Medicaid & Market Place Prior Auth (PA) Code Matrix

Effective Q3, 2019

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Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services

Medicaid	Market Place
*Inpatient, Residential Treatment, Partial Hospitalization, Electroconvulsive Therapy (ECT), Applied Behavior Analysis (ABA) for tx of Autism Spectrum Disorder (ASD). *Refer to CA tabs/pages for exception.*	*Transitional Substance Abuse Residential Treatment, Inpatient, Residential Treatment, Partial Hospitalization, Electroconvulsive Therapy (ECT), Applied Behavior Analysis (ABA) for tx of Autism Spectrum Disorder (ASD).*

Please refer to Forward Health to determine if a code is covered for WI Medicaid

0901	1001	90867	90870	*H2012*	H2015	H2018	*H0031*	H0046	S5111	*T1025*	*T1027*	*T2013*
0912	1002	*90868*	*H0012*	H2013	H2016	*H2019*	*H0032*	S0201	*T1023*	*T1026*	*T1028*	*T2040*
0913	2106	90869	H0017	*H2014*	*H2017*	H2020	H0035	*S5150*				

PA required for all plans only when submitted with Autism Dx. (Refer to Dx Codes Tab for related ICD's)

Cosmetic, Plastic & Reconstructive Procedures [In Any Setting]

Please refer to Forward Health to determine if a code is covered for WI

11900	15775	15781	15788	15793	15822	15825	15829	15834	15837	15847	15878	*19300*	*19324*	*19330*	*19350*	30400	30430	30460	67906
11901	15776	15782	15789	15820	15823	15826	15832	15835	15838	15876	15879	*19316*	*19325*	*19340*	*19355*	30410	30435	30462	67908
11920	15780	15783	15792	15821	15824	15828	15833	15836	15839	15877	17380	*19318*	*19328*	*19342*	*19396*	30420	30450	67904	69300

PA required, except with breast CA Dx's that include ICD10 codes: C50 - C50.929, D05.00 - D05.92 and Z85.3 [See Dx Codes tab]

Durable Medical Equipment (DME)

Please refer to Forward Health to determine if a code is covered for WI Medicaid

A5514	E0266	E0371	E0748	E0986	E1035	E1298	E2311	E2351	E2502	E2615	K0008	K0808	K0830	K0852	K0870	L8625	Q4201	V5212
A6460	E0277	E0372	E0749	E0988	E1036	E1310	E2312	E2361	E2504	E2616	K0009	K0813	K0831	K0853	K0871	L8694	Q4202	V5213
A6461	E0292	E0373	E0760	E1002	E1161	E1700	E2313	E2366	E2506	E2617	K0010	K0814	K0835	K0854	K0877	Q4183	Q4203	V5214
A7025	E0293	E0447	E0762	E1003	E1225	E2201	E2321	E2367	E2508	E2620	K0011	K0815	K0836	K0855	K0878	Q4184	Q4204	V5215
A9276	E0294	E0462	E0764	E1004	E1226	E2202	E2322	E2368	E2510	E2621	K0012	K0816	K0837	K0856	K0879	Q4185	S1034	V5221
A9277	E0295	E0465	E0766	E1005	E1227	E2203	E2325	E2369	E2511	E2622	K0014	K0820	K0838	K0857	K0880	Q4186	S1035	

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A9278	E0296	E0466	E0782	E1006	E1230	E2204	E2326	E2370	E2605	E2623	K0108	K0821	K0839	K0858	K0884	Q4187	S1036
A9901	E0297	E0467	E0783	E1007	E1232	E2227	E2327	E2373	E2606	E2624	K0553	K0822	K0840	K0859	K0885	Q4188	S1037
C2624	E0300	E0481	E0784	E1008	E1233	E2228	E2328	E2374	E2607	E2625	K0554	K0823	K0841	K0860	K0886	Q4190	V2530
E0194	E0301	E0483	E0785	E1010	E1234	E2291	E2329	E2375	E2608	E2626	K0606	K0824	K0842	K0861	K0890	Q4191	V2531
E0255	E0302	E0691	E0786	E1012	E1235	E2292	E2330	E2376	E2609	E2627	K0800	K0825	K0843	K0862	K0891	Q4193	V5171
E0256	E0303	E0692	E0849	E1014	E1236	E2293	E2340	E2377	E2611	E2628	K0801	K0826	K0848	K0863	K0900	Q4194	V5172
E0260	E0304	E0693	E0855	E1020	E1237	E2294	E2341	E2378	E2612	E2629	K0802	K0827	K0849	K0864	L3761	Q4198	V5181
E0261	E0328	E0694	E0983	E1029	E1238	E2295	E2342	E2397	E2613	E2630	K0806	K0828	K0850	K0868	L7700	Q4200	V5211
E0265	E0329	E0747	E0984	E1030	E1296	E2310	E2343	E2500	E2614	E2631	K0807	K0829	K0851	K0869	Codes applicable to Medicaid only		

Experimental/Investigational

Please refer to Forward Health to determine if a code is covered for WI Medicaid

31237	0058T	0111T	0210T	0231T	0274T	0333T	0358T	0410T	0426T	0444T	0480T	0496T	0512T	0528T	C1823	Q4196
33440	0071T	0126T	0211T	0234T	0275T	0335T	0362T	0411T	0427T	0445T	0481T	0497T	0513T	0529T	C8937	Q4197
33866	0072T	0163T	0212T	0235T	0278T	0338T	*0373T*	0412T	0428T	0446T	0482T	0498T	0514T	0530T	C9751	
82016	0075T	0164T	0213T	0253T	0290T	0339T	0394T	0413T	0429T	0447T	0483T	0499T	0515T	0531T	C9752	
82017	0076T	0165T	0214T	0254T	0295T	0342T	0395T	0414T	0430T	0448T	0484T	0500T	0516T	0532T	C9753	
83987	0085T	0184T	0215T	0263T	0296T	0347T	0396T	0415T	0431T	0469T	0485T	0501T	0517T	0533T	C9754	
84145	0095T	0191T	0216T	0264T	0297T	0348T	0397T	0416T	0432T	0470T	0486T	0502T	0518T	0534T	C9755	
86316	0098T	0198T	0217T	0265T	0298T	0349T	0398T	0417T	0433T	0471T	0487T	0503T	0519T	0535T	L8608	
86343	0100T	0200T	0218T	0266T	0312T	0350T	0400T	0418T	0434T	0472T	0488T	0504T	0520T	0536T	Q4161	
93264	0101T	0201T	0219T	0267T	0313T	0351T	0401T	0419T	0435T	0473T	0489T	0505T	0521T	0537T	Q4162	
95836	0102T	0202T	0220T	0268T	0314T	0352T	0402T	0420T	0436T	0474T	0490T	0506T	0522T	0538T	Q4163	
95976	0106T	0205T	0221T	0269T	0315T	0353T	0403T	0421T	0437T	0475T	0491T	0507T	0523T	0539T	Q4164	
95977	0107T	0206T	0222T	0270T	0316T	0354T	0404T	0422T	0440T	0476T	0492T	0508T	0524T	0540T	Q4165	
95983	0108T	0207T	0228T	0271T	0317T	0355T	0405T	0423T	0441T	0477T	0493T	0509T	0525T	0541T	Q4189	
0054T	0109T	0208T	0229T	0272T	0329T	0356T	0408T	0424T	0442T	0478T	0494T	0510T	0526T	0542T	Q4192	

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0055T	0110T	0209T	0230T	0273T	0330T	0357T	0409T	0425T	0443T	0479T	0495T	0511T	0527T	A4563	Q4195

Genetic Counseling & Testing

Except for Prenatal diagnoses of congenital disorders of the unborn child through amniocentesis and genetic test screening of newborns mandated by State regulations.

Please refer to Forward Health to determine if a code is covered for WI Medicaid

81105	81175	81187	81218	81233	81249	81285	81306	81328	81361	81408	81430	81443	81519	81595	0005U	0017U	0047U	*81422 **	S3865
81106	81176	81188	81219	81234	81258	81286	81311	81329	81362	81410	81431	81445	81520	81596	0006M	0026U	0048U	*81507 **	S3866
81107	81177	81189	81222	81235	81259	81287	81312	81333	81363	81411	81432	81448	81521	83006	0007M	0027U	0049U	*84999 **	S3870
81108	81178	81190	81223	81236	81265	81289	81313	81334	81364	81412	81433	81450	81525	86152	0008U	0029U	0050U	G9143	
81161	81179	81201	81225	81237	81266	81291	81314	81335	81400	81413	81434	81455	81528	86153	*0009M **	0030U	0053U	S3722	
81165	81180	81203	81226	81238	81269	81292	81317	81336	81401	81414	81435	81460	81535	88261	0009U	0031U	0055U	S3800	
81166	81181	81204	81227	81239	81271	81294	81319	81337	81402	81415	81436	81465	81536	88271	0010U	0032U	0056U	S3840	
81167	81182	81210	81228	81243	81272	81295	81320	81343	81403	81416	81437	81470	81538	88369	0011U	0033U	0057U	S3841	
81171	81183	81212	81229	81244	81273	81297	81321	81344	81404	81417	81438	81471	81540	88373	0012U	0034U	0058U	S3842	
81172	81184	81215	81230	81246	81274	81298	81323	81345	81405	81425	81439	81493	81541	88374	0013U	0037U	0059U	S3852	
81173	81185	81216	81231	81247	81283	81300	81324	81346	81406	81426	81440	81504	81545	88377	0014U	0045U	0060U	S3854	
81174	81186	81217	81232	81248	81284	81305	81325	81355	81407	81427	81442	81518	81551	0004M	0016U	0046U	*81420 **	S3861	

Code 84999: Including Oncotype Dx

**** Refer to WA tab for PA exceptions on codes.***

Healthcare Administered Drugs

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Pharmacy Drug Coverage

Newly FDA approved medications such as "buy-and-bill" drugs are considered non-formulary and subject to non-formulary policies and other non-formulary utilization criteria until a coverage decision is rendered by the Molina Pharmacy and Therapeutics Committee. "Buy-and-bill" drugs are pharmaceuticals which a provider purchases and administers, and for which the provider submits a claim to Molina Healthcare for reimbursement.

Many self-administered and office-administered injectable products require Prior Authorization (PA). In some cases they will be made available through Molina Healthcare's vendor, Caremark Specialty Pharmacy. Molina's pharmacy vendor will coordinate with MHI and ship the prescription directly to your office or the member's home. All packages are individually marked for each member, and refrigerated drugs are shipped in insulated packages with frozen gel packs. The service also offers the additional convenience of enclosing needed ancillary supplies (needles, syringes and alcohol swabs) with each prescription at no charge. Please contact your Provider Relations Representative with any further questions about the program.

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90281	C9130	J0287	J0606	J1095	J1559	J1675	J2182	J2783	J3315	J7182	J7205	J7327	J9022	J9065	J9205	J9266	J9328	Q3028	S0145
90283	C9131	J0289	J0637	J1230	J1560	J1726	J2186	J2786	J3316	J7183	J7207	J7328	J9023	J9070	J9206	J9267	J9330	Q4074	S0148
90284	C9132	J0364	J0638	J1290	J1561	J1729	J2248	J2787	J3355	J7185	J7208	J7329	J9025	J9098	J9207	J9268	J9340	Q5101	S0157
90378	C9141	J0480	J0640	J1300	J1562	J1740	J2315	J2793	J3357	J7186	J7209	J7330	J9027	J9120	J9208	J9271	J9351	Q5103	J8499
A9542	*C9257*	J0485	J0641	J1301	J1566	J1743	J2323	J2796	J3358	J7187	J7210	J7340	J9030	J9130	J9211	J9280	J9352	Q5104	J8999
B4105	C9293	J0490	J0695	J1322	J1568	J1744	J2326	J2797	J3380	J7188	J7211	J7504	J9032	J9145	J9214	J9285	J9354	Q5107	
C9035	C9399	J0517	J0714	J1324	J1569	J1745	J2350	J2820	J3385	J7189	J7308	J7511	J9033	J9150	J9215	J9293	J9355	Q5108	
C9036	C9407	J0565	J0717	J1325	J1570	J1746	J2353	J2840	J3396	J7190	J7309	J7527	J9034	J9153	J9216	J9295	J9356	Q5109	
C9037	C9488	J0567	J0725	J1428	J1571	J1750	J2354	J2860	J3397	J7191	J7310	J7639	*J9035*	J9155	J9217	J9299	J9357	Q5110	
C9038	J0129	J0570	J0775	J1438	J1572	J1756	J2357	J2916	J3398	J7192	J7311	J7682	J9036	J9160	J9218	J9301	J9360	Q5111	
C9039	J0135	J0584	J0800	J1439	J1573	J1786	J2425	J2941	J3489	J7193	J7312	J7686	J9039	J9171	J9219	J9302	J9371	Q5112	
C9040	J0178	J0585	J0841	J1442	J1575	J1826	J2469	J3060	J3490	J7194	J7313	J7677	J9040	J9173	J9225	J9303	J9390	Q5113	
C9043	J0180	J0586	J0850	J1447	J1595	J1830	J2502	J3090	J3590	J7195	J7316	J8520	J9041	J9176	J9226	J9305	J9395	Q5114	
C9044	J0185	J0587	J0875	J1453	J1599	J1833	J2503	J3095	J3591	J7196	J7318	J8521	J9042	J9178	J9228	J9306	J9400	Q5115	
C9045	J0202	J0588	J0878	J1454	J1602	J1930	J2504	J3110	J7170	J7197	J7320	J8655	J9043	J9179	J9229	J9307	J9600	Q9991	
C9047	J0205	J0594	J0881	J1458	J1627	J1931	J2505	J3145	J7175	J7198	J7321	J8670	J9044	J9185	J9230	J9308	J9999	Q9992	
C9048	J0207	J0596	J0885	J1459	J1628	J1950	J2507	J3240	J7177	J7199	J7322	J8700	J9045	J9190	J9245	J9310	Q0138	S0073	

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C9049	J0220	J0597	J0888	J1460	J1640	J1955	J2562	J3245	J7178	J7200	J7323	J9000	J9047	J9200	J9261	J9311	Q0139	S0122
C9050	J0221	J0598	J0894	J1555	J1645	J2020	J2597	J3262	J7179	J7201	J7324	J9015	J9050	J9201	J9262	J9312	Q2043	S0126
C9051	J0256	J0599	J0895	J1556	J1650	J2062	J2724	J3285	J7180	J7202	J7325	J9017	J9055	J9202	J9263	J9315	Q2050	S0128
C9052	J0257	J0604	J0897	J1557	J1652	J2170	J2778	J3304	J7181	J7203	J7326	J9019	J9057	J9203	J9264	J9325	Q3027	S0132

Medicaid only **Marketplace Only**

J9035: No PA required when associated with ocular Dx's. (See Dx Codes tab for related ICD9 & ICD10 Codes). *Not indicated for ocular conditions, use C5257.

Home Health Care Services

All home health services require PA after initial evaluation plus six (6) visits per calendar year, including home-based OT/PT & ST.

Please refer to Forward Health to determine if a code is covered for WI Medicaid

G0151	G0153	G0156	G0158	G0160	G0162	G0300	G0493	G0495	S9122	S9124	S9129	S5130	S5151	S9977	T1002	T1005	T1030	
G0152	G0155	G0157	G0159	G0161	G0299	G0490	G0494	G0496	S9123	S9128	S9131	S5135	S9470	T1000	T1003	T1022	T1031	T1019

Hyperbaric Therapy

99183	G0277	Q4176	Q4177	Q4178	Q4179	Q4180	Q4181	Q4182

Imaging and Special Tests

Please refer to Forward Health to determine if a code is covered for WI Medicaid

C8900	C8913	G0288	70486	70544	71250	72128	72149	72197	73223	73723	74182	75563	75571	76498	78453	78492	78814	0332T
C8901	C8914	G0297	70487	70545	71260	72129	72156	72198	73225	73725	74183	75565	75572	77046	78454	78494	78815	0399T
C8902	C8918	S8042	70488	70546	71270	72130	72157	73200	73700	74150	74185	75571	75573	77047	78459	78496	78816	0439T
C8903	C8919	S8080	70490	70547	71275	72131	72158	73201	73701	74160	74261	75572	75574	77048	78466	78607	76999	
C8905	C8920	70336	70491	70548	71550	72132	72159	73202	73702	74170	74262	75573	75635	77049	78468	78608	78499	
C8906	C8931	70450	70492	70549	71551	72133	72191	73206	73706	74174	74263	75574	76376	77084	78469	78609	G0235	
C8908	C8932	70460	70496	70551	71552	72141	72192	73218	73718	74175	74712	75635	76377	78205	78472	78647	93998	
C8909	C8933	70470	70498	70552	71555	72142	72193	73219	73719	74176	74713	76376	76380	78206	78473	78710	0042T	
C8910	C8934	70480	70540	70553	72125	72146	72194	73220	73720	74177	75557	76377	76390	78320	78481	78811	0174T	

Medicaid & Market Place Prior Auth (PA) Code Matrix

Effective Q3, 2019

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C8911	C8935	70481	70542	70554	72126	72147	72195	73221	73721	74178	75559	76380	76391	78451	78483	78812	0175T
C8912	C8936	70482	70543	70555	72127	72148	72196	73222	73722	74181	75561	75565	76497	78452	78491	78813	0331T

Long Term Services & Support [LTSS]

All LTSS Codes/Services Require Prior Authorization regardless of code(s).

Neuropsychological & Psychological Tests (in any setting)

Please refer to Forward Health to determine if a code is covered for WI Medicaid

95950	95953	95957	96112	96116	96125	96131	96133	96137	96139	97151	97153	97155	97157
95951	95956	96105	96113	96121	96130	96132	96136	96138	96146	97152	97154	97156	97158

Non-PAR Offices/Providers/Facilities

PA is waived for all radiology, anesthesiology, and pathology services when billed in POS 19, 21, 22, 23 or 24 *
PA is waived for professional component services or services billed with Modifier 26 in ANY place of service setting *
PA required for Office Visits, Surgical Procedures, Labs, Diagnostic Studies & In-patient stays, except for:

- **Emergency Department Services**
- **Professional fees associated with an Emergency Department visit and approved Ambulatory Surgery Center (ASC) or in-patient stay**
- **Local Health Department (LHD) services**
- **Other services based on State requirements**

Occupational Therapy

Medicaid - PA required after initial evaluation plus twenty four (24) visits per calendar year, for office and out-patient settings.
Medicaid-Home OT requires PA after intial ealuation plus six (6)
Marketplace - Configured to benefit cap (20 visits pre calendar Yr),
Marketplace- PA is required after initial evaluation and 12 visits for outpatient and home settings
Refer to FL, IL, NY, OH, PR, SC, TX, UT, WA & WI tabs/pages for PA exceptions or details.

97110	97112	97763

Medicaid & Market Place Prior Auth (PA) Code Matrix

Effective Q3, 2019

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Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures

Please refer to Forward Health to determine if a code is covered for WI Medicaid

10040	21154	22222	22808	23470	28092	28208	28300	29806	29893	33221	36465	38212	47382	58267	58572	59076	63046	64595	96920
15730	21155	22224	22810	25447	28100	28210	28302	29807	29894	33224	36466	38213	47605	58270	58573	61863	63047	64912	96921
15733	21159	22226	22812	26499	28102	28220	28304	29819	29895	33225	36468	38214	47610	58275	58660	61864	63048	64913	96922
15786	21160	22505	22818	27120	28103	28222	28305	29820	29897	33227	36470	38215	47612	58280	58661	61867	63050	65771	96931
15787	21172	22526	22819	27122	28104	28225	28306	29821	29898	33228	36471	38232	47620	58285	58662	61868	63051	65772	96932
15819	21175	22527	22830	27125	28106	28226	28307	29822	29899	33229	36475	38573	49255	58290	58672	61885	63055	65775	96933
15830	21240	22532	22840	27130	28107	28230	28308	29823	29914	33230	36476	43644	49904	58291	58673	61886	63056	67900	96934
17004	21242	22533	22841	27132	28108	28232	28309	29824	29915	33231	36478	43645	49905	58292	58700	62324	63057	67901	96935
17360	21243	22534	22842	27134	28110	28234	28310	29825	29916	33240	36479	43647	49906	58293	58720	62325	63064	67902	96936
19294	21270	22548	22843	27137	28111	28238	28312	29826	30465	33249	36482	43648	50590	58294	58740	62326	63066	67903	C2616
20930	21280	22551	22844	27138	28112	28240	28313	29827	30520	33262	36483	43653	52441	58321	58750	62327	63075	67909	C9734
20939	21282	22552	22845	27438	28113	28250	28315	29828	30540	33263	36514	43770	52442	58322	58752	62369	63076	67950	C9738
21073	21295	22554	22846	27440	28114	28260	28320	29873	30545	33264	37191	43771	52649	58323	58760	62370	63077	69714	C9739
21120	21296	22556	22847	27441	28116	28261	28322	29874	31253	33270	37243	43772	53850	58345	58770	62380	63078	69715	C9740
21121	22100	22558	22848	27442	28118	28262	28340	29875	31257	33251	37700	43773	53852	58350	58940	63001	63081	69717	C9746
21122	22101	22585	22849	27443	28119	28264	28341	29876	31259	33254	37718	43774	53854	58356	58943	63003	63082	69718	C9747
21123	22102	22586	22850	27445	28120	28270	28344	29877	31295	33261	37722	43775	54401	58540	58950	63005	63085	69930	C9748
21125	22103	22590	22852	27446	28122	28272	28345	29879	31296	33265	37735	43842	54405	58541	58951	63011	63086	95249	S2095
21127	22110	22595	22855	27447	28124	28280	28360	29880	31297	33266	37760	43843	55874	58542	58952	63012	63087	93229	
21137	22112	22600	22856	27486	28126	28285	28705	29881	31298	33289	37761	43845	57288	58543	58953	63015	63088	96567	
21138	22114	22610	22857	27487	28130	28286	28715	29882	31660	33274	37765	43846	57289	58544	58954	63016	63090	96570	
21139	22116	22612	22861	28005	28140	28288	28725	29883	31661	33275	37766	43847	58150	58545	58956	63017	63091	96571	
21141	22206	22614	22862	28008	28150	28289	28730	29884	32491	33285	37780	43848	58180	58546	58957	63020	63101	96573	
21142	22207	22630	22864	28010	28153	28291	28735	29885	32994	33286	37785	43881	58152	58548	58958	63030	63102	96574	

Medicaid & Market Place Prior Auth (PA) Code Matrix

Effective Q3, 2019

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21143	22208	22632	22865	28011	28160	28292	28737	29886	33206	33979	38204	43882	58200	58550	58970	63035	63103	96900
21145	22210	22633	22867	28035	28171	28295	28740	29887	33207	34713	38207	43886	58210	58552	58974	63040	64553	96902
21146	22212	22634	22868	28060	28173	28296	28750	29888	33208	34714	38208	43887	58240	58553	58976	63042	64568	96904
21147	22214	22800	22869	28062	28175	28297	28755	29889	33212	34715	38209	43888	58260	58554	59070	63043	64569	96910
21150	22216	22802	22870	28080	28200	28298	28760	29891	33213	34716	38210	47380	58262	58570	59072	63044	64570	96912
21151	22220	22804	23412	28090	28202	28299	28890	29892	33214	36460	38211	47381	58263	58571	59074	63045	64590	96913

Pain Management Procedures

Please refer to Forward Health to determine if a code is covered for WI Medicaid

27096	62264	62322	62323	62362	63650	63662	63685	64462	64480	64486	64489	64492	64495	64634	64640	97811	G0260	
27279	62320	62350	62360	62367	63655	63663	63688	64463	64483	64487	64490	64493	64600	64635	77003	97813	S8930	
62263	62321	62351	62361	62368	63661	63664	64461	64479	64484	64488	64491	64494	64633	64636	97810	97814		

Physical Therapy

Medicaid - PA required after initial evaluation plus twenty four (24) visits per calendar year, for office and out-patient settings.
Medicaid-Home PT requires PA after intial evaluation plus six (6)
Marketplace - Configured to benefit cap (20 visits pre calendar Yr),
Marketplace- PA is required after initial evaluation and 12 visits for outpatient and home settings

Refer to FL, IL, NY, OH, PR, SC, TX, UT, WA, WI, IL tabs/pages for PA exceptions or details.

97110	97112	97763

Prosthetics & Orthotics

Please refer to Forward Health to determine if a code is covered for WI Medicaid

L0452	L0486	L0650	L1005	L1685	L1720	L1834	L1846	L1904	L1940	L1960	L1990	L2010	L2034	L2038	L2080	L2108	L2232	L5856	L8614
L0480	L0622	L0700	L1110	L1700	L1730	L1840	L1860	L1907	L1945	L1970	L2000	L2020	L2036	L2050	L2090	L2126	L2800	L6026	L8692
L0482	L0637	L0710	L1640	L1710	L1755	L1844	L1900	L1920	L1950	L1980	L2005	L2030	L2037	L2060	L2106	L2128	L4631	L7259	S1040
L0484	L0640	L1000	L1680															

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Radiation Therapy & Radio Surgery

77520	77522	77523	77525	81503	81479	81599	A9543	A9513	C9408	G0339	G0340	G6015	G6016	G6017	Q9950	

Sleep Studies

Home Sleep Studies [POS12] Do Not Require PA

95800	95801	95803	95805	95806	95807	95808	95810	95811

Speech Therapy

Medicaid - PA required after initial evaluation plus six (6) visits for office and out-patient settings.
Medicaid-Home ST requires PA after intial evaluation plus six (6)
Marketplace - Configured to benefit cap (20 visits pre calendar Yr),
Marketplace- PA is required after initial evaluation and 6 visits for outpatient and home settings
Please refer to Forward Health to determine if a code is covered for WI Medicaid

92507	92508

Transplant Services (Including Solid Organ and Bone Marrow)

Corneal Transplants do not require PA.
Please refer to Forward Health to determine if a code is covered for WI Medicaid

38205	38240	38243	44721	47140	47143	47146	48550	48554	50320	50327	50340	50370	S2054	S2061	S2140	S2152
38206	38241	44715	47133	47141	47144	47147	48551	48556	50323	50328	50360	50380	S2055	S2065	S2142	Q2041
38230	38242	44720	47135	47142	47145	48160	48552	50300	50325	50329	50365	S2053	S2060	S2107	S2150	Q2042

Transportation Services

PA required for Non-Emergent Air Ambulance transportation services. Emergency transport does not require PA.
Refer to PR & TX tabs/pages PA for exceptions.

A0430	A0431	S9960	S9961

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Unlisted/Miscellaneous Codes

Molina requires PA, as well as medical necessity documentation and rationale be submitted with the PA request for all Unlisted/Miscellaneous codes*

Please refer to Forward Health to determine if a code is covered for WI Medicaid

01999	23929	31599	39599	44238	47999	55899	66999	76496	78699	87798	90399	96549	A4641	C2698	J7999	L5999	Q0508	T2025
15999	24999	31899	40799	44799	48999	58578	67299	76499	78799	87799	90749	96999	A4649	C2699	J8498	L7499	Q0509	T5999

Cosmetic/Reconstructive Procedures

No PA required when associated with Breast CA Dx codes listed below

ICD-10	Medicaid	Marketplace
C50.011	N	N
C50.012	N	N
C50.019	N	N
C50.021	N	N
C50.022	N	N
C50.029	N	N
C50.111	N	N
C50.112	N	N
C50.119	N	N
C50.121	N	N
C50.122	N	N
C50.129	N	N
C50.211	N	N
C50.212	N	N
C50.219	N	N
C50.221	N	N
C50.222	N	N
C50.229	N	N
C50.311	N	N
C50.312	N	N
C50.319	N	N
C50.321	N	N
C50.322	N	N
C50.329	N	N
C50.411	N	N
C50.412	N	N
C50.419	N	N
C50.421	N	N
C50.422	N	N
C50.429	N	N
C50.511	N	N
C50.512	N	N
C50.519	N	N
C50.521	N	N
C50.522	N	N
C50.529	N	N
C50.611	N	N
C50.612	N	N
C50.619	N	N
C50.621	N	N
C50.622	N	N
C50.629	N	N
C50.811	N	N
C50.812	N	N
C50.819	N	N
C50.821	N	N
C50.822	N	N
C50.829	N	N
C50.911	N	N
C50.912	N	N
C50.919	N	N
C50.921	N	N
C50.922	N	N
C50.929	N	N
D05.01	N	N
D05.02	N	N
D05.10	N	N

C9257 & J9035 Dx Related Codes

No PA Required when associated with Ocular Dx's codes listed below

ICD-9	ICD-10	Medicaid	Marketplace
115.02	B39.4	N	N
115.12	B39.5	N	N
115.92	B39.9	N	N
360.21	E08.311	N	N
362.36	E08.319	N	N
362.30	E08.3211	N	N
362.35	E08.3212	N	N
364.42	E08.3213	N	N
362.52	E08.3219	N	N
362.53	E08.3311	N	N
362.15	E08.3312	N	N
362.01-362.07	E08.3313	N	N
362.16	E08.3319	N	N
362.25-362.27	E08.3411	N	N
362.29	E08.3412	N	N
362.83	E08.3413	N	N
362.84	E08.3419	N	N
363.43	E08.3491	N	N
365.63	E08.3492	N	N
365.89	E08.3493	N	N
	E08.3499	N	N
	E08.3511	N	N
	E08.3512	N	N
	E08.3513	N	N
	E08.3519	N	N
	E08.3521	N	N
	E08.3522	N	N
	E08.3523	N	N
	E08.3529	N	N
	E08.3531	N	N
	E08.3532	N	N
	E08.3533	N	N
	E08.3539	N	N
	E08.3541	N	N
	E08.3542	N	N
	E08.3543	N	N
	E08.3549	N	N
	E08.3551	N	N
	E08.3552	N	N
	E08.3553	N	N
	E08.3559	N	N
	E08.3591	N	N
	E08.3592	N	N
	E08.3593	N	N
	E08.3599	N	N
	E09.311	N	N
	E09.319	N	N
	E09.3211	N	N
	E09.3212	N	N
	E09.3213	N	N
	E09.3219	N	N
	E09.3311	N	N
	E09.3312	N	N
	E09.3313	N	N
	E09.3319	N	N
	E09.3411	N	N
	E09.3412	N	N

Autism Dx Related Codes

PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix

ICD-9	ICD-10	Medicaid	Marketplace
	F84.0	Y	Y
	F84.2	Y	Y
	F84.3	Y	Y
	F84.5	Y	Y
	F84.8	Y	Y
	F84.9	Y	Y
299.00		Y	Y
299.01		Y	Y
299.10		Y	Y
299.11		Y	Y
299.80		Y	Y
299.81		Y	Y
299.90		Y	Y
299.91		Y	Y

Cosmetic/Reconstructive Procedures

No PA required when associated with Breast CA Dx codes listed below

ICD-10	Medicaid	Marketplace
D05.11	N	N
D05.12	N	N
D05.80	N	N
D05.81	N	N
D05.90	N	N
D05.91	N	N
D05.92	N	N
DO5.00	N	N
DO5.82	N	N
Z85.3	N	N

C9257 & J9035 Dx Related Codes

No PA Required when associated with Ocular Dx's codes listed below

ICD-9	ICD-10	Medicaid	Marketplace
	E09.3413	N	N
	E09.3419	N	N
	E09.3491	N	N
	E09.3492	N	N
	E09.3493	N	N
	E09.3499	N	N
	E09.3511	N	N
	E09.3512	N	N
	E09.3513	N	N
	E09.3519	N	N
	E09.3521	N	N
	E09.3522	N	N
	E09.3523	N	N
	E09.3529	N	N
	E09.3531	N	N
	E09.3532	N	N
	E09.3533	N	N
	E09.3539	N	N
	E09.3541	N	N
	E09.3542	N	N
	E09.3543	N	N
	E09.3549	N	N
	E09.3551	N	N
	E09.3552	N	N
	E09.3553	N	N
	E09.3559	N	N
	E09.3591	N	N
	E09.3592	N	N
	E09.3593	N	N
	E09.3599	N	N
	E10.311	N	N
	E10.319	N	N
	E10.3211	N	N
	E10.3212	N	N
	E10.3213	N	N
	E10.3219	N	N
	E10.3311	N	N
	E10.3312	N	N
	E10.3313	N	N
	E10.3319	N	N
	E10.3411	N	N
	E10.3412	N	N
	E10.3413	N	N
	E10.3419	N	N
	E10.3491	N	N
	E10.3492	N	N
	E10.3493	N	N
	E10.3499	N	N
	E10.3511	N	N
	E10.3512	N	N
	E10.3513	N	N
	E10.3519	N	N
	E10.3521	N	N
	E10.3522	N	N
	E10.3523	N	N
	E10.3529	N	N
	E10.3531	N	N

Autism Dx Related Codes

PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix

ICD-9	ICD-10	Medicaid	Marketplace

Cosmetic/Reconstructive Procedures			C9257 & J9035 Dx Related Codes				Autism Dx Related Codes			
No PA required when associated with Breast CA Dx codes listed below			No PA Required when associated with Ocular Dx's codes listed below				PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix			
ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace
				E10.3532	N	N				
				E10.3533	N	N				
				E10.3539	N	N				
				E10.3541	N	N				
				E10.3542	N	N				
				E10.3543	N	N				
				E10.3549	N	N				
				E10.3551	N	N				
				E10.3552	N	N				
				E10.3553	N	N				
				E10.3559	N	N				
				E10.3591	N	N				
				E10.3592	N	N				
				E10.3593	N	N				
				E10.3599	N	N				
				E11.311	N	N				
				E11.319	N	N				
				E11.3211	N	N				
				E11.3212	N	N				
				E11.3213	N	N				
				E11.3219	N	N				
				E11.3311	N	N				
				E11.3312	N	N				
				E11.3313	N	N				
				E11.3319	N	N				
				E11.3391	N	N				
				E11.3392	N	N				
				E11.3393	N	N				
				E11.3399	N	N				
				E11.3411	N	N				
				E11.3412	N	N				
				E11.3413	N	N				
				E11.3419	N	N				
				E11.3491	N	N				
				E11.3492	N	N				
				E11.3493	N	N				
				E11.3499	N	N				
				E11.3511	N	N				
				E11.3512	N	N				
				E11.3513	N	N				
				E11.3519	N	N				
				E11.3521	N	N				
				E11.3522	N	N				
				E11.3523	N	N				
				E11.3529	N	N				
				E11.3531	N	N				
				E11.3532	N	N				
				E11.3533	N	N				
				E11.3539	N	N				
				E11.3541	N	N				
				E11.3542	N	N				
				E11.3543	N	N				
				E11.3549	N	N				
				E11.3551	N	N				
				E11.3552	N	N				
				E11.3553	N	N				
				E11.3559	N	N				

Cosmetic/Reconstructive Procedures			C9257 & J9035 Dx Related Codes				Autism Dx Related Codes			
No PA required when associated with Breast CA Dx codes listed below			No PA Required when associated with Ocular Dx's codes listed below				PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix			
ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace
				E11.3591	N	N				
				E11.3592	N	N				
				E11.3593	N	N				
				E11.3599	N	N				
				E13.311	N	N				
				E13.319	N	N				
				E13.3211	N	N				
				E13.3212	N	N				
				E13.3213	N	N				
				E13.3219	N	N				
				E13.3311	N	N				
				E13.3312	N	N				
				E13.3313	N	N				
				E13.3319	N	N				
				E13.3411	N	N				
				E13.3412	N	N				
				E13.3413	N	N				
				E13.3419	N	N				
				E13.3491	N	N				
				E13.3492	N	N				
				E13.3493	N	N				
				E13.3499	N	N				
				E13.3511	N	N				
				E13.3512	N	N				
				E13.3513	N	N				
				E13.3519	N	N				
				E13.3521	N	N				
				E13.3522	N	N				
				E13.3523	N	N				
				E13.3529	N	N				
				E13.3531	N	N				
				E13.3532	N	N				
				E13.3533	N	N				
				E13.3539	N	N				
				E13.3541	N	N				
				E13.3542	N	N				
				E13.3543	N	N				
				E13.3549	N	N				
				E13.3551	N	N				
				E13.3552	N	N				
				E13.3553	N	N				
				E13.3559	N	N				
				E13.3591	N	N				
				E13.3592	N	N				
				E13.3593	N	N				
				E13.3599	N	N				
				H21.1X1	N	N				
				H21.1X2	N	N				
				H21.1X3	N	N				
				H21.1X9	N	N				
				H32	N	N				
				H34.8110	N	N				
				H34.8111	N	N				
				H34.8112	N	N				
				H34.8120	N	N				
				H34.8121	N	N				
				H34.8122	N	N				

Cosmetic/Reconstructive Procedures			C9257 & J9035 Dx Related Codes				Autism Dx Related Codes			
No PA required when associated with Breast CA Dx codes listed below			No PA Required when associated with Ocular Dx's codes listed below				PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix			
ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace
				H34.8130	N	N				
				H34.8131	N	N				
				H34.8132	N	N				
				H34.8190	N	N				
				H34.8191	N	N				
				H34.8192	N	N				
				H34.821	N	N				
				H34.822	N	N				
				H34.823	N	N				
				H34.829	N	N				
				H34.8310	N	N				
				H34.8311	N	N				
				H34.8312	N	N				
				H34.8320	N	N				
				H34.8321	N	N				
				H34.8322	N	N				
				H34.8330	N	N				
				H34.8331	N	N				
				H34.8332	N	N				
				H34.8390	N	N				
				H34.8391	N	N				
				H34.8392	N	N				
				H34.9	N	N				
				H35.00	N	N				
				H35.011	N	N				
				H35.012	N	N				
				H35.013	N	N				
				H35.019	N	N				
				H35.021	N	N				
				H35.022	N	N				
				H35.023	N	N				
				H35.029	N	N				
				H35.031	N	N				
				H35.032	N	N				
				H35.033	N	N				
				H35.039	N	N				
				H35.041	N	N				
				H35.042	N	N				
				H35.043	N	N				
				H35.049	N	N				
				H35.051	N	N				
				H35.052	N	N				
				H35.053	N	N				
				H35.059	N	N				
				H35.061	N	N				
				H35.062	N	N				
				H35.063	N	N				
				H35.069	N	N				
				H35.071	N	N				
				H35.072	N	N				
				H35.073	N	N				
				H35.079	N	N				
				H35.09	N	N				
				H35.141	N	N				
				H35.142	N	N				
				H35.143	N	N				
				H35.149	N	N				

Cosmetic/Reconstructive Procedures			C9257 & J9035 Dx Related Codes				Autism Dx Related Codes			
No PA required when associated with Breast CA Dx codes listed below			No PA Required when associated with Ocular Dx's codes listed below				PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix			
ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace
				H35.151	N	N				
				H35.152	N	N				
				H35.153	N	N				
				H35.159	N	N				
				H35.161	N	N				
				H35.162	N	N				
				H35.163	N	N				
				H35.169	N	N				
				H35.20	N	N				
				H35.21	N	N				
				H35.22	N	N				
				H35.23	N	N				
				H35.3210	N	N				
				H35.3211	N	N				
				H35.3212	N	N				
				H35.3213	N	N				
				H35.3220	N	N				
				H35.3221	N	N				
				H35.3222	N	N				
				H35.3223	N	N				
				H35.3230	N	N				
				H35.3231	N	N				
				H35.3232	N	N				
				H35.3233	N	N				
				H35.3290	N	N				
				H35.3291	N	N				
				H35.3292	N	N				
				H35.3293	N	N				
				H35.33	N	N				
				H35.351	N	N				
				H35.352	N	N				
				H35.353	N	N				
				H35.359	N	N				
				H35.81	N	N				
				H35.82	N	N				
				H40.50X0	N	N				
				H40.50X1	N	N				
				H40.50X2	N	N				
				H40.50X3	N	N				
				H40.50X4	N	N				
				H40.51X0	N	N				
				H40.51X1	N	N				
				H40.51X2	N	N				
				H40.51X3	N	N				
				H40.51X4	N	N				
				H40.52X0	N	N				
				H40.52X1	N	N				
				H40.52X2	N	N				
				H40.52X3	N	N				
				H40.52X4	N	N				
				H40.53X0	N	N				
				H40.53X1	N	N				
				H40.53X2	N	N				
				H40.53X3	N	N				
				H40.53X4	N	N				
				H40.89	N	N				
				H44.20	N	N				

Cosmetic/Reconstructive Procedures			C9257 & J9035 Dx Related Codes				Autism Dx Related Codes			
No PA required when associated with Breast CA Dx codes listed below			No PA Required when associated with Ocular Dx's codes listed below				PA Required when submitted with highlighted codes on Medicaid/Marketplace Matrix			
ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace	ICD-9	ICD-10	Medicaid	Marketplace
				H44.21	N	N				
				H44.22	N	N				
				H44.23	N	N				

MOLINA HEALTHCARE
Your Extended Family.

2019 MHI PA Matrix Updates Log

2019 Q3 Updates

RECEIPT	RECEIVED	EFFECTIVE	SERVICE CATEGORY	UPDATE TYPE	CODES	HEALTH PLANS	LOB(S)	NOTES
Ad Hoc	3/25/2019	7/1/2019	Genetic Counseling & Testing	Removal of Codes/no PA required	86008	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	**SC, WI** previously removed
Ad Hoc (287)	3/27/2019	7/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Update PA	H0012, S5150	All Plans	Medicaid, Marketplace	Remove autism diagnosis, PA required regardless of diagnosis **PR** - both codes no fee rate, no PA for both codes for Medicaid **IL** - both codes not covered benefit, no PA for Medicaid and MMP Medicaid **NY** - H0012 not covered benefit, no PA for Medicaid **OH** - H0012 no PA for Marketpace and Medicaid **WI** - both codes not covered no PA for Medicaid
Ad Hoc (287)	3/27/2019	7/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Update PA	**ICD 9:** 299.00, 299.01, 299.10, 299.11, 299.80, 299.81, 299.90, 299.91 **ICD 10:** F84.0, F84.2, F84.3, F84.5, F84.8, F84.9	All Plans	Medicaid, Marketplace	Update autism diagnosis list
Claims	4/22/2019	7/1/2019	N/A	Update PA	N/A	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Update PA Matrix top disclaimers to clarify requirements for Par and Non Par Providers: "Any exceptions included in this Prior Authorization Code Matrix document apply to PAR Providers only. All Non-Par Providers require authorization regardless of services or codes (for any exceptions, refer to Non Par section below)."
Claims	4/22/2019	7/1/2019	N/A	Update PA	N/A	All Plans	Medicaid, MMP Medicaid, Marketplace	Update PA Matrix top disclaimers to clarify requirements for Par and Non Par Providers: "No PA Required for Emergency Room Services for Par or Non Par providers."
Claims	4/22/2019	7/1/2019	N/A	Update PA	N/A	All Plans	MMP Medicare, MMOP, MMCP	Update PA Matrix top disclaimers to clarify requirements for Par and Non Par Providers: "No PA Required for Emergency Services for Par or Non Par providers."
N/A	6/3/2019	7/1/2019	Imaging - Advanced & Specialty	Update PA	N/A	All Plans	All LOBs	Renaming "Imaging - Advanced & Specialty" to "Imaging and Special Tests"
MHI Q3 list	3/16/2019	7/1/2019	Durable Medical Equipment	Addition of Codes/PA required	A5514, A6460, A6461, E0447, V5171^, V5172^, V5181^, V5211^, V5212^, V5213^, V5214^, V5215^, V5221^	All Plans	Medicaid, MMP Medicaid, Marketplace	New code **OH** - A6460, A6461 no PA for Medicaid and Marketplace, all other codes accept PA (#284) **NY** - all codes not covered benefit, no PA required **SC** - ^age <21 require PA and age >21 is not a covered service no PA for Medicaid **TX and NM** - only accept A5514 for Medicaid, MMP Medicaid, Marketplace, all other codes no PA for Medicaid, MMP Medicaid, Marketplace **WI** - A6460, A6461, V5214, V5215 exception as not covered/no PA for Medicaid **CA** - A5514, A6460, A6461, E0447 not covered/no PA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Durable Medical Equipment	Addition of Codes/PA required	E0467", Q4183", Q4184", Q4185", Q4186, Q4187, Q4188", Q4190", Q4191", Q4193", Q4194", Q4198", Q4200", Q4201", Q4202", Q4203", Q4204"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **NY** - all codes not covered benefit, no PA required **WI** - "exception as not covered/no PA for Medicaid **CA** - E0467 not covered/no PA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Experimental/Investigational	Addition of Codes/PA required	0446T, 0447T, 0448T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	**PR** - all cocdes to configure as Non-Covered benefits but still requires PA for Medicaid **NY** - all codes not covered/no PA for Medicaid **WI** - all codes not covered/no PA for Medicaid **CA** - all codes not covered/noPA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Experimental/Investigational	Addition of Codes/PA required	0537T, 0538T, 0539T	All Plans	Marketplace, (Medicaid - see comments)	**NY** - all codes not covered, no PA for Medicaid **WI** - all codes not covered/no PA for Medicaid **CA** - all codes not covered/no PA for Medicaid (Codes previously listed on Q2 2019 update log, all previous exceptions continue to apply)
MHI Q3 list	3/16/2019	7/1/2019	Experimental/Investigational	Addition of Codes/PA required	33440, 33866, 93264, 95836, 95976, 95977, 95983, 0525T", A4563", C1823", C8937", C9751", C9752", C9753", C9754", C9755", L8608", Q4189", Q4192", Q4195", Q4196", Q4197"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **PR** - all cocdes to configure as Non-Covered benefits but still requires PA for Medicaid **NY** - all codes not covered benefit, no PA required **WI** - "not covered/no PA for Medicaid **MI** - A4563, Q4189, Q4192, Q4195, Q4196, Q4197 not covered/no PA for Medicaid & Marketplace **CA** - 0525T, A4563, C8937 not covered/no PA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Genetic Counseling & Testing	Addition of Codes/PA required	81167, 81171", 81172", 81173, 81174, 81177, 81178, 81179, 81180, 81181, 81182, 81183, 81184, 81185, 81186, 81187, 81188, 81189, 81190, 81204, 81233, 81234, 81236", 81237", 81239, 81271, 81274, 81284, 81285, 81286, 81289, 81305, 81306", 81312, 81320", 81329, 81333", 81336, 81337, 81343", 81344", 81345", 81443", 81518, 81596"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **NY** - all codes not covered benefit, no PA required **WA** - 81167 previously configured effective 1/1/19 **WI** - " not covered/no PA for Medicaid **MI** - 81443 not covered/no PA for Medicaid & Marketplace **CA** - 81333, 81443 not covered/no PA for Medicaid

MHI Q3 list	3/16/2019	7/1/2019	Imaging and Specialty Tests	Addition of Codes/PA required	76391	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **NY** - all codes not covered benefit, no PA required
MHI Q3 list	3/16/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Addition of Codes/PA required	33979	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	
MHI Q3 list	3/16/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Addition of Codes/PA required	33274, 33275, 33285, 33286, 53854	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **OH** - 33285, 33286 no PA in ambulatory center setting for Medicaid and Marketplace, all other codes accept PA (#284) **NY** - 33274, 33275, 53854 not covered benefit, no PA required **SC** - 33275, 33286 no PA for Medicaid and MMP **WI** - 33274, 33285, 53854 not covered/no PA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Unlisted/Miscellaneous Codes	Addition of Codes/PA required	L8698, L8701, L8702	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New code **NY** - all codes not covered benefit, no PA required **WI** - L8701, L8702 not covered/no PA for Medicaid **MI** - L8701, L8702 not covered/no PA for Medicaid & Marketplace **CA** - all codes not covered/no PA for Medicaid
MHI Q3 list	3/16/2019	7/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal of Codes/no PA required	96127	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	MI previously removed 1/1/19; OH, IL, WA previously removed 4/1/19
MHI Q3 list	3/16/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Removal of Codes/no PA required	95911, 95912, 95913	All Plans	Medicare, MMP Medicare, MMOP, MMCP	Codes historically removed from Medicaid and Marketplace lines. **MI** - removed 4/1/19 (#275) **PR** - require PA due to contractual obligation for Medicaid
MHI Q3 list (292)	3/16/2019	7/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Removal of Codes/no PA required	96110	All Plans	Medicaid; Marketplace	MI, WA, NY previously removed 1/1/19; IL, TX, OH previously removed 4/1/19
N/A	4/1/2019	7/1/2019	Neuropsychological and Psychological testing	Update PA	97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	97151-97158 will be re-categorized under "Neuropsychological and Psychological testing" and removed from "Experimental Investigational" and "Behavior Health, Mental Health, Alcohol and Chemical Dependency" categories. (WA updated 4/30/2019 per OIC)
N/A	5/1/2019	7/1/2019	Healthcare Administered Drug	Addition of Codes/PA required	Q5112, Q5113, J7208, Q5114, J7677, Q5115, J9036, J9030, J9356, C9040, C9043, C9044, C9045, C9141, C9047, C9048, C9049, C9050, C9051, C9052	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	C9141 will be J7208 effective 7/1/2019
290	3/29/2019	7/1/2019	Durable Medical Equipment	Addition of Codes/PA required	V5010, V5014, V5050, V5060,V5090, V5130, V5140, V5160, V5180, V5264	FL	Medicaid	
298	4/29/2019	7/1/2019	Durable Medical Equipment	Removal of Codes/no PA required	B4160	FL	Medicaid	
274	2/14/2019	7/1/2019	Pain Management	Addition of Codes/PA required	64450	IL	Medicaid; MMP Medicare; MMP Medicaid	
285	3/27/2019	7/1/2019	Genetic Counseling & Testing	Addition of Codes/PA required	81221	IL	Medicaid; MMP Medicare; MMP Medicaid	
283	3/24/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Addition of Codes/PA required	T1019, 29805	NY	Medicaid	
288	3/28/2019	7/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Update PA	H0038	NY	Medicaid	Add disclaimer to this code "Effective 7/1/2019, implementation of Family Peer Support Services (FPSS) are carved into managed care. MMCPs are restricted from conducting utilization management on FPSS for 180 days (from 7/1/2019 to 12/31/2019) for all MMCP enrolled members receiving these services"
284	3/26/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Removal of Codes/no PA required	A6460, A6461, 33285, 33286	OH	Medicaid; Marketplace	
300	4/29/2019	7/1/2019	Sleep Studies	Addition of Codes/PA required	95800, 98511, 95810	OH	Medicaid; Marketplace	* Home Sleep Studies are not covered. (Config team - refer to comment for process)
301	4/29/2019	7/1/2019	Home Healthcare Services	Addition of Codes/PA required	G0155, G0299	OH	Medicaid	* Hospice does not require PA. (Config team - refer to comment for process).
Q3 Review	3/20/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Addition of Codes/PA required	95905, 95909	PR	Medicaid	require PA due to contractual obligation for Medicaid
291	4/2/2019	7/1/2019	Genetic Counseling & Testing	Addition of Codes/PA required	81205	TX, NM	Medicaid, Marketplace	
N/A	6/3/2019	7/1/2019	Unlisted/miscellaneous	PA Update	22899, 31299, 67299, 99499	All Plans	All LOBs	continue with PA Required under "Unlisted/Miscellaneous" section, remove duplication from "Experimental/Investigational" section
N/A	6/3/2019	7/1/2019	Imaging and Specialty Tests	PA Update	76497, 76498	All Plans	All LOBs	continue with PA Required under "Imaging and Specialty Tests" section, remove duplication from "Unlisted/Miscellaneous" section
N/A	6/3/2019	7/1/2019	Genetics Counseling and Testings	PA Update	84999	All Plans	All LOBs	continue with PA Required under "Genetics Counseling & Testing" section, remove duplication from "Unlisted/Miscellaneous" section
N/A	6/3/2019	7/1/2019	Unlisted/miscellaneous	PA Update	A0999	All Plans	All LOBs	continue with PA Required under "Unlisted/Miscellaneous" section, remove duplication from "Transportation" section
N/A	6/3/2019	7/1/2019	Unlisted/miscellaneous	PA Update	A9900, E1399	All Plans	All LOBs	continue with PA Required under "Unlisted/Miscellaneous" section, remove duplication from "DME" section

N/A	6/3/2019	7/1/2019	Experimental/Investigational	PA Update	0505T, 0506T, 0507T, 0508T	All Plans	Medicare, MMP Medicare, MMOP, MMCP	continue with PA Required under "Experimental/Investigational", remove duplication from "Genetic Counselint & Testing" section
N/A	6/3/2019	7/1/2019	Behavioral Health, Mental Health, Chemical and Alcohol Dependency	PA Update	90867, 90868, 90869	All Plans	Medicaid, Marketplace	continue with PA required under "Behavioral Health, Mental Health, Chemical & Alcohol Depencency" section, remove duplication from "Outpatient Hospital/ASC Setting" section
N/A	6/3/2019	7/1/2019	Genetic Counseling and Testing	PA Update	S3870	All Plans	Medicaid, Marketplace	continue with PA required under "Genetic Counseling & Testing", remove duplication from "Unlisted/Miscellaneous" section
N/A	6/3/2019	7/1/2019	Behavioral Health, Mental Health, Chemical and Alcohol Dependency	PA Update	H0046	All Plans	Medicaid, Marketplace	continue with PA Required under "Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services" section, remove duplication from "Unlisted/Miscellaneous" section
N/A	6/3/2019	7/1/2019	Healthcare Administered Drug	PA Update	J9999	All Plans	All LOBs	continue with PA Required under "Healthcare Administered Drug" section, remove duplication from "Unlisted/Miscellaneous" section
N/A	6/3/2019	7/1/2019	Imaging and Specialty Tests	PA Update	76999, 78499, G0235	All Plans	All LOBs	recategorize from "Unlisted/Miscellaneous" to "Imaging and Specialty Tests"
N/A	6/3/2019	7/1/2019	Radiation Therapy and Radiosurgery	PA Update	81599, 81479	All Plans	All LOBs	recategorize from "Unlisted/Miscellaneous" to "Radiation Therapy and Radiosurgery"
N/A	6/3/2019	7/1/2019	Imaging and Specialty Tests	PA Update	93998, 0174T, 0175T, 0399T, 0439T	All Plans	All LOBs	recategorize from "Experimental/Investigational" to "Imaging and Special Tests"
N/A	6/3/2019	7/1/2019	Imaging and Specialty Tests	PA Update	0042T, 0331T, 0332T	All Plans	Medicaid, Marketplace	recategorize from "Experimental/Investigational" to "Imaging and Special Tests"
N/A	6/3/2019	7/1/2019	Radiation Therapy and Radiosurgery	PA Update	A9543, A9513	All Plans	All LOBs	recategorize from "Healthcare Adminsitered Drug" to "Radiation Therapy and Radiosurgery"
N/A	6/3/2019	7/1/2019	Radiation Therapy and Radiosurgery	PA Update	C9408	All Plans	Medicaid, Marketplace	recategorize from "Healthcare Adminsitered Drug" to "Radiation Therapy and Radiosurgery"
N/A	6/3/2019	7/1/2019	Healthcare Administered Drug	PA Update	J8499, J8999	All Plans	All LOBs	recategorize from "Unlisted/Miscellaneous" to "Healthcare Administered Drug"
N/A	6/3/2019	7/1/2019	Radiation Therapy and Radiosurgery	PA Update	81503	All Plans	All LOBs	recategorize from "Experimental/Investigational" to "Radiation Therapy and Radiosurgery"
N/A	5/14/2019	6/30/2019	Behavioral Health, Mental Health, Chemical and Alcohol Dependency	PA Update	99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99342, 99343, 99344, 99345, 99348, 99349, 99350, 0900, 0901, 0905, 0912, 0913	PR	Medicaid	PA required only for BH PHP, BH IOP, ECT, BH Home bound visits. Also add above statement to MHPR disclaimer with new ASES regulation.
N/A	5/14/2019	6/30/2019	Sleep Studies	PA Update	see comment	PR	Medicaid	Add disclaimer "NC benefit, every home care services require PA including sleep studies" with new ASES regulation
N/A	5/14/2019	6/30/2019	Multiple categories	PA Update	see comment	PR	Medicaid	Add disclaimer "Pathological & Clinical labs processed outside of Puerto Rico : Prior authorization required" and "Cardiovascular Procedures with any instrumental or artificial device : Prior authorization required" with new ASES regulation
N/A	5/14/2019	6/30/2019	Multiple categories	Addition of Codes/PA required	11951, 11952, 19105, 19303, 19304, 19305, 19306, 19307, 22853, 22854, 22859, 29799, 31241, 33282, 33284, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 37220, 37221, 37222, 37223, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 37232, 37233, 37234, 37235, 37246, 37247, 37248, 37249, 43286, 43287, 43288, 47562, 47600, 52356, 54400, 54406, 54408, 54410, 54415, 54416, 54417, 59050, 59051, 59840, 59841, 59850, 59851	PR	Medicaid	Benefit PA manteinance activity includes 5144 codes. CIM please refer to comment. Update accordign to new ASES regulation.
303	5/22/2019	7/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal of Codes/no PA required	97151	SC	Medicaid	
303	5/22/2019	7/1/2019	Out-Patient (OP) Hospital/Ambulatory Surgery Center (ASC) Procedures	Removal of Codes/no PA required	50590	SC	Medicaid, MMP	
303	5/22/2019	7/1/2019	Pain Management	Removal of Codes/no PA required	64488	SC	Medicaid, MMP	
N/A	6/7/2019	2/1/2019	Miscellanous/Unlisted	Removal of Codes/no PA required	93224	PR	Medicaid	CIM see comment
302, 304, 305, 308, 310 - pend PAGC review								

2019 Q2 Updates

RECEIPT	RECEIVED	EFFECTIVE	SERVICE CATEGORY	UPDATE TYPE	CODES	HEALTH PLANS	LOB(S)	NOTES
N/A	12/13/2018	4/1/2019	Durable Medical Equipment	Added/PA Required	K0013	All Plans	Medicare, MMP Medicare, MMOP, MMCP	
267 / Ad Hoc	1/15/2019	4/1/2019	Experimental Investigational	Added/PA Required	81503	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Originally requested by MI **IL -** effective 7/1/2019 **MI -** non-covered benefit for Medicaid; accepts for Marketplace and Medicare **NY -** non-covered benefit for Medicaid **WA -** non-covered benefit for Medicaid; accepts Marketplace and Medicare effective 7/1/2019 **WI** - non-covered benefit for Medicaid and no PA for all LOBs

MHI Q2	9/7/2018	4/1/2019	Experimental Investigational	Added/PA Required	0509T, 0510T, 0511T, 0512T, 0513T, 0514T, 0515T, 0516T, 0517T, 0518T, 0519T, 0520T, 0521T, 0522T, 0523T, 0524T, 0525T, 0526T, 0527T, 0528T, 0529T, 0530T, 0531T, 0532T, 0533T, 0534T, 0535T, 0536T, 0537T, 0538T, 0539T, 0540T, 0541T, 0542T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New Codes **IL** - 0539T, 0540T, 0541T, 0542T effective 7/1/2019, all other codes effective 4/1/2019 **NY** - all codes not accept per state fee schedule **WA** - **0537T, 0538T, 0539T** PA exception for Medicaid, effective 2/1/2019 to require PA for Marketplace (request #271); **0540T, 0541T** PA exception for Medicaid and Marketplace; all others accept effective 1/1/2019 for all lines
MHI Pharmacy	3/11/2019	4/1/2019	Healthcare Administered Drug	Added/PA Required	J3591	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New codes **IL** - effective 7/1/2019 for all lines **MI** - Medicaid and Marketplace effective 7/1/2019
266	1/11/2019	4/1/2019	Durable Medical Equipment	Removal/No PA Required	K0903	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Termed code (12/31/18)
MHI Pharmacy	3/11/2019	4/1/2019	Healthcare Administered Drug	Removal/No PA Required	J2430, J9060, J9100, J9181, J9209, J9370, J9351*	All Plans	Medicaid, Marketplace	*J9351 removed from Medicaid only
266	1/11/2019	4/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Removal/No PA Required	97762	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Termed code (12/31/17)
MHI Pharmacy	2/6/2019	4/1/2019	Healthcare Administered Drug	Update PA	N/A	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Pharmacy Drug Coverage Newly FDA approved medications such as "buy-and-bill" drugs are considered non-formulary and subject to non-formulary policies and other non-formulary utilization criteria until a coverage decision is rendered by the Molina Pharmacy and Therapeutics Committee. "Buy-and-bill" drugs are pharmaceuticals which a provider purchases and administers, and for which the provider submits a claim to Molina Healthcare for reimbursement. Many self-administered and office-administered injectable products require Prior Authorization (PA). In some cases they will be made available through Molina Healthcare's vendor, Caremark Specialty Pharmacy. Molina's pharmacy vendor will coordinate with MHC and ship the prescription directly to your office or the member's home. All packages are individually marked for each member, and refrigerated drugs are shipped in insulated packages with frozen gel packs. The service also offers the additional convenience of enclosing needed ancillary supplies (needles, syringes and alcohol swabs) with each prescription at no charge. Please contact your Provider Relations Representative with any further questions about the program.
MHI Pharmacy	12/17/2018	4/1/2019	Healthcare Administered Drug	Update PA	N/A	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Rename "Specialty Pharmacy Drug" service category into "Healthcare Administered Drug"
MHI Marketplace	2/27/2019	4/1/2019	N/A	Update PA	N/A	All Plans	Marketplace	Adding disclaimer to the top red general statement section "Marketplace: Most gene therapy is not covered. Molina covers limited gene therapy services in accordance with our medical policies, subject to Prior Authorization"
N/A	1/18/2019	4/1/2019	Pain Management Procedures	Update PA	N/A	All Plans	Medicare, MMP Medicare, MMOP, MMCP	Remove "Acupuncture is not a Medicare covered benefit" under Pain Management Procedures
273	2/6/2019	4/1/2019	Transplant Services	Update PA	Q2041, Q2042	All Plans	Medicaid; Marketplace; MMP Medicare; MMP Medicaid; MMO; MMOP; MMCP	Relocate the CAR T codes from "Healthcare Administered Drugs" category to "Transplant Services" category
MHI Pharmacy	3/11/2019	4/1/2019	Healthcare Administered Drug	Removal/No PA Required	J2916	CA, MI, NM, TX, WA	Medicaid, Marketplace	
MHI Pharmacy	3/11/2019	4/1/2019	Healthcare Administered Drug	Removal/No PA Required	J9267	CA, MI, SC, WA	Medicaid, Marketplace	
279	3/8/2019	4/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96127	IL	Medicaid; MMP Medicaid	
N/A	3/20/2019	4/1/2019	Neuropsychological & Psychological Tests	Removal/No PA Required	96110	IL	Medicaid; MMP Medicaid	
265	1/10/2019	4/1/2019	Durable Medical Equipment	Added/PA Required	E0652	MI	Medicaid; Marketplace	
N/A	2/21/2019	1/1/2019	Healthcare Administered Drug	Added/PA Required	J3245, Q5107, Q5109	MI	Medicaid, Marketplace	Covered benefit as of 1/1/2019
N/A	2/21/2019	1/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96110, 96127	MI	Medicaid, Marketplace	Covered benefit as of 1/1/2019
276	2/21/2019	4/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Added/PA Required	33979	MI	Medicaid; Marketplace; MMP Medicare; MMP Medicaid; MMO; MMOP	
275	2/21/2019	4/1/2019	Office visit and office-based procedure	Removal/No PA Required	95911, 95912, 95913	MI	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	
258	12/14/2018	4/1/2019	Radiation Therapy and Radiosurgery	Removal/No PA Required	77334	MI	Medicaid, Marketplace	
268	1/23/2019	1/1/2019	Occupational Therapy	Update PA	92526, 92610, 95851, **97016, 97018, 97022, 97032, 97034, 97035, 97110, 97112, 97116, 97124, 97139, 97140, 97530**, 97533, **97535, 97542, 97760**, S9129^	MI	Medicaid, Marketplace	Per state regulation/requirement - PT and OT benefit is 36 visits per calendar year (no PA for the first 36 visits), after which PA is required (codes in bold blue listed for both PT & OT). S9129^ = Medicaid Only

268	1/23/2019	1/1/2019	Physical Therapy	Update PA	97012, 97014, **97016, 97018, 97022**, 97024, 97026, 97028, **97032**, 97033, **97034, 97035**, 97036, 97039, **97110, 97112, 97116, 97124, 97139, 97140, 97530, 97535, 97542, 97760**	MI	Medicaid, Marketplace	Per state regulation/requirement - PT and OT benefit is 36 visits per calendar year (no PA for the first 36 visits), after which PA is required (codes in bold blue listed for both PT & OT).
282	3/14/2019	4/1/2019	Durable Medical Equipment	Added/PA Required	A9277, A9278, K0553, K0554	MI	Medicaid	newly covered benefits effective 4/1/19
MHI Pharmacy	3/11/2019	4/1/2019	Healthcare Administered Drug	Removal/No PA Required	J9000	MI, SC, WA	Medicaid, Marketplace	
256	12/12/2018	1/1/2019	Behavioral Health: Mental Health, Alcohol and Chemical Dependency Services	Added/PA Required	0901, 0912, 0913, 1001, 1002, 90867, 90868, 90869, 90870, 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158, H0012^, H0017, H0031^, H0032^, H0035, H0046, H2012^, H2013, H2014^, H2015, H2016, H2017^, H2018, H2019^, **H2020^**, S0201, S5111, S5150^, T1023^, T1025^, T1026^, T1027^, T1028^, T2013^, T2040^	NM	Marketplace	^PA required for all plans only when submitted with Autism Dx. [IDC9: 299.00, 299.01, 299.10, 299.11, 299.80, 299.81, 299.90, 299.91 and ICD10: F84.0, F84.5, F84.8, F84.9]
256	12/12/2018	1/1/2019	Neuropsychological & Psychological Tests	Added/PA Required	95956, 95957, 96105, 96110, 96112, 96113, 96116, 96121, 96125, 96127, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146	NM	Marketplace	
270	1/25/2019	1/1/2019	Behavioral Health: Mental Health, Alcohol and Chemical Dependency Services	Removal/No PA Required	90791, H0004, H0036, H2017, H0038	NY	Medicaid	The Medicaid Managed Care Organization Children's System Transformation Requirements and Standards currently restricts Medicaid Managed Care Plans from applying utilization management review criteria for a period of **90 days** from the implementation date of **children's specialty benefits for all services newly carved into managed care.** The State is extending the utilization management prohibition for Other Licensed Practitioner **(OLP)**, Community Psychiatric Support and Treatment **(CPST),** and Psychosocial Rehabilitation **(PSR) from 90 to 180 days.** MMCPs are restricted from conducting utilization management on OLP, CPST, and PSR from **January 1, 2019 through June 30, 2019 for all MMCP enrolled children receiving these three services**. **Please see NY tab for modifiers associated with these codes**
277	2/22/2019	4/1/2019	Behavioral Health: Mental Health, Alcohol and Chemical Dependency Services	Added/PA Required	S9485, H0010, H0011, H0018, H0019	WA	Medicaid, Marketplace	
269	1/23/2019	1/1/2019	Behavioral Health: Mental Health, Alcohol and Chemical Dependency Services	Removal/No PA Required	96110	WA	Medicaid, Marketplace	ROI analysis
280	3/8/2019	4/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96127	WA	Medicaid, Marketplace	
278	2/28/2019	4/1/2019	Speech Therapy	Update PA	92507, 92508	WA	Medicaid	Medicaid LOB, Speech Therapy for Children < 21 y.o. - update PA requirement to no authorization required for 12 ST visits per calendar year (currently listed no auth needed for 6 ST visits)
257	12/13/2018	4/1/2019	Home Healthcare Services	Added/PA Required	99600	WI	Medicaid	The state of Wisconsin uses this code for Home health services related to Personal care services. All Personal care services requires an authorization
N/A	2/1/2019	4/1/2019	Neuropsychological & Psychological Tests (in any setting)	Added/PA Required	96105, 96110, 96112, 96113, 96121, 96125, 96127, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146	WI	Medicaid, Marketplace	**WI** - previously accepted for 2/1/2019, updated effective date to 4/1/2019
292 & 294	4/10/2019	4/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96105, 96110, 96112, 96113	TX	Medicaid	No PA required for Medicaid/CHIP members age 6 and younger
281 & 286	3/27/2019	4/1/2019	Neuropsychological & Psychological Tests	Update PA	96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139	WA	Medicaid	To require NO PA if they meet the criteria of 0-20 yrs old and autism dx and for a COE center" and require PA for all other diagnoses/providers.
N/A	4/1/2019	4/1/2019	Experimental Investigational AND Behavior Health, Mental Health, Alcohol and Chemical Dependency Services categorie	Update PA	97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158	WA	Medicaid, Marketplace,MMOP, MMO	97151-97158 will be re-categorized under Neuropsychological and Psychological testing per WA OIC guidance
297	4/24/2019	4/1/2019	Office visit and office-based procedure	Update PA	95165	WA	Medicaid	No auth needed for up to 80 units per year. PA required after 80 units
296	4/15/2019	4/1/2019	Healthcare Administered Drug	Removal/No PA Required	J1726, J1729	MS	Medicaid	Removing PA from J1726 and J1729 per request from MSDOM
289	3/28/2019	4/1/2019	Physical Therapy, Occupational Therapy	Added/PA Required	97761	SC	Medicaid	
289	3/28/2019	4/1/2019	Experimental Investigational	Added/PA Required	0308T	SC	Medicaid	
289	3/28/2019	4/1/2019	Durable Medical Equipment	Added/PA Required	A9274	SC	Medicaid	
289	3/28/2019	4/1/2019	Durable Medical Equipment	Added/PA Required	E1028, E2300	SC	Medicaid, MMP Medicaid, MMP Medicare	
289	3/28/2019	4/1/2019	Home Healthcare Services	Removal/No PA Required	G0281, G0283, G0329	SC	MMP Medicaid, MMP Medicare	
289	3/28/2019	4/1/2019	Dental	Update PA	N/A	SC	Medicaid	Add disclaimer "Prior authorization is required for any dental procedure that is performed in an Outpatient or Ambulatory Surgical Center {POS 22, 24}. DentaQuest provides review of all dental procedures and evidence of this approval (via DentaQuest letter or fax) must be submitted with such requests. Molina Healthcare of South Carolina will review all Outpatient/ASC Dental Procedures to determine medical necessity for the place of setting ONLY."
295	4/11/2019	4/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96127, 96105	OH	Marketplace, MMP	
295	4/11/2019	4/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Removal/No PA Required	96110	OH	Marketplace, MMP	

300	4/29/2019	4/1/2019	Sleep Studies	Removal/No PA Required	95800, 98511, 95810	OH	Medicaid; Marketplace	Codes will not require PA from 4-1-19 to 5-31-19 but return to MHO codified list on 6-1-19 with the notation that * Home Sleep Studies are not covered. Provider notified on 4-30-19. (Config team - refer to comment for process)
301	4/29/2019	4/1/2019	Home Healthcare Services	Removal/No PA Required	G0155, G0299	OH	Medicaid	Codes will not require PA from 4-1-19 to 5-31-19 but return to MHO codified list on 6-1-19 with the notation that * Hospice does not require PA. Provider notified on 4-30-19. (Config team - refer to comment for process).
299	4/29/2019	1/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal/No PA Required	96127, 96105	OH	Medicaid	
299	4/29/2019	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency Services	Removal/No PA Required	96110	OH	Medicaid	

2019 Q1 Updates

RECEIPT	RECEIVED	EFFECTIVE	SERVICE CATEGORY	UPDATE TYPE	CODES	HEALTH PLANS	LOB(S)	NOTES
N/A	11/12/2018	1/1/2019	Non-PAR Offices/Providers/Facilities	Update PA	N/A	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	PA is waived for professional component services or services billed with Modifier 26 in ANY place of service setting **SC** - accept for MMP, not to accept for Medicaid **MS** - effective 2/1/2019
N/A	10/4/2018	1/1/2019	Genetic Counseling and Testing	Added/PA Required	0037U, 0045U, 0046U, 0047U, 0048U, 0049U, 0050U, 0053U, 0055U, 0056U, 0057U, 0058U, 0059U, 0060U	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New Codes **IL** - all codes effective 4/1/2019 **WI -** all codes non-covered for Medicaid, accepts all codes for Marketplace and Medicare **CA** - all codes not to accept for MediCal, NC benefits. Other LOBs effective 2/1/2019 **WA** - all codes not to accept for Medicaid, non-covered benefits **MI** - all codes not accept for Medicaid and Marketplace as not covered benefit **NY -** all codes not to accept for Medicaid as not on NYS fee schedule/not reimbursable **MS** - effective 2/1/2019
207	7/12/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	Added/PA Required	90867, 90868, 90869	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Codes currently listed under OP Procedures; will be also adding to BH section **TX** - all codes Marketplace and Medicaid was effective in Q4 2018 **WI** - all codes non-covered for Medicaid, accepts all codes for Marketplace and Medicare **CA** - all codes not to accept for MediCal, NC benefits. Other LOBs effective 2/1/2019 **MI** - all codes not to accept for Medicaid and Marektplace as not covered benefit **MS** - effective 2/1/2019 **PR** - all codes not to accept, 90867 and 90869 NC benefits
N/A	7/18/2018	1/1/2019	Cosmetic, Plastic & Reconstructive	Added/PA Required	30400, 30410, 30420, 30430, 30435, 30450	All Plans	Medicare	Medicare covers with certain diagnosis codes outlined in Local Coverage Determinations (LCDs), limit coverage to the LCD diagnosis codes, add to require PA for Molina Medicare. (already on Medicaid/Marketplace) **CA** - effective 2/1/2019
228	8/15/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	A9276, A9277, A9278, K0553, K0554	All Plans	Medicaid	**NY** - all codes Medicaid was effective in Q4 2018 **IL** - all codes effective 4/1/2019 **WI** - all codes non-covered for Medicaid **CA** - all codes not to accept for MediCal, NC benefits. Other LOBs effective 2/1/2019 **MI** - all codes not to acccept for Medicaid and Marketplace as MDHHS has not confirmed this is covered benefit **MS** - effective 2/1/2019 **SC** - exception Medicaid K0553
222	8/3/2018	1/1/2019	Genetic Counseling and Testing	Added/PA Required	81161, 81243, 81244	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	**TX** - all codes Marketplace and Medicaid was effective in Q4 2018 **IL** - excludes 81243 and 81244 for Q1 2019, accepts 81161 effective 4/1/2019 **CA** - all codes not to accept for Medical - currently do not require PA for FFS MediCal. Other LOBs effective 2/1/2019 **WA** - all codes not to accept for Medicaid and Marketplace (tests done as parental tests and claims already configured not require PA for parental use) **MS** - effective 2/1/2019
N/A	8/23/2018	1/1/2019	Non-PAR Offices/Providers/Facilities	Update PA	N/A	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	PA is waived for all radiology, anesthesiology, and pathology services when billed in POS 19, 21, 22, 23 or 24 **CA** - effective 2/1/2019 **SC** - accept for MMP, not to accept for Medicaid **TX** - CPT code 00170 Medicaid STAR contract require PA on dental anesthesia for member 0-6 years old at all POS (effective since 6/1/2017) **MS** - effective 2/1/2019

N/A	9/7/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	Q5108, Q5110	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	New Codes **IL** - all codes effective 4/1/2019 **WI** - Pharmacy is carved out for Medicaid and not adding PA requirement; accepting PA requirement all codes for Marketplace and Medicare **CA** - all codes not to accept for MediCal, NC benefits. Other LOBs effective 2/1/2019 **WA** - accepts for Marketplace, all codes not to accept for Medicaid as non-covered benefit **MS** - Q5110 "No PA required" on MS DOM fee schedule, Q5108 effective 2/1/2019
204/205	6/29/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	C9030*, C9031*, C9032*	All Plans	Medicaid	**WA** – Q4 Matrix Log - all codes retro to 7/1/18; **MI** – Q4 Matrix Log - all codes effective 10/1/18 (Medicaid and Marketplace) **IL** - all codes effective 4/1/2019 **WI** - Pharmacy is carved out for Medicaid, not adding PA requirement **CA, MS** - effective 2/1/2019 **Encoder Pro update:** *C9030 deleted, replaced with J9057 *C9031 deleted, replaced with A9513 *C9032 deletec, replaced with J3398
233	9/12/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	Q9994*	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Pharmacy MCP developed and approved in March 2018; drug been out since 2015, received own billing codes as of 7/1/2018. **WA** - Q4 2018 Matrix Log **IL** - all codes effective 4/1/2019 **WI** - Pharmacy is carved out for Medicaid and not adding PA requirement; accepting PA requirement for Marketplace and Medicare **CA** - not to accept for MediCal, NC benefits. Other LOBs effective 2/1/2019 **MS** - effective 2/1/2019 **Encoder Pro update:** *Q9994 deleted, replaced with B4105
N/A	9/28/2018	1/1/2019	Physical and Occupational Therapy	Update PA	N/A	All Plans	Medicare	Keep on PA Guide. Configure to benefit cap. PA required beyond benefit cap. **CA** - effective 2/1/2019
N/A	9/28/2018	1/1/2019	Physical and Occupational Therapy	Update PA	N/A	All Plans	Medicaid	Require PA after initial eval +24 treatment visits **IL** - keep at Initial eval + 12 visits **CA** - effective 2/1/2019 **SC** - continue with eval +6 visits (PA required for <18 after eval plus six (6) visits per calendar year for outpatient settings no PA required for >19.) **TX** - continue with PA required after eval for all therapies **PR** - per ASES, PT: eval + 15 visits; OT: unlimited visits **MS** - effective 2/1/2019 PT and OT PA after initial eval + 24 visits; Q2-Q4 2018 PA required after initial evaluation plus six (6) visits per calendar year, for office and out-patient settings.
N/A	9/28/2018	1/1/2019	Physical and Occupational Therapy	Removed/No PA Required	N/A	All Plans	Marketplace	Remove from PA guide. Configure to benefit cap **CA** - effective 2/1/2019 **TX** - continue with PA required after eval for all therapies **OH** - eval +24 visits in 2019 (eval +20 visits in 2018)
N/A	9/28/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Added/PA Required	33206, 33207, 33208, 33212*, 33213*, 33214*, 33221*, 33224, 33225, 33227*, 33228*, 33229*, 33230, 33231, 33240, 33249, 33262*, 33263*, 33264*, 33270	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Annual Review approved by Code Governance Committee to be effective all plans all LOB for Cardiac Services **CA, MS** - effective 2/1/2019 **SC** - all codes exception for Medicaid and MMP not to require PA **WA** - *exception applies to Medicaid and Marketplace
N/A	9/28/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Added/PA Required	23470, 27438	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Annual Review approved by Code Governance Committee to be effective all plans all LOB for Musculoskeletal **CA, MS** - effective 2/1/2019 **PR** - low utilization in Puerto Rico, not to accept PA requirement
N/A	12/5/2018	1/1/2019	Unlisted & Miscellaneous	PA Update	J7999, J8499	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	codes listed under both Specialty Pharmacy and Unlisted & Miscellaneous, removing from Specialty Pharmacy.
N/A	12/11/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	A9513, B4105, C9038, J0185, J0517, J0567, J0584, J0599, J1301, J1454, J1628, J1746, J2797, J3245^, J3316, J3398, J7170, J7177, J7203, J7318, J7329, J9044, J9057, J9153, J9173, J9229, J9311, J9312, Q2042, Q5107^, Q5109^, Q5111	All Plans	Medicaid, Marketplace	**IL** - all codes effective 4/1/2019 **MI** - ^none covered codes, exception for Medicaid and Marketplace
N/A	12/11/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	A9513, B4105, J0185, J0567, J0599, J1301, J1628, J3316, J3398, J7170, J9153, J9229, J9057, J9173	All Plans	Medicare, MMP Medicare, MMOP, MMCP	replacement codes of deleted codes identified below
N/A	12/11/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	C9035, C9036, C9037, C9039, C9407, C9408, J0841, J1095, J2062, J2186, J2787, J3304, J3397	All Plans	Medicaid, Marketplace	
N/A	12/18/2018	1/1/2019	Multiple Service Categories	Removal of Deleted Codes	10022, 20005, 43760, 46762, 50395, 61332, 61480, 64508, 66220, 76001, 78270, 78271, 78272, 92275, 99090, 0001M, 0387T, 0388T, 0389T, 0390T, 0391T, J0833", 0346T, 11101, 27370, 31595, 41500, 61610, 61612, 63615, 11100, 95974, 95975, 95978, 95979	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Multiple Service Categories	Removal of Deleted Codes	33284, 33282, 64550, 96111	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	33284, 33282 to be removed and replaced with 33285, 33286 64550 to be removed and replaced with 64550 96111 to be removed and replaced with 96112, 96113

N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0159T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted code
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0188T, 0189T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 99499
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0190T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 67299
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0195T, 0196T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 22899
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0337T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 93998
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0359T, 0360T, 0361T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 97151, 97152 to require PA for same LOBs (BH codes). Exception identified below under Neuropsychological & Psychological Tests (in any setting) or BH Applied Behavioral Analysis.
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0363T, 0364T, 0365T, 0366T, 0367T, 0368T, 0369T, 0370T, 0371T, 0372T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 97153, 97154, 97155, 97156, 97157, 97158, 0373T to require PA for same LOBs. Exception identified below under Neuropsychological & Psychological Tests (in any setting) or BH Applied Behavioral Analysis.
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0374T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 0373T to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Experimental/Investigational	Removal of Deleted Codes	0406T, 0407T	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 31237, 31299 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Genetic Counseling & Testing	Removal of Deleted Codes	81211, 81213, 81214	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 81162-81164 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Imaging - Advanced & Specialty	Removal of Deleted Codes	77058	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 77046, 77048 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Imaging - Advanced & Specialty	Removal of Deleted Codes	77059	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 77047, 77049 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Imaging - Advanced & Specialty	Removal of Deleted Codes	C8904	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 77046 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Imaging - Advanced & Specialty	Removal of Deleted Codes	C8907	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 77047 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Neuropsychological & Psychological Tests (in any setting)	Removal of Deleted Codes	96101, 96102, 96103, 96118, 96119, 96120	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 96130-96131, 96136-96139, 96146 to require PA for same LOBs
N/A	12/18/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Removal of Deleted Codes	C9741	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with 33289 to require PA for same LOBs (Medicare line was previously listed under DME, will relocate to Outpatient Hospital/Ambulatory Surgery Center Procedures)
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9014"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J0567 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9015"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J0599 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9016"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J3316 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9024"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J9153 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9028"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J9229 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9029"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J1628 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019

N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9030"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J9057 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9031"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with A9513 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9032"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J3398 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9463"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J0185 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9492"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J9173 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9493"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J1301 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	Q2040"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with Q2042 to require PA for same LOBs. **CA** - "exception, not on MediCal update list; remainder of the codes effective 2/1/2019
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	Q9994	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with B4105 to require PA for same LOBs.
N/A	12/18/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	Q9995	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Deleted codes to be removed and replaced with J7170 to require PA for same LOBs.
N/A	12/18/2018	1/1/2019	Multiple Service Categories	Added/PA Required	33289*, 77046, 77047, 77048, 77049, 81163, 81164, 81165, 81166, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 97151", 97152", 97153^", 97154^", 97155^", 97156^", 97157^", 97158^"	All Plans	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	Replacement codes of deleted codes 33289* - configure under Outpatient Hosptial/ASC service category for all LOBs **IL** - all codes 4/1/2019 **WA** - excepts ABA codes in green, and add 81167 to require PA effective 1/1/2019 (exception does not apply to Medicare) **WI** - ^none covered code for Medicaid - replacement codes for 0363T, 0371T, 0372T **CA** - "exception for Medicaid and marketplace (not MediCal billable codes); remainder of the codes effective 2/1/2019
N/A	12/11/2018	1/1/2019	Neuropsychological & Psychological Tests (in any setting)	Added/PA Required	96112, 96113, 96121, **96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146**	All Plans	Medicare, MMP Medicare, MMOP, MMCP	New Codes (purple - all LOBs), Replacememt codes of deleted codes (black - all LOBs) **UT, ID, IL** - all codes effective 4/1/2019 **CA** - all codes effective 2/1/2019
N/A	12/11/2018	1/1/2019	BH - Applied Behavioral Analysis	Added/PA Required	97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158	All Plans	Medicare, MMP Medicare, MMOP, MMCP	Replacement codes of deleted codes **UT, ID, IL** - all codes effective 4/1/2019 **CA** - all codes effective 2/1/2019
N/A	12/11/2018	1/1/2019	Neuropsychological & Psychological Tests (in any setting)	Added/PA Required	96105, 96110^, 96112*, 96113*, 96121*, 96125^, 96127, **96130*, 96131*, 96132*, 96133*, 96136*, 96137*, 96138, 96139, 96146**	All Plans	Medicaid, Marketplace	New Codes (purple - all LOBs), Replacement codes of deleted codes (black - all LOBs), New codoes (red - Marketplace & Medicaid Only) **OH** - Medicaid 96112*, 96113*, 96121*, 96130*, 96131*, 96132*, 96133*, 96136*, 96137* + existing code 96116 effective 1/1/2019 PA not required by CBHC agencies certified by Ohio MHAS for up to 20 hours per calendar year, additional visits/hours and all other provider types PA required. 96138, 96139, 96146 NC Medicaid Benefit **NY** - accepts 96105 only per NYS Medicaid fee schedule effective 1/1/2019 **UT, IL** - all codes effective 4/1/2019 **WI** - all codes effective 2/1/2019 **CA** - except 96125, not valid MediCal billable code **MI** - ^not covered, exception for Medicaid and Marketplace; all other codes effective 1/1/2019
N/A	11/1/2018	10/1/2018	Speech Therapy	Added/PA Required	92507, 92508	FL	Medicaid; Marketplace	per health plan Speech therapy DOES require an authorization after the initial eval/vist
232	9/7/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	E2402	IL	Medicaid, MMP Medicaid, MMP Medicare	
238	9/20/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	E0601	IL	Medicaid; MMP Medicare; MMP Medicaid	
Q4 '18 Review	9/7/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	C2624, K0903	IL	Medicaid	**K0903:** covered benefit, add to require PA for 1/1/19 **C2624:** HFS non covered benefits but require PA (1/1/19)
Q4 '18 Review	9/7/2018	1/1/2019	Out Patient Hospital/ASC Procedures	Added/PA Required	C9741	IL	Medicaid	HFS non covered benefit but require PA (1/1/19)

Q4 '18 Review	9/7/2018	1/1/2019	Pain Management	Added/PA Required	97810, 97811, 97813, 97814, S8930	IL	Medicaid	All non covered benefit but still require PA 1/1/19
N/A	11/6/2018	1/1/2019	Specialty Pharmacy	Removed/No PA Required	C9136, J7205, C9441, Q9970, C9461, A9515	MI	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	update PA code matrix - C codes are no longer valid and replacement codes not require PA for MI plan **C9136** no longer valid (MI remove PA 1/1/2017), replaced by J7205 (MI remove PA 4/1/2016), **C9441** no longer valid (MI remove PA 1/1/2017) , replaced by Q9970 (MHI remove PA 4/1/2017), **C9461** no longer valid (MI remove PA 1/1/2017), replaced by A9515 (MHI not requiring PA since code replacement)
N/A	12/10/2018	**2/1/2019**	Home Health	Update PA	N/A	MS	Medicaid	Update PA requirement to PA Eval +6 treatment visits (MHI Standard) effective 2/1/2019 (Q2 to 1/31/2019: All home health services require PA after initial evaluation)
N/A	12/19/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	90281, 90283, 90284, 90378, A9542, A9543, C9014, C9015, C9016, C9024, C9028, J0129, J0135, J0178, J0180, J0202, J0207, J0220, J0256, J0257, J0287, J0289, J0364, J0480, J0485, J0490, J0585, J0586, J0587, J0588, J0594, J0597, J0598, J0637, J0638, J0640, J0641, J0714, J0717, J0725, J0775, J0800, J0850, J0875, J0878, J0881, J0885, J0888, J0894, J0895, J0897, J1230, J1290, J1300, J1322, J1324, J1325, J1438, J1439, J1442, J1447, J1453, J1458, J1459, J1460, J1556, J1557, J1559, J1560, J1561, J1566, J1568, J1569, J1570, J1571, J1572, J1573, J1575, J1595, J1599, J1645, J1650, J1652, J1675, J1740, J1743, J1744, J1745, J1750, J1756, J1786, J1826, J1830, J1930, J1950, J1955, J2020, J2170, J2182, J2248, J2315, J2323, J2353, J2357, J2425, J2430, J2469, J2503, J2505, J2507, J2562, J2597, J2724, J2778, J2783, J2786, J2793, J2820, J2840, J2916, J3060, J3090, J3095, J3110, J3145, J3240, J3262, J3285, J3315, J3357, J3380, J3385, J3396, J3489, J3490, J3590, J7175, J7178, J7179, J7180, J7181, J7183, J7186, J7187, J7188, J7189, J7190, J7192, J7194, J7196, J7197, J7198, J7199, J7200, J7201, J7202, J7205, J7207, J7209, J7312, J7313, J7316, J7320, J7321, J7323, J7324, J7325, J7326, J7327, J7328, J7340, J7504, J7511, J7527, J8670, J9000, J9015, J9017, J9019, J9025, J9027, J9032, J9033, J9035*, J9040, J9041, J9042, J9043, J9045, J9047, J9050, J9055, J9060, J9065, J9070, J9100, J9120, J9130, J9150, J9155, J9160, J9171, J9178, J9179, J9181, J9185, J9190, J9200, J9201, J9202, J9205, J9206, J9207, J9208, J9209, J9211, J9214, J9215, J9216, J9217, J9218, J9225, J9226, J9228, J9230, J9245, J9261, J9262, J9263, J9264, J9266, J9267, J9268, J9271, J9280, J9293, J9295, J9299, J9301, J9302, J9303, J9305, J9306, J9307, J9308, J9310, J9315, J9325, J9328, J9330, J9340, J9351, J9352, J9354, J9355, J9360, J9370, J9371, J9390, J9395, J9400, J9999, Q0138, Q0139, Q2050, Q3027, Q3028	MS	Medicaid	267 Pharmacy codes to be added back to MS Matrix (please double click codes tab to reveal complete list)
Q4 2018	9/21/2018	1/1/2019	Specialty Pharmacy	Removed/No PA Required	J9276	NM	All	Notes from Q4 2018: Invalid code reviewed by Tim Crum to be removed
Q4 2018	4/25/2018	1/1/2019	Cosmetic, Plastic & Reconstructive procedures	Added/PA Required	11900, 11901	NM	Marketplace	Notes from Q4 2018: PA required regardless of diagnosis
Q4 2018	6/26/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	C2624, K0903	NM	Marketplace	
Q4 2018	5/31/2018	1/1/2019	Experimental/Investigational	Added/PA Required	0505T, 0506T, 0507T, 0508T	NM	All	Notes from Q4 2018: New Codes
Q4 2018	3/20/2018	1/1/2019	Genetic Counseling & Testing	Added/PA Required	0026U, 0027U, 0028U, 0029U, 0030U, 0031U, 0032U, 0033U, 0034U, 81407	NM	All	
Q4 2018	10/1/22018	1/1/2019	Genetic Counseling & Testing	Removed/No PA Required	0028U	NM	All	Notes from Q4 2018: code terminated on 9/30/2018
Q4 2018	6/26/2018	1/1/2019	Out Patient Hospital/ASC Procedures	Added/PA Required	C9741	NM	Marketplace	
Q4 2018	6/12/2018	1/1/2019	Pain Management	Added/PA Required	97810, 97811, 97813, 97814, S8930	NM	Marketplace	Notes from Q4 2018: Invalid code reviewed by Tim Crum to be removed
Q4 2018	5/22/2018	1/1/2019	Sleep Studies	PA Update	No PA required for POS12 services (home sleep studies).	NM	All	Notes from Q4 2018: No PA required for POS12 services (home sleep studies).
Q4 2018	4/5/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	C9463, J7322, Q5103, Q5104, Q2041, Q9991, Q9992, Q9995	NM	All	Notes from Q4 2018: New Codes
Q4 2018	6/11/2018	1/1/2019	Unlisted & Miscellaneous	Added/PA Required	A4649, E0769, E0770, K0899, L5999, L7499, Q0507, Q0508, Q0509	NM	All	
Q3 2018	3/20/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	Q5103, Q5104, Q2041	NM	All	
Q3 2018	3/20/2018	1/1/2019	Genetic Counseling & Testing	Added/PA Required	0026U, 0027U, 0028U, 0029U, 0030U, 0031U, 0032U, 0033U, 0034U, 81407	NM	All	
Q3 2018	4/5/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	J7322	NM	Marketplace	
Q3 2018	4/9/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	PA Update	F84.2, F84.3	NM	Marketplace	Notes from Q3 2018: No PA required when associated with Autism Dx.
Q3 2018	3/28/2018	1/1/2019	Specialty Pharmacy	Removal of Deleted Codes	C9494, J1725, J9265, Q5102	NM	All	
Q3 2018	4/18/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	J1726, J1729	NM	All	Notes from Q3 2018: Replacement codes, retro to 4/1/18.
Q3 2018	5/9/2018	1/1/2019	Unlisted/Miscellaneous Codes	Matrix Update	Refer to Unlisted/Misc section for specific codes	NM	All	Notes from Q3 2018: Adding codes back to matrix
249	11/7/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	Update PA	H2017	NY	Medicaid	H2017 requires an auth for Adult HCBS (went live 7/1/18) H2017 does NOT require an auth for Children's MMC < 21 years of age.
251	11/15/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	Update PA	90791, H0004, H0036, H2017	NY	Medicaid	Children's Carve-In benefits; auth requirements impacts mainstream members < 21 years of age and younger ONLY.
236	9/19/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	Removed/No PA Required	90870	OH	Medicaid; Marketplace; MMP Medicare; MMP Medicaid	
234	9/19/2018	1/1/2019	Durable Medical Equipment (DME)	Added/PA Required	E2402	OH	Medicaid; Marketplace; MMP Medicare; MMP Medicaid	
235	9/19/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Removed/No PA Required	20930, 22552, 22614, 22634, 22842, 22845	OH	Medicaid; Marketplace; MMP Medicare; MMP Medicaid	
237	9/19/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Removed/No PA Required	62368, 62369, 62370	OH	Medicaid; Marketplace; MMP Medicare; MMP Medicaid	

239	9/24/2018	1/1/2019	Unlisted & Miscellaneous	Removed/No PA Required	T2042, G0299, G0155, T2043, T2044, T2045, T2046	OH	Medicaid, MMP Medicaid	Non-Par Hospice will no longer require Prior Auth. (Hospice is not covered by Molina, Medicaid system set up for denial already)
N/A	11/20/2018	1/1/2019	Behavioral Health, Mental Health, Alcohol & Chemical Dependency	Added/PA Required	0900, 0901, 0905, 0912, 0913, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99342, 99343, 99344, 99345, 99348, 99349, 99350	PR	Medicaid	
N/A	11/20/2018	1/1/2019	Outpatient Hospital/Ambulatory Surgery Center Procedures	Added/PA Required	33210, 33211, 33233, 33236, 33237, 33241, 33243, 33244	PR	Medicaid	
262	12/20/2018	1/1/2019	PT OT ST (Home Health and Home Health Services)	Update PA	N/A	SC	Medicaid	PA is required after the intial eval including home based PT/OT/ST, this is an exception from MHI's PA requirement (which is PA required after the eval plus first 6 visits, including home based PT/OT/ST)
Q4 '18 Review	8/3/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	Q9995	SC	Medicaid, MMP Medicaid, MMP Medicare	**Encoder Pro update:** Q9995 deleted, replaced with J7170
252	11/16/2018	1/1/2019	Home Health	Update PA	N/A	SC	MMP Medicare	Update PA requirement to PA required after initial visit (MHI Standard)
245	10/19/2018	10/1/2018	Specialty Pharmacy	Removed/No PA Required	L0648, L0649, L0651, J7296	SC	Medicaid	
245	10/19/2018	1/1/2019	Specialty Pharmacy	Removed/No PA Required	L0648, L0649, L0651, J7296	SC	Medicaid	
244	10/19/2018	1/1/2019	Specialty Pharmacy	Added/PA Required	J0592, J0740, J3030	SC	MMP Medicare	
244	10/19/2018	1/1/2019	Durable Medical Equipment	Added/PA Required	E0470, E0471, E0472, E0601, E2402, K0013, K0606	SC	MMP Medicare	
244	10/19/2018	1/1/2019	Home Health Care	Added/PA Required	G0281, G0283, G0329	SC	MMP Medicare	
244	10/19/2018	1/1/2019	Prosthetics and Orthotics	Added/PA Required	L0624, L0627, L0629, L0630, L0631, L0632, L0634, L0636	SC	MMP Medicare	
254	11/30/2018	1/1/2019	All categories	PA Update	All codes on SC exception tab	SC	MMP Medicare, MMP Medicaid, Medicaid	Updating PA requirement on all codes for all LOB
206	7/11/2018	1/1/2019	Out Patient Hospital/ASC Procedures	Added/PA Required	0762	TX	Marketplace	update PA Code Matrix and PA Guide for Marketplace to state "PA Required for Observation stays longer than 48 hours"
243	10/12/2018	1/1/2019	Genetic Counseling and Testing	Added/PA Required	81240, 81241	TX	Medicaid; Marketplace; MMP Medicaid	
261	12/18/2018	1/1/2019	PT OT ST	Update PA	92526, 92609, 92521, 92522, 92523, 92524, S91529, 70129, 7014, 97016, 97018, 97022, 97024, 97026, 97028, 97032, 97033, 97034, 97035, 97036, 97039, 97113, 97116, 97124, 97139, 97140, 97150, 97530, 97533, 97535, 97537, 97542, 97750, 97760, 97761, 97762, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168	WA	Medicaid	adding codes with updated PT OT benefit limits (see notes for each code listed on WA exception tab) **OT/PT >21 years:** PA required after initial evaluation plus twenty-four (24) visits per calendar year for office, and outpatient settings. **OT/PT <21 years:** No PA – No limits **Speech (all ages):** PA required after initial evaluation plus six (6) visits for office, and outpatient setting
N/A	10/2/2018	**10/2/2018**	Home Health	Update PA	N/A	WA	Medicare	Update PA requirement to PA Eval +6 treatment visits (effective 10/2/2018)
259	12/17/2018	1/1/2019	Office visit and office based procedure	Update PA	95165	WA	Medicaid	Per WA HCA guidelines this code is allowed up to 50 units per client per year. PA is required after 50 units.
260	12/18/2018	**3/1/2019**	Specialty Pharmacy	Added/PA Required	S1090	WA	Medicaid	Effective 3/1/2019
N/A	12/20/2018	1/1/2019	Experimental Investigational	Added/PA Required	0509T, 0510T, 0511T, 0512T, 0513T, 0514T, 0515T, 0516T, 0517T, 0518T, 0519T, 0520T, 0521T, 0522T, 0523T, 0524T, 0525T, 0526T, 0527T, 0528T, 0529T, 0530T, 0531T, 0532T, 0533T, 0534T, 0535T, 0536T, 0542T	WA	Medicaid, Medicare, MMP Medicaid, MMP Medicare, MMOP, MMCP, Marketplace	WA accepts code for earlier implementation 1/1/2019 (MHI wide effective 4/1/2019)
N/A	12/26/2018	1/1/2019	Experimental Investigational	Update PA	93998, 0373T, 31237, 31299	WI	Medicaid	**93998** removed MHI wide and replaced with 0337T 8/1/2015. Effective 1/1/2019 0337T replaced with 93998 NC benefit for WI Medicaid [deleted (replaced with)] Replacement code for 0337T (93998), 0363T, 0371T, 0372T (0373T), 0374T (0373T), 0406T & 0407T (31237. 31299)
N/A	12/26/2018	1/1/2019	Specialty Pharmacy	Update PA	J3398, Q2042, B4105, J7170	WI	Medicaid	Replacement codes for C9032, Q2040, Q9994, Q9995 - NC benefit for WI Medicaid