisotropy measurement(s) and assessment of flow in cerebrospinal fluid shunt, including ultrasound guidance, when performed	Experimental & Investigational	All LOB	New Code. Adding PA requirement
K1006	Suction pump, home model, portable or stationary, electric, any type, for use with external urine	Experimental & Investigational	All LOB	New Code. Adding PA requirement. Published 10/01/2020

	management system			
K1007	Bilateral hip, knee, ankle, foot device, powered, includes pelvic component, single or double upright(s), knee joints any type, with or without ankle joints any type, includes all components and accessories, motors, microprocessors, sensors	Experimental & Investigational	All LOB	New Code. Adding PA requirement. Published 10/01/2020
K1009	Speech volume modulation system, any type, including all components and accessories	Experimental & Investigational	All LOB	New Code. Adding PA requirement. Published 10/01/2020
K1011	Activation device for intraurethral drainage device with valve, replacement only, each	Experimental & Investigational	All LOB	New Code. Adding PA requirement. Published 10/01/2020
K1012	Charger and base station for intraurethral activation device, replacement only	Experimental & Investigational	All LOB	New Code. Adding PA requirement. Published 10/01/2020
0227U	Drug assay, presumptive, 30 or more drugs or metabolites, urine, liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, includes sample validation	Experimental & Investigational	All LOB	New Code. Adding PA requirement.
0014M	HEM HMTLMF NEO GENE REARGMT DNA WHL BLD MARROW	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0015M	ADRNL CORTCL	Genetic Counseling	All LOB	New Code. Adding

	TUM BCHM ASY	& Testing		PA requirement.
0016M	ONC BLADDER MRNA 209 GEN ALG	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81168	CCND1/IGH (t(11;14)) (eg, mantle cell lymphoma) translocation analysis, major breakpoint, qualitative and quantitative, if performed	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81191	NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81192	NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81193	NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81194	NTRK (neurotrophic- tropomyosin receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81278	IGH@/BCL2 (t(14;18)) (eg, follicular lymphoma) translocation analysis, major breakpoint region (MBR) and minor cluster region (mcr) breakpoints, qualitative or quantitative	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81279	JAK2 (Janus kinase 2) (eg,	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)			
81338	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81339	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81347	SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F, R625C, R625L)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81348	SRSF2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, P95H, P95L)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81351	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81352	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	sequence analysis (eg, 4 oncology)			
81353	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81357	U2AF1 (U2 small nuclear RNA auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, S34F, S34Y, Q157R, Q157P)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81360	ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81419	Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBP1, SYNGAP1, TCF4, TPP1, TSC1, TSC2, and ZEB2	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81529	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	(28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis			
81546	Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
81554	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0228U	Oncology (prostate), multianalyte molecular profile by photometric detection of macromolecules adsorbed on nanosponge array slides with machine learning, utilizing first morning voided urine, algorithm reported as likelihood of prostate cancer	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0229U	BCAT1 (Branched chain amino acid	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	transaminase 1) or IKZF1 (IKAROS family zinc finger 1) (eg, colorectal cancer) promoter methylation analysis			
0230U	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation), full sequence analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0231U	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) gene expansions, mobile element insertions, and variants in non-uniquely mappable regions	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0232U	CSTB (cystatin B) (eg, progressive myoclonic epilepsy type 1A, Unverricht-Lundborg disease), full gene analysis, including	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions			
0233U	FXN (frataxin) (eg, Friedreich ataxia), gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0234U	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
0235U	PTEN (phosphatase and tensin homolog) (eg, Cow den syndrome, PTEN hamartoma tumor syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions,	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.

	<p>duplications, mobile element insertions, and variants in non-uniquely mappable regions</p>			
0236U	<p>SMN1 (survival of motor neuron 1, telomeric) and SMN2 (survival of motor neuron 2, centromeric) (eg, spinal muscular atrophy) full gene analysis, including small sequence changes in exonic and intronic regions, duplications and deletions, and mobile element insertions</p>	<p>Genetic Counseling & Testing</p>	<p>All LOB</p>	<p>New Code. Adding PA requirement.</p>
0237U	<p>Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia), genomic sequence analysis panel including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions</p>	<p>Genetic Counseling & Testing</p>	<p>All LOB</p>	<p>New Code. Adding PA requirement.</p>
0238U	<p>Oncology (Lynch syndrome), genomic DNA</p>	<p>Genetic Counseling & Testing</p>	<p>All LOB</p>	<p>New Code. Adding PA requirement.</p>

	sequence analysis of MLH1, MSH2, MSH6, PMS2, and EPCAM, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions			
0239U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free DNA, analysis of 311 or more genes, interrogation for sequence variants, including substitutions, insertions, deletions, select rearrangements, and copy number variations	Genetic Counseling & Testing	All LOB	New Code. Adding PA requirement.
C9062	INJECTION, DARATUMUMAB 1-MG AND HYALURONIDASE -FIHJ	Healthcare Administered Drugs	All LOB	New Code. Adding PA requirement.
C9064	MITOMYCIN PYELOALYCEAL INSTILLATION, 1MG	Healthcare Administered Drugs	All LOB	New Code. Adding PA requirement.
C9065	INJECTION, ROMIDEPSIN, NON-LYOPHILIZED, (E.G. LIQUID), 1MG	Healthcare Administered Drugs	All LOB	New Code. Adding PA requirement.
C9066	INJECTION, SACITUZUMAB GOVITECAN-HZIY, 10 MG	Healthcare Administered Drugs	All LOB	New Code. Adding PA requirement.
Q4249	Amniplify, for topical use only, per square centimeter	Hyperbaric/Wound Therapy	All LOB	New Code. Adding PA requirement. Published

				10/01/2020.
Q4250	Amnioamp-mp, per square centimeter	Hyperbaric/Wound Therapy	All LOB	New Code. Adding PA requirement. Published 10/01/2020.
Q4254	Novafix dl, per square centimeter	Hyperbaric/Wound Therapy	All LOB	New Code. Adding PA requirement. Published 10/01/2020.
Q4255	Reguard, for topical use only, per square centimeter	Hyperbaric/Wound Therapy	All LOB	New Code. Adding PA requirement. Published 10/01/2020.
0633T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast material	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
0634T	Computed tomography, breast, including 3D rendering, when performed, unilateral; with contrast material(s)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
0635T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast, followed by contrast material(s)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
0636T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast material(s)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
0637T	Computed tomography, breast, including 3D rendering, when performed, bilateral; with contrast material(s)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
0638T	Computed tomography, breast,	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.

	including 3D rendering, when performed, bilateral; without contrast, followed by contrast material(s)			
71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement.
93241	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted.
93242	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
93243	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; scanning analysis with report	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
93244	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; review and interpretation	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
93245	External electrocardiographic recording for more	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III

	than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation			codes 0295T, 0296T, 0297T and 0298T, which were deleted
93246	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
93248	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; review and interpretation	Imaging & Special Tests	All LOB	New Code. Adding PA requirement. Replace Category III codes 0295T, 0296T, 0297T and 0298T, which were deleted
0095T	RMVL TOT DISC ARTHRP ANT APPR CRV EA NTRSPC	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
0098T	REVJ TOT DISC ARTHRP ANT APPR CRV EA NTRSPC	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22534	ARTHRODESIS LAT EXTRACAVITARY EA ADDL THRC/LMBR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22552	ARTHRD ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22585	ARTHRODESIS	OP Hosp/Amb	All LOB	Adding PA

	ANTERIOR INTERBODY EA ADDL NTRSPC	Surgery Center (ASC) procedures		requirement.
22614	ARTHRODESIS POSTERIOR/POST EROLATERAL EA ADDL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22632	ARTHRODESIS POSTERIOR INTERBODY EA ADDL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22634	ARTHRODESIS POST/POSTERLAT RL/POSTINTRBDY ADL SPC/SEG	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
22858	TOT DISC ARTHRP ANT APPR DISC 2ND LEVEL CERVICAL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23120	CLAVICULECTOM Y PARTIAL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23125	CLAVICULECTOM Y TOTAL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23130	PARTIAL REPAIR OR REMOVAL OF SHOULDER BONE	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23405	TENOTOMY SHOULDER AREA 1 TENDON	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23410	OPEN REPAIR OF ROTATOR CUFF ACUTE	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23415	CORACOACROMI AL LIGAMENT RELEAS W/WOACROMIOP LASTY	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23420	RECONSTRUCTIO N ROTATOR CUFF AVULSION CHRONIC	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23430	TENODESIS LONG TENDON BICEPS	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23450	CAPSULORRHAPH Y ANTERIOR PUTTI- PLATT/MAGNUSO N	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.

23455	CAPSULORRHAPHY ANTERIOR W/LABRAL REPAIR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23460	CAPSULORRHAPHY ANTERIOR WITH BONE BLOCK	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23462	CAPSULORRHAPHY ANTERIOR W/CORACOID PROCESS TR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23465	CAPSULORRHAPHY GLENOHUMERAL JT PST W/NO BONE BLK	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23466	CAPSULORRHAPHY GLENOHUMERAL JT MULTI-DIRIONAL INS	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23472	ARTHROPLASTY GLENOHUMERAL JOINT TOTAL SHOULDER	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23473	REVIS SHOULDER ARTHRPLSTY HUMERAL/GLENOID COMPNT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23474	REVIS SHOULDER ARTHRPLSTY HUMERAL AND GLENOID COMPNT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
23700	MANJ W/ANES SHOULDER JOINT W/FIXATION APPARATUS	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27332	ARTHRT W/EXC SEMILUNAR CRTLG KNEE MEDIAL/LAT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27333	ARTHRT W/EXC SEMILUNAR CRTLG KNEE MEDIAL and LAT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27403	ARTHROTOMY W/MENISCUS REPAIR KNEE	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27405	RPR PRIMARY TORN LIGM and	OP Hosp/Amb Surgery Center	All LOB	Adding PA requirement.

	/CAPSULE KNEE COLLATERAL	(ASC) procedures		
27407	REPAIR PRIMARY TORN LIGM and /CAPSULE KNEE CRUCIAT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27409	RPR 1 TORN LIGM and /CAPSL KNE COLTRL and CRUCIATE	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27412	AUTOLOGOUS CHONDROCYTE IMPLANTATION KNEE	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27415	OSTEOCHONDRA L ALLOGRAFT KNEE OPEN	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27416	OSTEOCHONDRA L AUTOGRAFT KNEE OPEN MOSAICPLASTY	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27418	ANTERIOR TIBIAL TUBERCLEPLAST Y	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27420	RCNSTJ DISLOCATING PATELLA	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27422	RCNSTJ DISLC PATELLA W/XTNSR RELIGNMT and /MUSC RL	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27424	RCNSTJ DISLC PATELLA W/PATELLECTOM Y	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27425	LATERAL RETINACULAR RELEASE OPEN	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27427	LIGAMENTOUS RECONSTRUCTIO N KNEE EXTRA-ARTICULAR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27428	LIGAMENTOUS RECONSTRUCTIO N KNEE INTRA-ARTICULAR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
27429	LIGMOUS RCNSTJ AGMNTJ KNE INTRA-ARTICULAR XTR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.

27570	MANIPULATION KNEE JOINT UNDER GENERAL ANESTHESIA	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29805	ARTHROSCOPY SHOULDER DX W/WO SYNOVIAL BIOPSY SPX	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29860	ARTHROSCOPY HIP DIAGNOSTIC W/WO SYNOVIAL BYP SPX	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29861	ARTHROSCOPY HIP SURGICAL W/REMOVAL LOOSE/FB	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29862	ARTHRS HIP DEBRIDEMENT/SH AVING ARTICULAR CRTLG	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29863	ARTHROSCOPY HIP SURGICAL W/SYNOVECTOM Y	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29866	ARTHROSCOPY KNEE OSTEOCHONDRA L AGRFT MOSAICPLAST	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29867	ARTHROSCOPY KNEE OSTEOCHONDRA L ALLOGRAFT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29868	ARTHROSCOPY KNEE MENISCAL TRNSPLJ MED/LAT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
29870	ARTHROSCOPY KNEE DIAGNOSTIC W/WO SYNOVIAL BX SPX	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
63035	LAMNOTMY W/DCMPRSN NRV EACH ADDL CRVCL/LMBR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
63043	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC EA CRV	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
63044	LAMOT W/PRTL	OP Hosp/Amb	All LOB	Adding PA

	FFD HRNA8 REEXPL 1 NTRSPC EA LMBR	Surgery Center (ASC) procedures		requirement.
63048	LAM FACECTOMY and FORAMTOMY 1 SGM EA CRV THRC/LMBR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
63057	TRANSPEDICULA R DCMPRN 1 SEG EA THORACIC/LUMB AR	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
63076	DISCECTOMY ANT DCMPRN CORD CERVICAL EA NTRSPC	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
G0289	SCOPE KNEE REMOV FB/SHAV TM OTH SURG DIFF CMPRTMT	OP Hosp/Amb Surgery Center (ASC) procedures	All LOB	Adding PA requirement.
S2118	METL-ON-METL TOT HIP RESRFC ACETAB AND FEM CMPNT	OP Hosp/Amb Surgery Center (ASC) procedures	Medicaid and Marketplace	Adding PA requirement.
55880	Ablation of malignant prostate tissue, transrectal, with high intensity- focused ultrasound (HIFU), including ultrasound guidance	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	New Code. Adding PA requirement.
57465	Computer-aided mapping of cervix uteri during colposcopy, including optical dynamic spectral imaging and algorithmic quantification of the acetowhitening effect (List separately in addition to code for primary procedure)	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	New Code. Adding PA requirement.
C9761	Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy (ureteral catheterization is	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	New Code. Adding PA requirement. Published 10/01/2020.

	included) and vacuum aspiration of the kidney, collecting system and urethra if applicable			
C9769	Cystourethroscopy, with insertion of temporary prostatic implant/stent with fixation/anchor and incisional struts	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	New Code. Adding PA requirement. Published 10/01/2020.
33975	Insertion of ventricular assist device; extracorporeal, single ventricle	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33976	Insertion of ventricular assist device; extracorporeal, biventricular	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33210	INSJ/RPLCMT TEMP TRANSVNS 1CHMBR ELTRD/PM CATH	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33211	INSJ/RPLCMT TEMP TRANSVNS 2CHMBR PACG ELTRDS SPX	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33215	RPSG PREV IMPLTED PM/DFB R ATR/R VENTR ELECTRODE	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33216	INSJ 1 TRANSVNS ELTRD PERM PACEMAKER/IMP LTBL DFB	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33217	INSJ 2 TRANSVNS ELTRD PERM PACEMAKER/IMP LTBL DFB	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33285	INSERTION SUBQ CARDIAC RHYTHM MONITOR W/PRGRMG	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
36473	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM 1ST VEIN	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37220	REVASCULARIZA	OP Hosp/Amb	All LOB	Adding PA

	TION ILIAC ARTERY ANGIOP 1ST VSL	Surgery Center (ASC) Procedures		requirement.
37221	REVSC OPN/PRQ ILIAC ART W/STNT PLMT & ANGIOPLSTY	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37224	REVSC OPN/PRG FEM/POP W/ANGIOPLASTY UNI	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37225	REVSC OPN/PRQ FEM/POP W/ATHRC/ANGIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37226	REVSC OPN/PRQ FEM/POP W/STNT/ANGIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37227	REVSC OPN/PRQ FEM/POP W/STNT/ATHRC/A NGIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37228	REVSC OPN/PRQ TIB/PERO W/ANGIOPLASTY UNI	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37229	REVSC OPN/PRQ TIB/PERO W/ATHRC/ANGIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37230	REVSC OPN/PRQ TIB/PERO W/STNT/ANGIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37231	REVSC OPN/PRQ TIB/PERO W/STNT/ATHR/AN GIOP SM VSL	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
37500	VASC ENDOSCOPY SURG W/LIG PERFORATOR VEINS SPX	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
93025	MICROVOLT T- WAVE ASSESS VENTRICULAR ARRHYTHMIAS	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
93580	PRQ TCAT CLSR CGEN INTRATRL COMUNICAJ	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.

	W/IMPLT			
93581	PRQ TCAT CLSR CGEN VENTR SEPTAL DFCT W/IMPLT	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
93582	PERCUTAN TRANSCATH CLOSURE PAT DUCT ARTERIOSUS	OP Hosp/Amb Surgery Center (ASC) Procedures	All LOB	Adding PA requirement.
33995	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; right heart, venous access only	Transplants/Gene Therapy	All LOB	New Code. Adding PA requirement.
T2047	Habilitation, prevocational, waiver; per 15 minutes	Unlisted/Miscellaneo us	Medicaid	Non-Covered for Marketplace and Medicare. New Code. Adding PA for Medicaid. Published 10/1/2020.
V2524	Contact lens, hydrophilic, spherical, photochromic additive, per lens	Unlisted/Miscellaneo us	All LOB	New Code. Adding PA requirement. Published 10/1/2020.
J9245	INJECTION MELINJECTION MELPHALAN HCL 50 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9261	INJECTION NELARABINE 50 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
C9257	INJECTION BEVACIZUMAB 0.25 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9025	INJECTION AZACITIDINE 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9030	Bcg live intravesical instillation	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9050	INJECTION CARMUSTINE 100 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J0594	INJECTION BUSULFAN 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9027	INJECTION	Healthcare	All LOB	Removed PA

	CLOFARABINE 1 MG	Administered Drugs		requirement.
J9120	INJECTION DACTINOMYCIN 0.5 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J0894	INJECTION DECITABINE 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9217	leuprolide acetate (for depot suspension)	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J0207	INJECTION AMIFOSTINE 500 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9246	INJECTION, MELPHALAN (evomela), 1 mg	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9395	FULVESTRANT	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9200	INJECTION FLOXURIDINE 500 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9211	INJECTION IDARUBICIN HCL 5 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9208	INJECTION IFOSFAMIDE 1 G	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9230	mechlorethamine hydrochloride (nitrogen mustard)	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9280	INJECTION MITOMYCIN 5 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9293	INJECTION MITOXANTRONE HCL PER 5 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9268	INJECTION PENTOSTATIN 10 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
Q5110	FILGRASTIM-AAFI	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9328	INJECTION TEMOZOLOMIDE 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9330	INJECTION TEMSIROLIMUS 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9340	INJECTION THIOTEPA 15 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9017	INJECTION ARSENIC TRIOXIDE 1 MG	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9357	valrubicin	Healthcare	All LOB	Removed PA

	intravesical	Administered Drugs		requirement.
J1675	INJECTION HISTRELIN ACETATE 10 MICROGRAMS	Healthcare Administered Drugs	All LOB	Removed PA requirement.
Q5101	filgrastim-sndz	Healthcare Administered Drugs	All LOB	Removed PA requirement.
J9202	goserelin acetate implant	Healthcare Administered Drugs	All LOB	Removed PA requirement.
0058T	CRYOPRESERVAT ION REPRODUCTIVE TISSUE OVARIAN	Experimental/Investi gational	All LOB	Deleted Code
0111T	LONG-CHAIN OMEGA-3 FATTY ACIDS RBC MEMBS	Experimental/Investi gational	All LOB	Deleted Code
0085T	Breath test for heart transplant rejection	Experimental/Investi gational	All LOB	Deleted Code
0126T	Common carotid intima-media thickness (IMT) study for evaluation of atherosclerotic burden or coronary heart disease risk factor assessment	Experimental/Investi gational	All LOB	Deleted Code
0228T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; single level	Experimental/Investi gational	All LOB	Deleted Code
0229T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; each additional level (List separately in addition to code for primary procedure)	Experimental/Investi gational	All LOB	Deleted Code
0230T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with	Experimental/Investi gational	All LOB	Deleted Code

	ultrasound guidance, lumbar or sacral; single level			
0231T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; each additional level (List separately in addition to code for primary procedure)	Experimental/Investigational	All LOB	Deleted Code
0295T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	Experimental/Investigational	All LOB	Deleted Code
0296T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	Experimental/Investigational	All LOB	Deleted Code
0297T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm recording and storage; scanning analysis with report	Experimental/Investigational	All LOB	Deleted Code
0298T	External electrocardiographic recording for more than 48 hours up to 21 days by continuous rhythm	Experimental/Investigational	All LOB	Deleted Code

	recording and storage; review and interpretation			
0396T	Intra-operative use of kinetic balance sensor for implant stability during knee replacement arthroplasty (List separately in addition to code for primary procedure)	Experimental/Investigational	All LOB	Deleted Code
0400T	Multi-spectral digital skin lesion analysis of clinically atypical cutaneous pigmented lesions for detection of melanomas and high risk melanocytic atypia; one to five lesions	Experimental/Investigational	All LOB	Deleted Code
0401T	Multi-spectral digital skin lesion analysis of clinically atypical cutaneous pigmented lesions for detection of melanomas and high risk melanocytic atypia; six or more lesions	Experimental/Investigational	All LOB	Deleted Code
0405T	Oversight of the care of an extracorporeal liver assist system patient requiring review of status, review of laboratories and other studies, and revision of orders and liver assist care plan (as appropriate), within a calendar month, 30 minutes or more of non-face-to-face time	Experimental/Investigational	All LOB	Deleted Code
19324	Mammoplasty, augmentation; without prosthetic implant	Cosmetic	All LOB	Deleted Code
58293	Vaginal hysterectomy, for uterus greater than	Outpatient/ASC	All LOB	Deleted Code

	250 g; with colpo-urethrocytostomy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control			
81545	Oncology (thyroid), gene expression analysis of 142 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)	Genetic Testing	All LOB	Deleted Code

The process for obtaining prior authorization **has not** changed. Please complete the Prior Authorization/ Service Request Form with all pertinent information and medical notes as applicable. Service Request Form is available on the Molina Healthcare website under Provider and under Forms. (<https://www.molinahealthcare.com/members/tx/en-US/health-care-professionals/Pages/home.aspx>)