

## 2018 HealthTeam Advantage Prior Authorization Code List



### Key Rule Description

**J3590** Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
11004		Debridement	Debride genitalia & perineum	Only Inpatient
11005		Debridement	Debride abdom wall	Only Inpatient
11006		Debridement	Debride genit/per/abdom wall	Only Inpatient
11008		Debridement	Remove mesh from abd wall	Only Inpatient
11057		Paring or Cutting - HH or NH Aid	Trim skin lesions over 4	
11730		Nails - HH or NH Aid	Removal of nail plate	
11920		Cosmetic & Reconstructive	Correct skin color 6.0 cm/<	
11921		Breast Reconstruction	Correct skn color 6.1-20.0cm	Breast Reconstruction: Prior Authorization is not required for the following diagnosis codes: C50.019, C50.011, C50.012, C50.111, C50.112, C50.119, C50.211, C50.212, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C50.029, C50.021, C50.022, C50.121, C50.122, C50.129, C50.221, C50.222, C50.229, C50.321, C50.322, C50.329, C50.421, C50.422, C50.429, C50.521, C50.522, C50.529, C50.621, C50.622, C50.629, C50.821, C50.822, C50.829, C50.921, C50.922, C50.929, C79.81, D05.90, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.91, D05.92, Z85.3, Z90.10, Z90.11, Z90.12, Z90.13, Z42.1
11922		Breast Reconstruction	Correct skin color ea 20.0cm	
11950		Cosmetic & Reconstructive	Tx contour defects 1 cc/<	
11951		Cosmetic & Reconstructive	Tx contour defects 1.1-5.0cc	
11952		Cosmetic & Reconstructive	Tx contour defects 5.1-10cc	
11954		Cosmetic & Reconstructive	Tx contour defects >10.0 cc	
11960		Cosmetic & Reconstructive	Insert tissue expander(s)	
11971		Cosmetic & Reconstructive	Remove tissue expander(s)	
15730		Cosmetic & Reconstructive	Mdfc flap w/prsrv vasc pedcl	
15732		Cosmetic & Reconstructive	Muscle-skin graft head/neck	
15733		Cosmetic & Reconstructive	Musc myoq/fscq flp h&n pedcl	
15756		Cosmetic & Reconstructive	Free myo/skin flap microvasc	Only Inpatient
15757		Cosmetic & Reconstructive	Free skin flap microvasc	Only Inpatient
15758		Cosmetic & Reconstructive	Free fascial flap microvasc	Only Inpatient
15820		Cosmetic & Reconstructive	Revision of lower eyelid	
15821		Cosmetic & Reconstructive	Revision of lower eyelid	
15822		Cosmetic & Reconstructive	Revision of upper eyelid	
15823		Cosmetic & Reconstructive	Revision of upper eyelid	
15830		Cosmetic & Reconstructive	Exc skin abd	
15832		Cosmetic & Reconstructive	Excise excessive skin thigh	
15833		Cosmetic & Reconstructive	Excise excessive skin leg	
15834		Cosmetic & Reconstructive	Excise excessive skin hip	
15835		Cosmetic & Reconstructive	Excise excessive skin buttck	
15836		Cosmetic & Reconstructive	Excise excessive skin arm	
15837		Cosmetic & Reconstructive	Excise excess skin arm/hand	
15838		Cosmetic & Reconstructive	Excise excess skin fat pad	
15839		Cosmetic & Reconstructive	Excise excess skin & tissue	
15847		Cosmetic & Reconstructive	Exc skin abd add-on	
15876		Cosmetic & Reconstructive	Suction lipectomy head&neck	
15877		Cosmetic & Reconstructive	Suction lipectomy trunk	

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15878		Cosmetic & Reconstructive	Suction lipectomy upr extrem	
15879		Cosmetic & Reconstructive	Suction lipectomy lwr extrem	
16036		Cosmetic & Reconstructive	Escharotomy addl incision	Only Inpatient
17999		Cosmetic & Reconstructive	Skin tissue procedure	
19081		Diagnostic Breast Biopsy	Bx breast 1st lesion strtctc	
19082		Diagnostic Breast Biopsy	Bx breast add lesion strtctc	
19083		Diagnostic Breast Biopsy	Bx breast 1st lesion us imag	
19084		Diagnostic Breast Biopsy	Bx breast add lesion us imag	
19085		Diagnostic Breast Biopsy	Bx breast 1st lesion mr imag	
19086		Diagnostic Breast Biopsy	Bx breast add lesion mr imag	
19271		Breast Reconstruction or Mastectomy	Revision of chest wall	Only Inpatient
19272		Breast Reconstruction or Mastectomy	Extensive chest wall surgery	Only Inpatient
19300		Breast Reconstruction or Mastectomy	Removal of breast tissue	
19305		Breast Reconstruction or Mastectomy	Mast radical	Only Inpatient
19306		Breast Reconstruction or Mastectomy	Mast rad urban type	Only Inpatient
19316		Breast Reconstruction or Mastectomy	Suspension of breast	
19318		Breast Reconstruction or Mastectomy	Reduction of large breast	
19324		Breast Reconstruction or Mastectomy	Enlarge breast	
19325		Breast Reconstruction or Mastectomy	Enlarge breast with implant	
19328		Breast Reconstruction or Mastectomy	Removal of breast implant	
19330		Breast Reconstruction or Mastectomy	Removal of implant material	
19340		Breast Reconstruction or Mastectomy	Immediate breast prosthesis	
19342		Breast Reconstruction or Mastectomy	Delayed breast prosthesis	
19350		Breast Reconstruction or Mastectomy	Breast reconstruction	
19357		Breast Reconstruction or Mastectomy	Breast reconstruction	
19361		Breast Reconstruction or Mastectomy	Breast reconstr w/lat flap	Only Inpatient
19364		Breast Reconstruction or Mastectomy	Breast reconstruction	Only Inpatient
19366		Breast Reconstruction or Mastectomy	Breast reconstruction	
19367		Breast Reconstruction or Mastectomy	Breast reconstruction	Only Inpatient
19368		Breast Reconstruction or Mastectomy	Breast reconstruction	Only Inpatient
19369		Breast Reconstruction or Mastectomy	Breast reconstruction	Only Inpatient
19370		Breast Reconstruction or Mastectomy	Surgery of breast capsule	
19371		Breast Reconstruction or Mastectomy	Removal of breast capsule	
19380		Breast Reconstruction or Mastectomy	Revise breast reconstruction	
19396		Breast Reconstruction or Mastectomy	Design custom breast implant	
20550		Injection Procedures	Inj tendon sheath/ligament	
20552		Injection Procedures	Inj trigger point 1/2 muscl	
20553		Injection Procedures	Inject trigger points 3/>	
20661		Musculoskeletal Procedures	Application of head brace	Only Inpatient
20664		Musculoskeletal Procedures	Application of halo	Only Inpatient
20802		Musculoskeletal Surgery	Replantation arm complete	Only Inpatient
20805		Musculoskeletal Surgery	Replant forearm complete	Only Inpatient
20808		Musculoskeletal Surgery	Replantation hand complete	Only Inpatient
20816		Musculoskeletal Surgery	Replantation digit complete	Only Inpatient
20824		Musculoskeletal Surgery	Replantation thumb complete	Only Inpatient
20827		Musculoskeletal Surgery	Replantation thumb complete	Only Inpatient
20838		Musculoskeletal Surgery	Replantation foot complete	Only Inpatient
20955		Musculoskeletal Surgery	Fibula bone graft microvasc	Only Inpatient
20956		Musculoskeletal Surgery	Iliac bone graft microvasc	Only Inpatient
20957		Musculoskeletal Surgery	Mt bone graft microvasc	Only Inpatient
20962		Musculoskeletal Surgery	Other bone graft microvasc	Only Inpatient
20969		Musculoskeletal Surgery	Bone/skin graft microvasc	Only Inpatient
20970		Musculoskeletal Surgery	Bone/skin graft iliac crest	Only Inpatient
20974		Bone Growth Stimulator	Electrical bone stimulation	

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Code	Mod	Procedures & Services	Description	Rule Description
20975		Bone Growth Stimulator	Electrical bone stimulation	
20979		Bone Growth Stimulator	US bone stimulation	
21045		Orthognathic Surgery	Extensive jaw surgery	Only Inpatient
21120		Orthognathic Surgery	Reconstruction of chin	
21121		Orthognathic Surgery	Reconstruction of chin	
21122		Orthognathic Surgery	Reconstruction of chin	
21123		Orthognathic Surgery	Reconstruction of chin	
21125		Orthognathic Surgery	Augmentation lower jaw bone	
21127		Orthognathic Surgery	Augmentation lower jaw bone	
21137		Cosmetic & Reconstructive	Reduction of forehead	
21138		Cosmetic & Reconstructive	Reduction of forehead	
21139		Cosmetic & Reconstructive	Reduction of forehead	
21141		Orthognathic Surgery	Lefort i-1 piece w/o graft	Only Inpatient
21142		Orthognathic Surgery	Lefort i-2 piece w/o graft	Only Inpatient
21143		Orthognathic Surgery	Lefort i-3/> piece w/o graft	Only Inpatient
21145		Orthognathic Surgery	Lefort i-1 piece w/ graft	Only Inpatient
21146		Orthognathic Surgery	Lefort i-2 piece w/ graft	Only Inpatient
21147		Orthognathic Surgery	Lefort i-3/> piece w/ graft	Only Inpatient
21150		Orthognathic Surgery	Lefort ii anterior intrusion	
21151		Orthognathic Surgery	Lefort ii w/bone grafts	Only Inpatient
21154		Orthognathic Surgery	Lefort iii w/o lefort i	Only Inpatient
21155		Orthognathic Surgery	Lefort iii w/ lefort i	Only Inpatient
21159		Orthognathic Surgery	Lefort iii w/fhdw/o lefort i	Only Inpatient
21160		Orthognathic Surgery	Lefort iii w/fhd w/ lefort i	Only Inpatient
21172		Cosmetic & Reconstructive	Reconstruct orbit/forehead	
21175		Cosmetic & Reconstructive	Reconstruct orbit/forehead	
21179		Cosmetic & Reconstructive	Reconstruct entire forehead	Only Inpatient
21180		Cosmetic & Reconstructive	Reconstruct entire forehead	Only Inpatient
21181		Cosmetic & Reconstructive	Contour cranial bone lesion	
21182		Cosmetic & Reconstructive	Reconstruct cranial bone	Only Inpatient
21183		Cosmetic & Reconstructive	Reconstruct cranial bone	Only Inpatient
21184		Cosmetic & Reconstructive	Reconstruct cranial bone	Only Inpatient
21188		Orthognathic Surgery	Reconstruction of midface	Only Inpatient
21193		Orthognathic Surgery	Reconst lwr jaw w/o graft	
21194		Orthognathic Surgery	Reconst lwr jaw w/graft	Only Inpatient
21195		Orthognathic Surgery	Reconst lwr jaw w/o fixation	
21196		Orthognathic Surgery	Reconst lwr jaw w/fixation	Only Inpatient
21198		Orthognathic Surgery	Reconstr lwr jaw segment	
21199		Orthognathic Surgery	Reconstr lwr jaw w/advance	
21206		Orthognathic Surgery	Reconstruct upper jaw bone	
21208		Cosmetic & Reconstructive	Augmentation of facial bones	
21209		Cosmetic & Reconstructive	Reduction of facial bones	
21210		Orthognathic Surgery	Face bone graft	
21215		Orthognathic Surgery	Lower jaw bone graft	
21230		Cosmetic & Reconstructive	Rib cartilage graft	
21235		Cosmetic & Reconstructive	Ear cartilage graft	
21244		Orthognathic Surgery	Reconstruction of lower jaw	
21245		Orthognathic Surgery	Reconstruction of jaw	
21246		Orthognathic Surgery	Reconstruction of jaw	
21247		Orthognathic Surgery	Reconstruct lower jaw bone	Only Inpatient
21248		Orthognathic Surgery	Reconstruction of jaw	
21249		Orthognathic Surgery	Reconstruction of jaw	
21255		Orthognathic Surgery	Reconstruct lower jaw bone	Only Inpatient
21256		Cosmetic & Reconstructive	Reconstruction of orbit	

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21260		Cosmetic & Reconstructive	Revise eye sockets	
21261		Cosmetic & Reconstructive	Revise eye sockets	
21263		Cosmetic & Reconstructive	Revise eye sockets	
21267		Cosmetic & Reconstructive	Revise eye sockets	
21268		Cosmetic & Reconstructive	Revise eye sockets	Only Inpatient
21275		Cosmetic & Reconstructive	Revision orbitofacial bones	
21280		Cosmetic & Reconstructive	Revision of eyelid	
21282		Cosmetic & Reconstructive	Revision of eyelid	
21295		Orthognathic Surgery	Revision of jaw muscle/bone	
21296		Orthognathic Surgery	Revision of jaw muscle/bone	
21299		Cosmetic & Reconstructive	Cranio/maxillofacial surgery	
21343		Musculoskeletal Surgery	Open tx dprsd front sinus fx	Only Inpatient
21344		Musculoskeletal Surgery	Open tx compl front sinus fx	Only Inpatient
21347		Musculoskeletal Surgery	Opn tx nasomax fx multiple	Only Inpatient
21348		Musculoskeletal Surgery	Opn tx nasomax fx w/graft	Only Inpatient
21366		Musculoskeletal Surgery	Opn tx complx malar w/grft	Only Inpatient
21422		Musculoskeletal Surgery	Treat mouth roof fracture	Only Inpatient
21423		Musculoskeletal Surgery	Treat mouth roof fracture	Only Inpatient
21431		Musculoskeletal Surgery	Treat craniofacial fracture	Only Inpatient
21432		Musculoskeletal Surgery	Treat craniofacial fracture	Only Inpatient
21433		Musculoskeletal Surgery	Treat craniofacial fracture	Only Inpatient
21435		Musculoskeletal Surgery	Treat craniofacial fracture	Only Inpatient
21436		Musculoskeletal Surgery	Treat craniofacial fracture	Only Inpatient
21510		Musculoskeletal Surgery	Drainage of bone lesion	Only Inpatient
21615		Musculoskeletal Surgery	Removal of rib	Only Inpatient
21616		Musculoskeletal Surgery	Removal of rib and nerves	Only Inpatient
21620		Musculoskeletal Surgery	Partial removal of sternum	Only Inpatient
21627		Musculoskeletal Surgery	Sternal debridement	Only Inpatient
21630		Musculoskeletal Surgery	Extensive sternum surgery	Only Inpatient
21632		Musculoskeletal Surgery	Extensive sternum surgery	Only Inpatient
21685		Sleep Apnea Surgeries	Hyoid myotomy & suspension	
21705		Musculoskeletal Surgery	Revision of neck muscle/rib	Only Inpatient
21740		Cosmetic & Reconstructive	Reconstruction of sternum	Only Inpatient
21742		Cosmetic & Reconstructive	Repair stern/nuss w/o scope	
21743		Cosmetic & Reconstructive	Repair sternum/nuss w/scope	
21750		Musculoskeletal Surgery	Repair of sternum separation	Only Inpatient
21825		Musculoskeletal Surgery	Treat sternum fracture	Only Inpatient
22010		Musculoskeletal Surgery	I&d p-spine c/t/cerv-thor	Only Inpatient
22015		Musculoskeletal Surgery	I&d abscess p-spine l/s/l	Only Inpatient
22100		Orthopedic Surgeries	Remove part of neck vertebra	
22101		Orthopedic Surgeries	Remove part thorax vertebra	
22102		Orthopedic Surgeries	Remove part lumbar vertebra	
22110		Orthopedic Surgeries	Remove part of neck vertebra	Only Inpatient
22112		Orthopedic Surgeries	Remove part thorax vertebra	Only Inpatient
22114		Orthopedic Surgeries	Remove part lumbar vertebra	Only Inpatient
22116		Orthopedic Surgeries	Remove extra spine segment	Only Inpatient
22206		Orthopedic Surgeries	Incis spine 3 column thorac	Only Inpatient
22207		Orthopedic Surgeries	Incis spine 3 column lumbar	Only Inpatient
22208		Orthopedic Surgeries	Incis spine 3 column adl seg	Only Inpatient
22210		Orthopedic Surgeries	Incis 1 vertebral seg cerv	Only Inpatient
22212		Orthopedic Surgeries	Incis 1 vertebral seg thorac	Only Inpatient
22214		Orthopedic Surgeries	Incis 1 vertebral seg lumbar	Only Inpatient
22216		Orthopedic Surgeries	Incis addl spine segment	Only Inpatient
22220		Orthopedic Surgeries	Incis w/discectomy cervical	Only Inpatient

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22222		Orthopedic Surgeries	Incis w/discectomy thoracic	Only Inpatient
22224		Orthopedic Surgeries	Incis w/discectomy lumbar	Only Inpatient
22226		Orthopedic Surgeries	Revise extra spine segment	Only Inpatient
22318		Orthopedic Surgeries	Treat odontoid fx w/o graft	Only Inpatient
22319		Orthopedic Surgeries	Treat odontoid fx w/graft	Only Inpatient
22325		Orthopedic Surgeries	Treat spine fracture	Only Inpatient
22326		Orthopedic Surgeries	Treat neck spine fracture	Only Inpatient
22327		Orthopedic Surgeries	Treat thorax spine fracture	Only Inpatient
22328		Orthopedic Surgeries	Treat each add spine fx	Only Inpatient
22510		Percutaneous Vertebroplasty	Perq cervicothoracic inject	
22511		Percutaneous Vertebroplasty	Perq lumbosacral injection	
22512		Percutaneous Vertebroplasty	Vertebroplasty addl inject	
22513		Percutaneous Vertebroplasty	Perq vertebral augmentation	
22514		Percutaneous Vertebroplasty	Perq vertebral augmentation	
22515		Percutaneous Vertebroplasty	Perq vertebral augmentation	
22532		Orthopedic Surgeries	Lat thorax spine fusion	Only Inpatient
22533		Orthopedic Surgeries	Lat lumbar spine fusion	Only Inpatient
22534		Orthopedic Surgeries	Lat thor/lumb addl seg	Only Inpatient
22548		Orthopedic Surgeries	Neck spine fusion	Only Inpatient
22551		Orthopedic Surgeries	Neck spine fuse&remov bel c2	
22554		Orthopedic Surgeries	Neck spine fusion	
22556		Orthopedic Surgeries	Thorax spine fusion	Only Inpatient
22558		Orthopedic Surgeries	Lumbar spine fusion	Only Inpatient
22586		Orthopedic Surgeries	Prescrl fuse w/ instr I5-s1	Only Inpatient
22590		Orthopedic Surgeries	Spine & skull spinal fusion	Only Inpatient
22595		Orthopedic Surgeries	Neck spinal fusion	Only Inpatient
22600		Orthopedic Surgeries	Neck spine fusion	Only Inpatient
22610		Orthopedic Surgeries	Thorax spine fusion	Only Inpatient
22612		Orthopedic Surgeries	Lumbar spine fusion	
22630		Orthopedic Surgeries	Lumbar spine fusion	Only Inpatient
22632		Orthopedic Surgeries	Spine fusion extra segment	Only Inpatient
22633		Orthopedic Surgeries	Lumbar spine fusion combined	Only Inpatient
22634		Orthopedic Surgeries	Spine fusion extra segment	Only Inpatient
22800		Orthopedic Surgeries	Post fusion </6 vert seg	Only Inpatient
22802		Orthopedic Surgeries	Post fusion 7-12 vert seg	Only Inpatient
22804		Orthopedic Surgeries	Post fusion 13/> vert seg	Only Inpatient
22808		Orthopedic Surgeries	Ant fusion 2-3 vert seg	Only Inpatient
22810		Orthopedic Surgeries	Ant fusion 4-7 vert seg	Only Inpatient
22812		Orthopedic Surgeries	Ant fusion 8/> vert seg	Only Inpatient
22818		Orthopedic Surgeries	Kyphectomy 1-2 segments	Only Inpatient
22819		Orthopedic Surgeries	Kyphectomy 3 or more	Only Inpatient
22830		Orthopedic Surgeries	Exploration of spinal fusion	Only Inpatient
22840		Orthopedic Surgeries	Insert spine fixation device	
22841		Orthopedic Surgeries	Insert spine fixation device	Only Inpatient
22842		Orthopedic Surgeries	Insert spine fixation device	
22843		Orthopedic Surgeries	Insert spine fixation device	Only Inpatient
22844		Orthopedic Surgeries	Insert spine fixation device	Only Inpatient
22845		Orthopedic Surgeries	Insert spine fixation device	
22846		Orthopedic Surgeries	Insert spine fixation device	Only Inpatient
22847		Orthopedic Surgeries	Insert spine fixation device	Only Inpatient
22848		Orthopedic Surgeries	Insert pelv fixation device	Only Inpatient
22849		Orthopedic Surgeries	Reinsert spinal fixation	Only Inpatient
22850		Orthopedic Surgeries	Remove spine fixation device	Only Inpatient
22852		Orthopedic Surgeries	Remove spine fixation device	Only Inpatient

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22855		Orthopedic Surgeries	Remove spine fixation device	Only Inpatient
22856		Orthopedic Surgeries	Cerv artific discectomy	
22857		Orthopedic Surgeries	Lumbar artif discectomy	Only Inpatient
22861		Orthopedic Surgeries	Revise cerv artific disc	Only Inpatient
22862		Orthopedic Surgeries	Revise lumbar artif disc	Only Inpatient
22864		Orthopedic Surgeries	Remove cerv artif disc	Only Inpatient
22865		Orthopedic Surgeries	Remove lumb artif disc	Only Inpatient
22899		Orthopedic Surgeries	Spine surgery procedure	
23130		Orthopedic Surgeries	Remove shoulder bone part	
23200		Orthopedic Surgeries	Resect clavicle tumor	Only Inpatient
23210		Orthopedic Surgeries	Resect scapula tumor	Only Inpatient
23220		Orthopedic Surgeries	Resect prox humerus tumor	Only Inpatient
23335		Orthopedic Surgeries	Shoulder prosthesis removal	Only Inpatient
23350		Injection Procedures	Injection for shoulder x-ray	
23410		Orthopedic Surgeries	Repair rotator cuff acute	
23412		Orthopedic Surgeries	Repair rotator cuff chronic	
23415		Orthopedic Surgeries	Release of shoulder ligament	
23420		Orthopedic Surgeries	Repair of shoulder	
23470		Orthopedic Surgeries	Reconstruct shoulder joint	
23472		Musculoskeletal Surgery	Reconstruct shoulder joint	Only Inpatient
23474		Musculoskeletal Surgery	Revis reconst shoulder joint	Only Inpatient
23700		Orthopedic Surgeries	Fixation of shoulder	
23900		Musculoskeletal Surgery	Amputation of arm & girdle	Only Inpatient
23920		Musculoskeletal Surgery	Amputation at shoulder joint	Only Inpatient
24360		Orthopedic Surgeries	Reconstruct elbow joint	
24361		Orthopedic Surgeries	Reconstruct elbow joint	
24362		Orthopedic Surgeries	Reconstruct elbow joint	
24363		Orthopedic Surgeries	Replace elbow joint	
24900		Musculoskeletal Surgery	Amputation of upper arm	Only Inpatient
24920		Musculoskeletal Surgery	Amputation of upper arm	Only Inpatient
24930		Musculoskeletal Surgery	Amputation follow-up surgery	Only Inpatient
24931		Musculoskeletal Surgery	Amputate upper arm & implant	Only Inpatient
24940		Musculoskeletal Surgery	Revision of upper arm	Only Inpatient
25447		Orthopedic Surgeries	Repair wrist joints	
25900		Musculoskeletal Surgery	Amputation of forearm	Only Inpatient
25905		Musculoskeletal Surgery	Amputation of forearm	Only Inpatient
25915		Musculoskeletal Surgery	Amputation of forearm	Only Inpatient
25920		Musculoskeletal Surgery	Amputate hand at wrist	Only Inpatient
25924		Musculoskeletal Surgery	Amputation follow-up surgery	Only Inpatient
25927		Musculoskeletal Surgery	Amputation of hand	Only Inpatient
26055		Orthopedic Surgeries	Incise finger tendon sheath	
26320		Orthopedic Surgeries	Removal of implant from hand	
26551		Musculoskeletal Surgery	Great toe-hand transfer	Only Inpatient
26553		Musculoskeletal Surgery	Single transfer toe-hand	Only Inpatient
26554		Musculoskeletal Surgery	Double transfer toe-hand	Only Inpatient
26556		Musculoskeletal Surgery	Toe joint transfer	Only Inpatient
26992		Musculoskeletal Surgery	Drainage of bone lesion	Only Inpatient
27005		Musculoskeletal Surgery	Incision of hip tendon	Only Inpatient
27025		Musculoskeletal Surgery	Incision of hip/thigh fascia	Only Inpatient
27030		Musculoskeletal Surgery	Drainage of hip joint	Only Inpatient
27036		Musculoskeletal Surgery	Excision of hip joint/muscle	Only Inpatient
27054		Musculoskeletal Surgery	Removal of hip joint lining	Only Inpatient
27070		Musculoskeletal Surgery	Part remove hip bone super	Only Inpatient
27071		Musculoskeletal Surgery	Part removal hip bone deep	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
27075		Musculoskeletal Surgery	Resect hip tumor	Only Inpatient
27076		Musculoskeletal Surgery	Resect hip tum incl acetabul	Only Inpatient
27077		Musculoskeletal Surgery	Resect hip tum w/innom bone	Only Inpatient
27078		Musculoskeletal Surgery	Rsect hip tum incl femur	Only Inpatient
27090		Musculoskeletal Surgery	Removal of hip prosthesis	Only Inpatient
27091		Musculoskeletal Surgery	Removal of hip prosthesis	Only Inpatient
27093		Injection Procedures	Injection for hip x-ray	
27095		Injection Procedures	Injection for hip x-ray	
27096		Injection Procedures	Inject sacroiliac joint	
27120		Orthopedic Surgeries	Reconstruction of hip socket	Only Inpatient
27122		Orthopedic Surgeries	Reconstruction of hip socket	Only Inpatient
27125		Orthopedic Surgeries	Partial hip replacement	Only Inpatient
27130		Orthopedic Surgeries	Total hip arthroplasty	Only Inpatient
27132		Orthopedic Surgeries	Total hip arthroplasty	Only Inpatient
27134		Orthopedic Surgeries	Revise hip joint replacement	Only Inpatient
27137		Orthopedic Surgeries	Revise hip joint replacement	Only Inpatient
27138		Orthopedic Surgeries	Revise hip joint replacement	Only Inpatient
27140		Orthopedic Surgeries	Transplant femur ridge	Only Inpatient
27146		Orthopedic Surgeries	Incision of hip bone	Only Inpatient
27147		Orthopedic Surgeries	Revision of hip bone	Only Inpatient
27151		Orthopedic Surgeries	Incision of hip bones	Only Inpatient
27156		Orthopedic Surgeries	Revision of hip bones	Only Inpatient
27158		Orthopedic Surgeries	Revision of pelvis	Only Inpatient
27161		Orthopedic Surgeries	Incision of neck of femur	Only Inpatient
27165		Orthopedic Surgeries	Incision/fixation of femur	Only Inpatient
27170		Orthopedic Surgeries	Repair/graft femur head/neck	Only Inpatient
27175		Orthopedic Surgeries	Treat slipped epiphysis	Only Inpatient
27176		Orthopedic Surgeries	Treat slipped epiphysis	Only Inpatient
27177		Orthopedic Surgeries	Treat slipped epiphysis	Only Inpatient
27178		Orthopedic Surgeries	Treat slipped epiphysis	Only Inpatient
27181		Orthopedic Surgeries	Treat slipped epiphysis	Only Inpatient
27185		Orthopedic Surgeries	Revision of femur epiphysis	Only Inpatient
27187		Orthopedic Surgeries	Reinforce hip bones	Only Inpatient
27222		Orthopedic Surgeries	Treat hip socket fracture	Only Inpatient
27226		Orthopedic Surgeries	Treat hip wall fracture	Only Inpatient
27227		Orthopedic Surgeries	Treat hip fracture(s)	Only Inpatient
27228		Orthopedic Surgeries	Treat hip fracture(s)	Only Inpatient
27232		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27236		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27240		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27244		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27245		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27248		Orthopedic Surgeries	Treat thigh fracture	Only Inpatient
27253		Orthopedic Surgeries	Treat hip dislocation	Only Inpatient
27254		Orthopedic Surgeries	Treat hip dislocation	Only Inpatient
27258		Orthopedic Surgeries	Treat hip dislocation	Only Inpatient
27259		Orthopedic Surgeries	Treat hip dislocation	Only Inpatient
27268		Orthopedic Surgeries	Cltx thigh fx w/mnpj	Only Inpatient
27269		Orthopedic Surgeries	Optx thigh fx	Only Inpatient
27275		Orthopedic Surgeries	Manipulation of hip joint	
27280		Orthopedic Surgeries	Fusion of sacroiliac joint	Only Inpatient
27282		Orthopedic Surgeries	Fusion of pubic bones	Only Inpatient
27284		Orthopedic Surgeries	Fusion of hip joint	Only Inpatient
27286		Orthopedic Surgeries	Fusion of hip joint	Only Inpatient

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
27290		Orthopedic Surgeries	Amputation of leg at hip	Only Inpatient
27295		Orthopedic Surgeries	Amputation of leg at hip	Only Inpatient
27303		Orthopedic Surgeries	Drainage of bone lesion	Only Inpatient
27324		Orthopedic Surgeries	Biopsy thigh soft tissues	
27365		Orthopedic Surgeries	Resect femur/knee tumor	Only Inpatient
27412		Orthopedic Surgeries	Autochondrocyte implant knee	
27445		Orthopedic Surgeries	Revision of knee joint	Only Inpatient
27446		Orthopedic Surgeries	Revision of knee joint	
27447		Orthopedic Surgeries	Total knee arthroplasty	
27448		Orthopedic Surgeries	Incision of thigh	Only Inpatient
27450		Orthopedic Surgeries	Incision of thigh	Only Inpatient
27454		Orthopedic Surgeries	Realignment of thigh bone	Only Inpatient
27455		Orthopedic Surgeries	Realignment of knee	Only Inpatient
27457		Orthopedic Surgeries	Realignment of knee	Only Inpatient
27465		Orthopedic Surgeries	Shortening of thigh bone	Only Inpatient
27466		Orthopedic Surgeries	Lengthening of thigh bone	Only Inpatient
27468		Orthopedic Surgeries	Shorten/lengthen thighs	Only Inpatient
27470		Orthopedic Surgeries	Repair of thigh	Only Inpatient
27472		Orthopedic Surgeries	Repair/graft of thigh	Only Inpatient
27486		Orthopedic Surgeries	Revise/replace knee joint	Only Inpatient
27487		Orthopedic Surgeries	Revise/replace knee joint	Only Inpatient
27488		Orthopedic Surgeries	Removal of knee prosthesis	Only Inpatient
27495		Orthopedic Surgeries	Reinforce thigh	Only Inpatient
27506		Orthopedic Surgeries	Treatment of thigh fracture	Only Inpatient
27507		Orthopedic Surgeries	Treatment of thigh fracture	Only Inpatient
27511		Orthopedic Surgeries	Treatment of thigh fracture	Only Inpatient
27513		Orthopedic Surgeries	Treatment of thigh fracture	Only Inpatient
27514		Orthopedic Surgeries	Treatment of thigh fracture	Only Inpatient
27519		Orthopedic Surgeries	Treat thigh fx growth plate	Only Inpatient
27535		Orthopedic Surgeries	Treat knee fracture	Only Inpatient
27536		Orthopedic Surgeries	Treat knee fracture	Only Inpatient
27540		Orthopedic Surgeries	Treat knee fracture	Only Inpatient
27556		Orthopedic Surgeries	Treat knee dislocation	Only Inpatient
27557		Orthopedic Surgeries	Treat knee dislocation	Only Inpatient
27558		Orthopedic Surgeries	Treat knee dislocation	Only Inpatient
27570		Orthopedic Surgeries	Fixation of knee joint	
27580		Orthopedic Surgeries	Fusion of knee	Only Inpatient
27590		Orthopedic Surgeries	Amputate leg at thigh	Only Inpatient
27591		Orthopedic Surgeries	Amputate leg at thigh	Only Inpatient
27592		Orthopedic Surgeries	Amputate leg at thigh	Only Inpatient
27596		Orthopedic Surgeries	Amputation follow-up surgery	Only Inpatient
27598		Orthopedic Surgeries	Amputate lower leg at knee	Only Inpatient
27645		Orthopedic Surgeries	Resect tibia tumor	Only Inpatient
27646		Orthopedic Surgeries	Resect fibula tumor	Only Inpatient
27648		Injection Procedures	Injection for ankle x-ray	
27700		Orthopedic Surgeries	Revision of ankle joint	
27702		Orthopedic Surgeries	Reconstruct ankle joint	Only Inpatient
27703		Orthopedic Surgeries	Reconstruction ankle joint	Only Inpatient
27705		Orthopedic Surgeries	Incision of tibia	
27712		Orthopedic Surgeries	Realignment of lower leg	Only Inpatient
27715		Orthopedic Surgeries	Revision of lower leg	Only Inpatient
27724		Orthopedic Surgeries	Repair/graft of tibia	Only Inpatient
27725		Orthopedic Surgeries	Repair of lower leg	Only Inpatient
27727		Orthopedic Surgeries	Repair of lower leg	Only Inpatient



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27808		Orthopedic Surgeries	Treatment of ankle fracture	
27860		Orthopedic Surgeries	Fixation of ankle joint	
27880		Orthopedic Surgeries	Amputation of lower leg	Only Inpatient
27881		Orthopedic Surgeries	Amputation of lower leg	Only Inpatient
27882		Orthopedic Surgeries	Amputation of lower leg	Only Inpatient
27886		Orthopedic Surgeries	Amputation follow-up surgery	Only Inpatient
27888		Orthopedic Surgeries	Amputation of foot at ankle	Only Inpatient
28060		Orthopedic Surgeries	Partial removal foot fascia	
28086		Orthopedic Surgeries	Excise foot tendon sheath	
28118		Orthopedic Surgeries	Removal of heel bone	
28193		Orthopedic Surgeries	Removal of foot foreign body	
28240		Orthopedic Surgeries	Release of big toe	
28292		Foot Surgeries	Correction hallux valgus	
28296		Foot Surgeries	Correction hallux valgus	
28297		Foot Surgeries	Correction hallux valgus	
28298		Foot Surgeries	Correction hallux valgus	
28299		Foot Surgeries	Correction hallux valgus	
28344		Cosmetic & Reconstructive	Repair extra toe(s)	
28446		Orthopedic Surgeries	Osteochondral talus autograft	
28800		Orthopedic Surgeries	Amputation of midfoot	Only Inpatient
28890		Orthopedic Procedures	Hi enrgy eswt plantar fascia	
29824		Orthopedic Surgeries	Shoulder arthroscopy/surgery	
29826		Orthopedic Surgeries	Shoulder arthroscopy/surgery	
29827		Orthopedic Surgeries	Arthroscop rotator cuff repr	
29828		Orthopedic Surgeries	Arthroscopy biceps tenodesis	
29860		Orthopedic Surgeries	Hip arthroscopy dx	
29861		Orthopedic Surgeries	Hip arthro w/fb removal	
29862		Orthopedic Surgeries	Hip arthro w/debridement	
29863		Orthopedic Surgeries	Hip arthro w/synovectomy	
29866		Orthopedic Surgeries	Autograft implant knee w/scope	
29867		Orthopedic Surgeries	Allgraft implant knee w/scope	
29868		Orthopedic Surgeries	Meniscal transpl knee w/scope	
29870		Orthopedic Surgeries	Knee arthroscopy dx	
29871		Orthopedic Surgeries	Knee arthroscopy/drainage	
29873		Orthopedic Surgeries	Knee arthroscopy/surgery	
29874		Orthopedic Surgeries	Knee arthroscopy/surgery	
29875		Orthopedic Surgeries	Knee arthroscopy/surgery	
29876		Orthopedic Surgeries	Knee arthroscopy/surgery	
29877		Orthopedic Surgeries	Knee arthroscopy/surgery	
29879		Orthopedic Surgeries	Knee arthroscopy/surgery	
29880		Orthopedic Surgeries	Knee arthroscopy/surgery	
29881		Orthopedic Surgeries	Knee arthroscopy/surgery	
29882		Orthopedic Surgeries	Knee arthroscopy/surgery	
29883		Orthopedic Surgeries	Knee arthroscopy/surgery	
29884		Orthopedic Surgeries	Knee arthroscopy/surgery	
29885		Orthopedic Surgeries	Knee arthroscopy/surgery	
29914		Orthopedic Surgeries	Hip arthro w/femoroplasty	
29915		Orthopedic Surgeries	Hip arthro acetabuloplasty	
29916		Orthopedic Surgeries	Hip arthro w/labral repair	
29999		Orthopedic Surgeries	Arthroscopy of joint	
30400		Rhinoplasty	Reconstruction of nose	
30410		Rhinoplasty	Reconstruction of nose	
30420		Rhinoplasty	Reconstruction of nose	
30430		Rhinoplasty	Revision of nose	

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Code	Mod	Procedures & Services	Description	Rule Description
30435		Rhinoplasty	Revision of nose	
30450		Rhinoplasty	Revision of nose	
30460		Rhinoplasty	Revision of nose	
30462		Rhinoplasty	Revision of nose	
30465		Cosmetic & Reconstructive	Repair nasal stenosis	
30545		Cosmetic & Reconstructive	Repair nasal defect	
30560		Cosmetic & Reconstructive	Release of nasal adhesions	
30620		Cosmetic & Reconstructive	Intranasal reconstruction	
31225		Respiratory System Surgery	Removal of upper jaw	Only Inpatient
31230		Respiratory System Surgery	Removal of upper jaw	Only Inpatient
31237		Endoscopy	Nasal/sinus endoscopy surg	
31239		Endoscopy	Nasal/sinus endoscopy surg	
31240		Endoscopy	Nasal/sinus endoscopy surg	
31241		Endoscopy	Nsl/sins ndsc w/artery lig	Only Inpatient
31253		Endoscopy	Nsl/sins ndsc total	
31254		Endoscopy	Nsl/sins ndsc w/prtl ethmdct	
31255		Endoscopy	Nsl/sins ndsc w/tot ethmdct	
31256		Endoscopy	Exploration maxillary sinus	
31257		Endoscopy	Nsl/sins ndsc tot w/sphendt	
31259		Endoscopy	Nsl/sins ndsc sphn tiss rmvl	
31267		Endoscopy	Endoscopy maxillary sinus	
31276		Endoscopy	Nsl/sins ndsc frnt tiss rmvl	
31287		Endoscopy	Nasal/sinus endoscopy surg	
31288		Endoscopy	Nasal/sinus endoscopy surg	
31290		Endoscopy	Nasal/sinus endoscopy surg	Only Inpatient
31291		Endoscopy	Nasal/sinus endoscopy surg	Only Inpatient
31292		Endoscopy	Nasal/sinus endoscopy surg	
31293		Endoscopy	Nasal/sinus endoscopy surg	
31294		Endoscopy	Nasal/sinus endoscopy surg	
31295		Endoscopy	Sinus endo w/balloon dil	
31296		Endoscopy	Sinus endo w/balloon dil	
31297		Endoscopy	Sinus endo w/balloon dil	
31298		Endoscopy	Nsl/sins ndsc w/sins dilat	
31360		Respiratory System Surgery	Removal of larynx	Only Inpatient
31365		Respiratory System Surgery	Removal of larynx	Only Inpatient
31367		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31368		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31370		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31375		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31380		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31382		Respiratory System Surgery	Partial removal of larynx	Only Inpatient
31390		Respiratory System Surgery	Removal of larynx & pharynx	Only Inpatient
31395		Respiratory System Surgery	Reconstruct larynx & pharynx	Only Inpatient
31725		Respiratory System Surgery	Clearance of airways	Only Inpatient
31760		Respiratory System Surgery	Repair of windpipe	Only Inpatient
31766		Respiratory System Surgery	Reconstruction of windpipe	Only Inpatient
31770		Respiratory System Surgery	Repair/graft of bronchus	Only Inpatient
31775		Respiratory System Surgery	Reconstruct bronchus	Only Inpatient
31780		Respiratory System Surgery	Reconstruct windpipe	Only Inpatient
31781		Respiratory System Surgery	Reconstruct windpipe	Only Inpatient
31786		Respiratory System Surgery	Remove windpipe lesion	Only Inpatient
31800		Respiratory System Surgery	Repair of windpipe injury	Only Inpatient
31805		Respiratory System Surgery	Repair of windpipe injury	Only Inpatient
32035		Respiratory System Surgery	Thoracostomy w/rib resection	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
32036		Respiratory System Surgery	Thoracostomy w/flap drainage	Only Inpatient
32096		Respiratory System Surgery	Open wedge/bx lung infiltr	Only Inpatient
32097		Respiratory System Surgery	Open wedge/bx lung nodule	Only Inpatient
32098		Respiratory System Surgery	Open biopsy of lung pleura	Only Inpatient
32100		Respiratory System Surgery	Exploration of chest	Only Inpatient
32110		Respiratory System Surgery	Explore/repair chest	Only Inpatient
32120		Respiratory System Surgery	Re-exploration of chest	Only Inpatient
32124		Respiratory System Surgery	Explore chest free adhesions	Only Inpatient
32140		Respiratory System Surgery	Removal of lung lesion(s)	Only Inpatient
32141		Respiratory System Surgery	Remove/treat lung lesions	Only Inpatient
32150		Respiratory System Surgery	Removal of lung lesion(s)	Only Inpatient
32151		Respiratory System Surgery	Remove lung foreign body	Only Inpatient
32160		Respiratory System Surgery	Open chest heart massage	Only Inpatient
32200		Respiratory System Surgery	Drain open lung lesion	Only Inpatient
32215		Respiratory System Surgery	Treat chest lining	Only Inpatient
32220		Respiratory System Surgery	Release of lung	Only Inpatient
32225		Respiratory System Surgery	Partial release of lung	Only Inpatient
32310		Respiratory System Surgery	Removal of chest lining	Only Inpatient
32320		Respiratory System Surgery	Free/remove chest lining	Only Inpatient
32440		Respiratory System Surgery	Remove lung pneumonectomy	Only Inpatient
32442		Respiratory System Surgery	Sleeve pneumonectomy	Only Inpatient
32445		Respiratory System Surgery	Removal of lung extrapleural	Only Inpatient
32480		Respiratory System Surgery	Partial removal of lung	Only Inpatient
32482		Respiratory System Surgery	Bilobectomy	Only Inpatient
32484		Respiratory System Surgery	Segmentectomy	Only Inpatient
32486		Respiratory System Surgery	Sleeve lobectomy	Only Inpatient
32488		Respiratory System Surgery	Completion pneumonectomy	Only Inpatient
32491		Respiratory System Surgery	Lung volume reduction	Only Inpatient
32501		Respiratory System Surgery	Repair bronchus add-on	Only Inpatient
32503		Respiratory System Surgery	Resect apical lung tumor	Only Inpatient
32504		Respiratory System Surgery	Resect apical lung tum/chest	Only Inpatient
32505		Respiratory System Surgery	Wedge resect of lung initial	Only Inpatient
32506		Respiratory System Surgery	Wedge resect of lung add-on	Only Inpatient
32507		Respiratory System Surgery	Wedge resect of lung diag	Only Inpatient
32540		Respiratory System Surgery	Removal of lung lesion	Only Inpatient
32650		Respiratory System Surgery	Thoracoscopy w/pleurodesis	Only Inpatient
32651		Respiratory System Surgery	Thoracoscopy remove cortex	Only Inpatient
32652		Respiratory System Surgery	Thoracoscopy rem totl cortex	Only Inpatient
32653		Respiratory System Surgery	Thoracoscopy remov fb/fibrin	Only Inpatient
32654		Respiratory System Surgery	Thoracoscopy contrl bleeding	Only Inpatient
32655		Respiratory System Surgery	Thoracoscopy resect bullae	Only Inpatient
32656		Respiratory System Surgery	Thoracoscopy w/pleurectomy	Only Inpatient
32658		Respiratory System Surgery	Thoracoscopy w/sac fb remove	Only Inpatient
32659		Respiratory System Surgery	Thoracoscopy w/sac drainage	Only Inpatient
32661		Respiratory System Surgery	Thoracoscopy w/pericard exc	Only Inpatient
32662		Respiratory System Surgery	Thoracoscopy w/mediast exc	Only Inpatient
32663		Respiratory System Surgery	Thoracoscopy w/lobectomy	Only Inpatient
32664		Respiratory System Surgery	Thoracoscopy w/ th nrv exc	Only Inpatient
32665		Respiratory System Surgery	Thoracoscopy w/esoph musc exc	Only Inpatient
32666		Respiratory System Surgery	Thoracoscopy w/wedge resect	Only Inpatient
32667		Respiratory System Surgery	Thoracoscopy w/w resect addl	Only Inpatient
32668		Respiratory System Surgery	Thoracoscopy w/w resect diag	Only Inpatient
32669		Respiratory System Surgery	Thoracoscopy remove segment	Only Inpatient
32670		Respiratory System Surgery	Thoracoscopy bilobectomy	Only Inpatient

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32671		Respiratory System Surgery	Thoracoscopy pneumonectomy	Only Inpatient
32672		Respiratory System Surgery	Thoracoscopy for lvrs	Only Inpatient
32673		Respiratory System Surgery	Thoracoscopy w/thymus resect	Only Inpatient
32674		Respiratory System Surgery	Thoracoscopy lymph node exc	Only Inpatient
32701		Therapeutic Radiology Services	Thorax stereo rad targetw/tx	
32800		Respiratory System Surgery	Repair lung hernia	Only Inpatient
32810		Respiratory System Surgery	Close chest after drainage	Only Inpatient
32815		Respiratory System Surgery	Close bronchial fistula	Only Inpatient
32820		Respiratory System Surgery	Reconstruct injured chest	Only Inpatient
32850		Transplant Procedures	Donor pneumonectomy	Only Inpatient
32851		Transplant Procedures	Lung transplant single	Only Inpatient
32852		Transplant Procedures	Lung transplant with bypass	Only Inpatient
32853		Transplant Procedures	Lung transplant double	Only Inpatient
32854		Transplant Procedures	Lung transplant with bypass	Only Inpatient
32855		Transplant Procedures	Prepare donor lung single	Only Inpatient
32856		Transplant Procedures	Prepare donor lung double	Only Inpatient
32900		Respiratory System Surgery	Removal of rib(s)	Only Inpatient
32905		Respiratory System Surgery	Revise & repair chest wall	Only Inpatient
32906		Respiratory System Surgery	Revise & repair chest wall	Only Inpatient
32940		Respiratory System Surgery	Revision of lung	Only Inpatient
32997		Respiratory System Surgery	Total lung lavage	Only Inpatient
33015		Cardiovascular Surgery	Incision of heart sac	Only Inpatient
33020		Cardiovascular Surgery	Incision of heart sac	Only Inpatient
33025		Cardiovascular Surgery	Incision of heart sac	Only Inpatient
33030		Cardiovascular Surgery	Partial removal of heart sac	Only Inpatient
33031		Cardiovascular Surgery	Partial removal of heart sac	Only Inpatient
33050		Cardiovascular Surgery	Resect heart sac lesion	Only Inpatient
33120		Cardiovascular Surgery	Removal of heart lesion	Only Inpatient
33130		Cardiovascular Surgery	Removal of heart lesion	Only Inpatient
33140		Cardiovascular Surgery	Heart revascularize (tmr)	Only Inpatient
33141		Cardiovascular Surgery	Heart tmr w/other procedure	Only Inpatient
33202		Cardiovascular Surgery	Insert epicard eltrd open	Only Inpatient
33203		Cardiovascular Surgery	Insert epicard eltrd endo	Only Inpatient
33206		Cardiovascular Surgery	Insert heart pm atrial	
33207		Cardiovascular Surgery	Insert heart pm ventricular	
33208		Cardiovascular Surgery	Insrt heart pm atrial & vent	
33212		Cardiovascular Surgery	Insert pulse gen sngl lead	
33213		Cardiovascular Surgery	Insert pulse gen dual leads	
33214		Cardiovascular Surgery	Upgrade of pacemaker system	
33221		Cardiovascular Surgery	Insert pulse gen mult leads	
33224		Cardiovascular Surgery	Insert pacing lead & connect	
33225		Cardiovascular Surgery	L ventric pacing lead add-on	
33227		Cardiovascular Surgery	Remove&replace pm gen singl	
33228		Cardiovascular Surgery	Remv&replc pm gen dual lead	
33229		Cardiovascular Surgery	Remv&replc pm gen mult leads	
33230		Cardiovascular Surgery	Insrt pulse gen w/dual leads	
33231		Cardiovascular Surgery	Insrt pulse gen w/mult leads	
33236		Cardiovascular Surgery	Remove electrode/thoracotomy	Only Inpatient
33237		Cardiovascular Surgery	Remove electrode/thoracotomy	Only Inpatient
33238		Cardiovascular Surgery	Remove electrode/thoracotomy	Only Inpatient
33240		Cardiovascular Surgery	Insrt pulse gen w/singl lead	
33243		Cardiovascular Surgery	Remove eltrd/thoracotomy	Only Inpatient
33249		Cardiovascular Surgery	Insj/rplcmt defib w/lead(s)	
33250		Cardiovascular Surgery	Ablate heart dysrhythm focus	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
33251		Cardiovascular Surgery	Ablate heart dysrhythm focus	Only Inpatient
33254		Cardiovascular Surgery	Ablate atria lmtd	Only Inpatient
33255		Cardiovascular Surgery	Ablate atria w/o bypass ext	Only Inpatient
33256		Cardiovascular Surgery	Ablate atria w/bypass exten	Only Inpatient
33257		Cardiovascular Surgery	Ablate atria lmtd add-on	Only Inpatient
33258		Cardiovascular Surgery	Ablate atria x10sv add-on	Only Inpatient
33259		Cardiovascular Surgery	Ablate atria w/bypass add-on	Only Inpatient
33261		Cardiovascular Surgery	Ablate heart dysrhythm focus	Only Inpatient
33262		Cardiovascular Surgery	Rmvl& replc pulse gen 1 lead	
33263		Cardiovascular Surgery	Rmvl & rplcmt dfb gen 2 lead	
33264		Cardiovascular Surgery	Rmvl & rplcmt dfb gen mlt ld	
33265		Cardiovascular Surgery	Ablate atria lmtd endo	Only Inpatient
33266		Cardiovascular Surgery	Ablate atria x10sv endo	Only Inpatient
33282		Cardiovascular Surgery	Implant pat-active ht record	
33300		Cardiovascular Surgery	Repair of heart wound	Only Inpatient
33305		Cardiovascular Surgery	Repair of heart wound	Only Inpatient
33310		Cardiovascular Surgery	Exploratory heart surgery	Only Inpatient
33315		Cardiovascular Surgery	Exploratory heart surgery	Only Inpatient
33320		Cardiovascular Surgery	Repair major blood vessel(s)	Only Inpatient
33321		Cardiovascular Surgery	Repair major vessel	Only Inpatient
33322		Cardiovascular Surgery	Repair major blood vessel(s)	Only Inpatient
33330		Cardiovascular Surgery	Insert major vessel graft	Only Inpatient
33335		Cardiovascular Surgery	Insert major vessel graft	Only Inpatient
33340		Cardiovascular Surgery	Perq clr tcat l atr apndge	Only Inpatient
33361		Cardiovascular Surgery	Replace aortic valve perq	Only Inpatient
33362		Cardiovascular Surgery	Replace aortic valve open	Only Inpatient
33363		Cardiovascular Surgery	Replace aortic valve open	Only Inpatient
33364		Cardiovascular Surgery	Replace aortic valve open	Only Inpatient
33365		Cardiovascular Surgery	Replace aortic valve open	Only Inpatient
33366		Cardiovascular Surgery	Trcath replace aortic valve	Only Inpatient
33367		Cardiovascular Surgery	Replace aortic valve w/byp	Only Inpatient
33368		Cardiovascular Surgery	Replace aortic valve w/byp	Only Inpatient
33369		Cardiovascular Surgery	Replace aortic valve w/byp	Only Inpatient
33390		Cardiovascular Surgery	Valvuloplasty aortic valve	Only Inpatient
33391		Cardiovascular Surgery	Valvuloplasty aortic valve	Only Inpatient
33404		Cardiovascular Surgery	Prepare heart-aorta conduit	Only Inpatient
33405		Cardiovascular Surgery	Replacement aortic valve opn	Only Inpatient
33406		Cardiovascular Surgery	Replacement aortic valve opn	Only Inpatient
33410		Cardiovascular Surgery	Replacement aortic valve opn	Only Inpatient
33411		Cardiovascular Surgery	Replacement of aortic valve	Only Inpatient
33412		Cardiovascular Surgery	Replacement of aortic valve	Only Inpatient
33413		Cardiovascular Surgery	Replacement of aortic valve	Only Inpatient
33414		Cardiovascular Surgery	Repair of aortic valve	Only Inpatient
33415		Cardiovascular Surgery	Revision subvalvular tissue	Only Inpatient
33416		Cardiovascular Surgery	Revise ventricle muscle	Only Inpatient
33417		Cardiovascular Surgery	Repair of aortic valve	Only Inpatient
33418		Cardiovascular Surgery	Repair tcat mitral valve	Only Inpatient
33420		Cardiovascular Surgery	Revision of mitral valve	Only Inpatient
33422		Cardiovascular Surgery	Revision of mitral valve	Only Inpatient
33425		Cardiovascular Surgery	Repair of mitral valve	Only Inpatient
33426		Cardiovascular Surgery	Repair of mitral valve	Only Inpatient
33427		Cardiovascular Surgery	Repair of mitral valve	Only Inpatient
33430		Cardiovascular Surgery	Replacement of mitral valve	Only Inpatient
33460		Cardiovascular Surgery	Revision of tricuspid valve	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
33463		Cardiovascular Surgery	Valvuloplasty tricuspid	Only Inpatient
33464		Cardiovascular Surgery	Valvuloplasty tricuspid	Only Inpatient
33465		Cardiovascular Surgery	Replace tricuspid valve	Only Inpatient
33468		Cardiovascular Surgery	Revision of tricuspid valve	Only Inpatient
33470		Cardiovascular Surgery	Revision of pulmonary valve	Only Inpatient
33471		Cardiovascular Surgery	Valvotomy pulmonary valve	Only Inpatient
33474		Cardiovascular Surgery	Revision of pulmonary valve	Only Inpatient
33475		Cardiovascular Surgery	Replacement pulmonary valve	Only Inpatient
33476		Cardiovascular Surgery	Revision of heart chamber	Only Inpatient
33477		Cardiovascular Surgery	Implant tcvt pulm vlv perq	Only Inpatient
33478		Cardiovascular Surgery	Revision of heart chamber	Only Inpatient
33496		Cardiovascular Surgery	Repair prosth valve clot	Only Inpatient
33500		Cardiovascular Surgery	Repair heart vessel fistula	Only Inpatient
33501		Cardiovascular Surgery	Repair heart vessel fistula	Only Inpatient
33502		Cardiovascular Surgery	Coronary artery correction	Only Inpatient
33503		Cardiovascular Surgery	Coronary artery graft	Only Inpatient
33504		Cardiovascular Surgery	Coronary artery graft	Only Inpatient
33505		Cardiovascular Surgery	Repair artery w/tunnel	Only Inpatient
33506		Cardiovascular Surgery	Repair artery translocation	Only Inpatient
33507		Cardiovascular Surgery	Repair art intramural	Only Inpatient
33510		Cardiovascular Surgery	Cabg vein single	Only Inpatient
33511		Cardiovascular Surgery	Cabg vein two	Only Inpatient
33512		Cardiovascular Surgery	Cabg vein three	Only Inpatient
33513		Cardiovascular Surgery	Cabg vein four	Only Inpatient
33514		Cardiovascular Surgery	Cabg vein five	Only Inpatient
33516		Cardiovascular Surgery	Cabg vein six or more	Only Inpatient
33517		Cardiovascular Surgery	Cabg artery-vein single	Only Inpatient
33518		Cardiovascular Surgery	Cabg artery-vein two	Only Inpatient
33519		Cardiovascular Surgery	Cabg artery-vein three	Only Inpatient
33521		Cardiovascular Surgery	Cabg artery-vein four	Only Inpatient
33522		Cardiovascular Surgery	Cabg artery-vein five	Only Inpatient
33523		Cardiovascular Surgery	Cabg art-vein six or more	Only Inpatient
33530		Cardiovascular Surgery	Coronary artery bypass/reop	Only Inpatient
33533		Cardiovascular Surgery	Cabg arterial single	Only Inpatient
33534		Cardiovascular Surgery	Cabg arterial two	Only Inpatient
33535		Cardiovascular Surgery	Cabg arterial three	Only Inpatient
33536		Cardiovascular Surgery	Cabg arterial four or more	Only Inpatient
33542		Cardiovascular Surgery	Removal of heart lesion	Only Inpatient
33545		Cardiovascular Surgery	Repair of heart damage	Only Inpatient
33548		Cardiovascular Surgery	Restore/remodel ventricle	Only Inpatient
33572		Cardiovascular Surgery	Open coronary endarterectomy	Only Inpatient
33600		Cardiovascular Surgery	Closure of valve	Only Inpatient
33602		Cardiovascular Surgery	Closure of valve	Only Inpatient
33606		Cardiovascular Surgery	Anastomosis/artery-aorta	Only Inpatient
33608		Cardiovascular Surgery	Repair anomaly w/conduit	Only Inpatient
33610		Cardiovascular Surgery	Repair by enlargement	Only Inpatient
33611		Cardiovascular Surgery	Repair double ventricle	Only Inpatient
33612		Cardiovascular Surgery	Repair double ventricle	Only Inpatient
33615		Cardiovascular Surgery	Repair modified fontan	Only Inpatient
33617		Cardiovascular Surgery	Repair single ventricle	Only Inpatient
33619		Cardiovascular Surgery	Repair single ventricle	Only Inpatient
33620		Cardiovascular Surgery	Apply r&l pulm art bands	Only Inpatient
33621		Cardiovascular Surgery	Transthor cath for stent	Only Inpatient
33622		Cardiovascular Surgery	Redo compl cardiac anomaly	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
33641		Cardiovascular Surgery	Repair heart septum defect	Only Inpatient
33645		Cardiovascular Surgery	Revision of heart veins	Only Inpatient
33647		Cardiovascular Surgery	Repair heart septum defects	Only Inpatient
33660		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33665		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33670		Cardiovascular Surgery	Repair of heart chambers	Only Inpatient
33675		Cardiovascular Surgery	Close mult vsd	Only Inpatient
33676		Cardiovascular Surgery	Close mult vsd w/resection	Only Inpatient
33677		Cardiovascular Surgery	Cl mult vsd w/rem pul band	Only Inpatient
33681		Cardiovascular Surgery	Repair heart septum defect	Only Inpatient
33684		Cardiovascular Surgery	Repair heart septum defect	Only Inpatient
33688		Cardiovascular Surgery	Repair heart septum defect	Only Inpatient
33690		Cardiovascular Surgery	Reinforce pulmonary artery	Only Inpatient
33692		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33694		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33697		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33702		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33710		Cardiovascular Surgery	Repair of heart defects	Only Inpatient
33720		Cardiovascular Surgery	Repair of heart defect	Only Inpatient
33722		Cardiovascular Surgery	Repair of heart defect	Only Inpatient
33724		Cardiovascular Surgery	Repair venous anomaly	Only Inpatient
33726		Cardiovascular Surgery	Repair pul venous stenosis	Only Inpatient
33730		Cardiovascular Surgery	Repair heart-vein defect(s)	Only Inpatient
33732		Cardiovascular Surgery	Repair heart-vein defect	Only Inpatient
33735		Cardiovascular Surgery	Revision of heart chamber	Only Inpatient
33736		Cardiovascular Surgery	Revision of heart chamber	Only Inpatient
33737		Cardiovascular Surgery	Revision of heart chamber	Only Inpatient
33750		Cardiovascular Surgery	Major vessel shunt	Only Inpatient
33755		Cardiovascular Surgery	Major vessel shunt	Only Inpatient
33762		Cardiovascular Surgery	Major vessel shunt	Only Inpatient
33764		Cardiovascular Surgery	Major vessel shunt & graft	Only Inpatient
33766		Cardiovascular Surgery	Major vessel shunt	Only Inpatient
33767		Cardiovascular Surgery	Major vessel shunt	Only Inpatient
33768		Cardiovascular Surgery	Cavopulmonary shunting	Only Inpatient
33770		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33771		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33774		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33775		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33776		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33777		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33778		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33779		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33780		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33781		Cardiovascular Surgery	Repair great vessels defect	Only Inpatient
33782		Cardiovascular Surgery	Nikaidoh proc	Only Inpatient
33783		Cardiovascular Surgery	Nikaidoh proc w/ostia implt	Only Inpatient
33786		Cardiovascular Surgery	Repair arterial trunk	Only Inpatient
33788		Cardiovascular Surgery	Revision of pulmonary artery	Only Inpatient
33800		Cardiovascular Surgery	Aortic suspension	Only Inpatient
33802		Cardiovascular Surgery	Repair vessel defect	Only Inpatient
33803		Cardiovascular Surgery	Repair vessel defect	Only Inpatient
33813		Cardiovascular Surgery	Repair septal defect	Only Inpatient
33814		Cardiovascular Surgery	Repair septal defect	Only Inpatient
33820		Cardiovascular Surgery	Revise major vessel	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
33822		Cardiovascular Surgery	Revise major vessel	Only Inpatient
33824		Cardiovascular Surgery	Revise major vessel	Only Inpatient
33840		Cardiovascular Surgery	Remove aorta constriction	Only Inpatient
33845		Cardiovascular Surgery	Remove aorta constriction	Only Inpatient
33851		Cardiovascular Surgery	Remove aorta constriction	Only Inpatient
33852		Cardiovascular Surgery	Repair septal defect	Only Inpatient
33853		Cardiovascular Surgery	Repair septal defect	Only Inpatient
33860		Cardiovascular Surgery	Ascending aortic graft	Only Inpatient
33863		Cardiovascular Surgery	Ascending aortic graft	Only Inpatient
33864		Cardiovascular Surgery	Ascending aortic graft	Only Inpatient
33870		Cardiovascular Surgery	Transverse aortic arch graft	Only Inpatient
33875		Cardiovascular Surgery	Thoracic aortic graft	Only Inpatient
33877		Cardiovascular Surgery	Thoracoabdominal graft	Only Inpatient
33880		Cardiovascular Surgery	Endovasc taa repr incl subcl	Only Inpatient
33881		Cardiovascular Surgery	Endovasc taa repr w/o subcl	Only Inpatient
33883		Cardiovascular Surgery	Insert endovasc prosth taa	Only Inpatient
33884		Cardiovascular Surgery	Endovasc prosth taa add-on	Only Inpatient
33886		Cardiovascular Surgery	Endovasc prosth delayed	Only Inpatient
33889		Cardiovascular Surgery	Artery transpose/endovas taa	Only Inpatient
33891		Cardiovascular Surgery	Car-car bp grft/endovas taa	Only Inpatient
33910		Cardiovascular Surgery	Remove lung artery emboli	Only Inpatient
33915		Cardiovascular Surgery	Remove lung artery emboli	Only Inpatient
33916		Cardiovascular Surgery	Surgery of great vessel	Only Inpatient
33917		Cardiovascular Surgery	Repair pulmonary artery	Only Inpatient
33920		Cardiovascular Surgery	Repair pulmonary atresia	Only Inpatient
33922		Cardiovascular Surgery	Transect pulmonary artery	Only Inpatient
33924		Cardiovascular Surgery	Remove pulmonary shunt	Only Inpatient
33925		Cardiovascular Surgery	Rpr pul art unifocal w/o cpb	Only Inpatient
33926		Cardiovascular Surgery	Repr pul art unifocal w/cpb	Only Inpatient
33927		Cardiovascular Surgery	Impltj tot rplcmt hrt sys	Only Inpatient
33928		Cardiovascular Surgery	Rmvl & rplcmt tot hrt sys	Only Inpatient
33929		Cardiovascular Surgery	Rmvl rplcmt hrt sys f/trnspl	Only Inpatient
33930		Transplant Procedures	Removal of donor heart/lung	Only Inpatient
33933		Transplant Procedures	Prepare donor heart/lung	Only Inpatient
33935		Transplant Procedures	Transplantation heart/lung	Only Inpatient
33940		Transplant Procedures	Removal of donor heart	Only Inpatient
33944		Transplant Procedures	Prepare donor heart	Only Inpatient
33945		Transplant Procedures	Transplantation of heart	Only Inpatient
33946		Cardiovascular Surgery	Ecmo/ecls initiation venous	Only Inpatient
33947		Cardiovascular Surgery	Ecmo/ecls initiation artery	Only Inpatient
33948		Cardiovascular Surgery	Ecmo/ecls daily mgmt-venous	Only Inpatient
33949		Cardiovascular Surgery	Ecmo/ecls daily mgmt artery	Only Inpatient
33951		Cardiovascular Surgery	Ecmo/ecls insj prph cannula	Only Inpatient
33952		Cardiovascular Surgery	Ecmo/ecls insj prph cannula	Only Inpatient
33953		Cardiovascular Surgery	Ecmo/ecls insj prph cannula	Only Inpatient
33954		Cardiovascular Surgery	Ecmo/ecls insj prph cannula	Only Inpatient
33955		Cardiovascular Surgery	Ecmo/ecls insj ctr cannula	Only Inpatient
33956		Cardiovascular Surgery	Ecmo/ecls insj ctr cannula	Only Inpatient
33957		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient
33958		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient
33959		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient
33962		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient
33963		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient
33964		Cardiovascular Surgery	Ecmo/ecls repos perph cnula	Only Inpatient



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Code	Mod	Procedures & Services	Description	Rule Description
33965		Cardiovascular Surgery	Ecmo/ecls rmvl perph cannula	Only Inpatient
33966		Cardiovascular Surgery	Ecmo/ecls rmvl prph cannula	Only Inpatient
33967		Cardiovascular Surgery	Insert i-aort percut device	Only Inpatient
33968		Cardiovascular Surgery	Remove aortic assist device	Only Inpatient
33969		Cardiovascular Surgery	Ecmo/ecls rmvl perph cannula	Only Inpatient
33970		Cardiovascular Surgery	Aortic circulation assist	Only Inpatient
33971		Cardiovascular Surgery	Aortic circulation assist	Only Inpatient
33973		Cardiovascular Surgery	Insert balloon device	Only Inpatient
33974		Cardiovascular Surgery	Remove intra-aortic balloon	Only Inpatient
33975		Cardiovascular Surgery	Implant ventricular device	Only Inpatient
33976		Cardiovascular Surgery	Implant ventricular device	Only Inpatient
33977		Cardiovascular Surgery	Remove ventricular device	Only Inpatient
33978		Cardiovascular Surgery	Remove ventricular device	Only Inpatient
33979		Cardiovascular Surgery	Insert intracorporeal device	Only Inpatient
33980		Cardiovascular Surgery	Remove intracorporeal device	Only Inpatient
33981		Cardiovascular Surgery	Replace vad pump ext	Only Inpatient
33982		Cardiovascular Surgery	Replace vad intra w/o bp	Only Inpatient
33983		Cardiovascular Surgery	Replace vad intra w/bp	Only Inpatient
33984		Cardiovascular Surgery	Ecmo/ecls rmvl prph cannula	Only Inpatient
33985		Cardiovascular Surgery	Ecmo/ecls rmvl ctr cannula	Only Inpatient
33986		Cardiovascular Surgery	Ecmo/ecls rmvl ctr cannula	Only Inpatient
33987		Cardiovascular Surgery	Artery expos/graft artery	Only Inpatient
33988		Cardiovascular Surgery	Insertion of left heart vent	Only Inpatient
33989		Cardiovascular Surgery	Removal of left heart vent	Only Inpatient
33990		Cardiovascular Surgery	Insert vad artery access	Only Inpatient
33991		Cardiovascular Surgery	Insert vad art&vein access	Only Inpatient
33992		Cardiovascular Surgery	Remove vad different session	Only Inpatient
33993		Cardiovascular Surgery	Reposition vad diff session	Only Inpatient
34001		Vascular Surgery	Removal of artery clot	Only Inpatient
34051		Vascular Surgery	Removal of artery clot	Only Inpatient
34151		Vascular Surgery	Removal of artery clot	Only Inpatient
34401		Vascular Surgery	Removal of vein clot	Only Inpatient
34451		Vascular Surgery	Removal of vein clot	Only Inpatient
34502		Vascular Surgery	Reconstruct vena cava	Only Inpatient
34701		Vascular Surgery	Evasc rpr a-ao ndgft	Only Inpatient
34702		Vascular Surgery	Evasc rpr a-ao ndgft rpt	Only Inpatient
34703		Vascular Surgery	Evasc rpr a-unilac ndgft	Only Inpatient
34704		Vascular Surgery	Evasc rpr a-unilac ndgft rpt	Only Inpatient
34705		Vascular Surgery	Evasc rpr a-biiliac ndgft	Only Inpatient
34706		Vascular Surgery	Evasc rpr a-biiliac rpt	Only Inpatient
34707		Vascular Surgery	Evasc rpr ilio-iliac ndgft	Only Inpatient
34708		Vascular Surgery	Evasc rpr ilio-iliac rpt	Only Inpatient
34709		Vascular Surgery	Plmt xtn prosth evasc rpr	Only Inpatient
34710		Vascular Surgery	Dlyd plmt xtn prosth 1st vsl	Only Inpatient
34711		Vascular Surgery	Dlyd plmt xtn prosth ea addl	Only Inpatient
34712		Vascular Surgery	Tcat dlvr enhncd fixj dev	Only Inpatient
34713		Vascular Surgery	Perq access & clsr fem art	
34715		Vascular Surgery	Opn ax/subcla art expos	
34808		Vascular Surgery	Endovas iliac a device addon	Only Inpatient
34812		Vascular Surgery	Opn fem art expos	Only Inpatient
34813		Vascular Surgery	Femoral endovas graft add-on	Only Inpatient
34820		Vascular Surgery	Opn iliac art expos	Only Inpatient
34830		Vascular Surgery	Open aortic tube prosth repr	Only Inpatient
34831		Vascular Surgery	Open aortoiliac prosth repr	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
34832		Vascular Surgery	Open aortofemor prosth repr	Only Inpatient
34833		Vascular Surgery	Opn ilac art expos cndt crtj	Only Inpatient
34834		Vascular Surgery	Opn brach art expos	Only Inpatient
34841		Vascular Surgery	Endovasc visc aorta 1 graft	Only Inpatient
34842		Vascular Surgery	Endovasc visc aorta 2 graft	Only Inpatient
34843		Vascular Surgery	Endovasc visc aorta 3 graft	Only Inpatient
34844		Vascular Surgery	Endovasc visc aorta 4 graft	Only Inpatient
34845		Vascular Surgery	Visc & infraren abd 1 prosth	Only Inpatient
34846		Vascular Surgery	Visc & infraren abd 2 prosth	Only Inpatient
34847		Vascular Surgery	Visc & infraren abd 3 prosth	Only Inpatient
34848		Vascular Surgery	Visc & infraren abd 4+ prost	Only Inpatient
35001		Vascular Surgery	Repair defect of artery	Only Inpatient
35002		Vascular Surgery	Repair artery rupture neck	Only Inpatient
35005		Vascular Surgery	Repair defect of artery	Only Inpatient
35013		Vascular Surgery	Repair artery rupture arm	Only Inpatient
35021		Vascular Surgery	Repair defect of artery	Only Inpatient
35022		Vascular Surgery	Repair artery rupture chest	Only Inpatient
35081		Vascular Surgery	Repair defect of artery	Only Inpatient
35082		Vascular Surgery	Repair artery rupture aorta	Only Inpatient
35091		Vascular Surgery	Repair defect of artery	Only Inpatient
35092		Vascular Surgery	Repair artery rupture aorta	Only Inpatient
35102		Vascular Surgery	Repair defect of artery	Only Inpatient
35103		Vascular Surgery	Repair artery rupture aorta	Only Inpatient
35111		Vascular Surgery	Repair defect of artery	Only Inpatient
35112		Vascular Surgery	Repair artery rupture spleen	Only Inpatient
35121		Vascular Surgery	Repair defect of artery	Only Inpatient
35122		Vascular Surgery	Repair artery rupture belly	Only Inpatient
35131		Vascular Surgery	Repair defect of artery	Only Inpatient
35132		Vascular Surgery	Repair artery rupture groin	Only Inpatient
35141		Vascular Surgery	Repair defect of artery	Only Inpatient
35142		Vascular Surgery	Repair artery rupture thigh	Only Inpatient
35151		Vascular Surgery	Repair defect of artery	Only Inpatient
35152		Vascular Surgery	Repair ruptd popliteal art	Only Inpatient
35182		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35189		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35211		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35216		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35221		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35241		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35246		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35251		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35271		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35276		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35281		Vascular Surgery	Repair blood vessel lesion	Only Inpatient
35301		Vascular Surgery	Rechanneling of artery	Only Inpatient
35302		Vascular Surgery	Rechanneling of artery	Only Inpatient
35303		Vascular Surgery	Rechanneling of artery	Only Inpatient
35304		Vascular Surgery	Rechanneling of artery	Only Inpatient
35305		Vascular Surgery	Rechanneling of artery	Only Inpatient
35306		Vascular Surgery	Rechanneling of artery	Only Inpatient
35311		Vascular Surgery	Rechanneling of artery	Only Inpatient
35331		Vascular Surgery	Rechanneling of artery	Only Inpatient
35341		Vascular Surgery	Rechanneling of artery	Only Inpatient
35351		Vascular Surgery	Rechanneling of artery	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
35355		Vascular Surgery	Rechanneling of artery	Only Inpatient
35361		Vascular Surgery	Rechanneling of artery	Only Inpatient
35363		Vascular Surgery	Rechanneling of artery	Only Inpatient
35371		Vascular Surgery	Rechanneling of artery	Only Inpatient
35372		Vascular Surgery	Rechanneling of artery	Only Inpatient
35390		Vascular Surgery	Reoperation carotid add-on	Only Inpatient
35400		Vascular Surgery	Angioscopy	Only Inpatient
35501		Vascular Surgery	Art byp grft ipsilat carotid	Only Inpatient
35506		Vascular Surgery	Art byp grft subclav-carotid	Only Inpatient
35508		Vascular Surgery	Art byp grft carotid-vertbrl	Only Inpatient
35509		Vascular Surgery	Art byp grft contral carotid	Only Inpatient
35510		Vascular Surgery	Art byp grft carotid-brchial	Only Inpatient
35511		Vascular Surgery	Art byp grft subclav-subclav	Only Inpatient
35512		Vascular Surgery	Art byp grft subclav-brchial	Only Inpatient
35515		Vascular Surgery	Art byp grft subclav-vertbrl	Only Inpatient
35516		Vascular Surgery	Art byp grft subclav-axillary	Only Inpatient
35518		Vascular Surgery	Art byp grft axillary-axilry	Only Inpatient
35521		Vascular Surgery	Art byp grft axill-femoral	Only Inpatient
35522		Vascular Surgery	Art byp grft axill-brachial	Only Inpatient
35523		Vascular Surgery	Art byp grft brchl-ulnr-rdl	Only Inpatient
35525		Vascular Surgery	Art byp grft brachial-brchl	Only Inpatient
35526		Vascular Surgery	Art byp grft aor/carot/innom	Only Inpatient
35531		Vascular Surgery	Art byp grft aorcel/aormesen	Only Inpatient
35533		Vascular Surgery	Art byp grft axill/fem/fem	Only Inpatient
35535		Vascular Surgery	Art byp grft hepatorenal	Only Inpatient
35536		Vascular Surgery	Art byp grft splenorenal	Only Inpatient
35537		Vascular Surgery	Art byp grft aortoiliac	Only Inpatient
35538		Vascular Surgery	Art byp grft aortobi-iliac	Only Inpatient
35539		Vascular Surgery	Art byp grft aortofemoral	Only Inpatient
35540		Vascular Surgery	Art byp grft aortbifemoral	Only Inpatient
35556		Vascular Surgery	Art byp grft fem-popliteal	Only Inpatient
35558		Vascular Surgery	Art byp grft fem-femoral	Only Inpatient
35560		Vascular Surgery	Art byp grft aortorenal	Only Inpatient
35563		Vascular Surgery	Art byp grft ilioiliac	Only Inpatient
35565		Vascular Surgery	Art byp grft iliofemoral	Only Inpatient
35566		Vascular Surgery	Art byp fem-ant-post tib/prl	Only Inpatient
35570		Vascular Surgery	Art byp tibial-tib/peroneal	Only Inpatient
35571		Vascular Surgery	Art byp pop-tibl-prl-other	Only Inpatient
35583		Vascular Surgery	Vein byp grft fem-popliteal	Only Inpatient
35585		Vascular Surgery	Vein byp fem-tibial peroneal	Only Inpatient
35587		Vascular Surgery	Vein byp pop-tibl peroneal	Only Inpatient
35600		Vascular Surgery	Harvest art for cabg add-on	Only Inpatient
35601		Vascular Surgery	Art byp common ipsi carotid	Only Inpatient
35606		Vascular Surgery	Art byp carotid-subclavian	Only Inpatient
35612		Vascular Surgery	Art byp subclav-subclavian	Only Inpatient
35616		Vascular Surgery	Art byp subclav-axillary	Only Inpatient
35621		Vascular Surgery	Art byp axillary-femoral	Only Inpatient
35623		Vascular Surgery	Art byp axillary-pop-tibial	Only Inpatient
35626		Vascular Surgery	Art byp aorsubcl/carot/innom	Only Inpatient
35631		Vascular Surgery	Art byp aor-celiac-msn-renal	Only Inpatient
35632		Vascular Surgery	Art byp ilio-celiac	Only Inpatient
35633		Vascular Surgery	Art byp ilio-mesenteric	Only Inpatient
35634		Vascular Surgery	Art byp iliorenal	Only Inpatient
35636		Vascular Surgery	Art byp spenorenal	Only Inpatient

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
35637		Vascular Surgery	Art byp aortoiliac	Only Inpatient
35638		Vascular Surgery	Art byp aortobi-iliac	Only Inpatient
35642		Vascular Surgery	Art byp carotid-vertebral	Only Inpatient
35645		Vascular Surgery	Art byp subclav-vertebrl	Only Inpatient
35646		Vascular Surgery	Art byp aortobifemoral	Only Inpatient
35647		Vascular Surgery	Art byp aortofemoral	Only Inpatient
35650		Vascular Surgery	Art byp axillary-axillary	Only Inpatient
35654		Vascular Surgery	Art byp axill-fem-femoral	Only Inpatient
35656		Vascular Surgery	Art byp femoral-popliteal	Only Inpatient
35661		Vascular Surgery	Art byp femoral-femoral	Only Inpatient
35663		Vascular Surgery	Art byp ilioliac	Only Inpatient
35665		Vascular Surgery	Art byp iliofemoral	Only Inpatient
35666		Vascular Surgery	Art byp fem-ant-post tib/prl	Only Inpatient
35671		Vascular Surgery	Art byp pop-tibl-prl-other	Only Inpatient
35681		Vascular Surgery	Composite byp grft pros&vein	Only Inpatient
35682		Vascular Surgery	Composite byp grft 2 veins	Only Inpatient
35683		Vascular Surgery	Composite byp grft 3/> segmt	Only Inpatient
35691		Vascular Surgery	Art trnsposj vertbrl carotid	Only Inpatient
35693		Vascular Surgery	Art trnsposj subclavian	Only Inpatient
35694		Vascular Surgery	Art trnsposj subclav carotid	Only Inpatient
35695		Vascular Surgery	Art trnsposj carotid subclav	Only Inpatient
35697		Vascular Surgery	Reimplant artery each	Only Inpatient
35700		Vascular Surgery	Reoperation bypass graft	Only Inpatient
35701		Vascular Surgery	Exploration carotid artery	Only Inpatient
35721		Vascular Surgery	Exploration femoral artery	Only Inpatient
35741		Vascular Surgery	Exploration popliteal artery	Only Inpatient
35800		Vascular Surgery	Explore neck vessels	Only Inpatient
35820		Vascular Surgery	Explore chest vessels	Only Inpatient
35840		Vascular Surgery	Explore abdominal vessels	Only Inpatient
35870		Vascular Surgery	Repair vessel graft defect	Only Inpatient
35901		Vascular Surgery	Excision graft neck	Only Inpatient
35905		Vascular Surgery	Excision graft thorax	Only Inpatient
35907		Vascular Surgery	Excision graft abdomen	Only Inpatient
36465		Injection Procedures	Njx noncmpnd sclrsnt 1 vein	
36466		Injection Procedures	Njx noncmpnd sclrsnt mlt vn	
36468		Cosmetic & Reconstructive	Njx sclrsnt spider veins	
36470		Cosmetic & Reconstructive	Njx sclrsnt 1 incmptnt vein	
36471		Cosmetic & Reconstructive	Njx sclrsnt mlt incmptnt vn	
36473		Vascular Surgery	Endovenous mchnchem 1st vein	
36474		Vascular Surgery	Endovenous mchnchem add-on	
36475		Vascular Surgery	Endovenous rf 1st vein	
36476		Vascular Surgery	Endovenous rf vein add-on	
36478		Vascular Surgery	Endovenous laser 1st vein	
36479		Vascular Surgery	Endovenous laser vein addon	
36482		Vascular Surgery	Endoven ther chem adhes 1st	
36483		Vascular Surgery	Endoven ther chem adhes sbsq	
36514		Vascular Procedures	Apheresis plasma	
36660		Vascular Surgery	Insertion catheter artery	Only Inpatient
36823		Vascular Surgery	Insertion of cannula(s)	Only Inpatient
37140		Vascular Surgery	Revision of circulation	Only Inpatient
37145		Vascular Surgery	Revision of circulation	Only Inpatient
37160		Vascular Surgery	Revision of circulation	Only Inpatient
37180		Vascular Surgery	Revision of circulation	Only Inpatient
37181		Vascular Surgery	Splice spleen/kidney veins	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
37182		Vascular Surgery	Insert hepatic shunt (tips)	Only Inpatient
37215		Vascular Surgery	Transcath stent cca w/eps	Only Inpatient
37217		Vascular Surgery	Stent placemt retro carotid	Only Inpatient
37218		Vascular Surgery	Stent placemt ante carotid	Only Inpatient
37616		Vascular Surgery	Ligation of chest artery	Only Inpatient
37617		Vascular Surgery	Ligation of abdomen artery	Only Inpatient
37618		Vascular Surgery	Ligation of extremity artery	Only Inpatient
37660		Vascular Surgery	Revision of major vein	Only Inpatient
37700		Vascular Surgery	Revise leg vein	
37718		Vascular Surgery	Ligate/strip short leg vein	
37722		Vascular Surgery	Ligate/strip long leg vein	
37780		Vascular Surgery	Revision of leg vein	
37788		Vascular Surgery	Revascularization penis	Only Inpatient
38100		General Surgery	Removal of spleen total	Only Inpatient
38101		General Surgery	Removal of spleen partial	Only Inpatient
38102		General Surgery	Removal of spleen total	Only Inpatient
38115		General Surgery	Repair of ruptured spleen	Only Inpatient
38380		General Surgery	Thoracic duct procedure	Only Inpatient
38381		General Surgery	Thoracic duct procedure	Only Inpatient
38382		General Surgery	Thoracic duct procedure	Only Inpatient
38562		General Surgery	Removal pelvic lymph nodes	Only Inpatient
38564		General Surgery	Removal abdomen lymph nodes	Only Inpatient
38573		Laproscopy	Laps pelvic lymphadec	
38724		General Surgery	Removal of lymph nodes neck	Only Inpatient
38746		General Surgery	Remove thoracic lymph nodes	Only Inpatient
38747		General Surgery	Remove abdominal lymph nodes	Only Inpatient
38765		General Surgery	Remove groin lymph nodes	Only Inpatient
38770		General Surgery	Remove pelvis lymph nodes	Only Inpatient
38780		General Surgery	Remove abdomen lymph nodes	Only Inpatient
39000		General Surgery	Exploration of chest	Only Inpatient
39010		General Surgery	Exploration of chest	Only Inpatient
39200		General Surgery	Resect mediastinal cyst	Only Inpatient
39220		General Surgery	Resect mediastinal tumor	Only Inpatient
39499		General Surgery	Chest procedure	Only Inpatient
39501		General Surgery	Repair diaphragm laceration	Only Inpatient
39503		General Surgery	Repair of diaphragm hernia	Only Inpatient
39540		General Surgery	Repair of diaphragm hernia	Only Inpatient
39541		General Surgery	Repair of diaphragm hernia	Only Inpatient
39545		General Surgery	Revision of diaphragm	Only Inpatient
39560		General Surgery	Resect diaphragm simple	Only Inpatient
39561		General Surgery	Resect diaphragm complex	Only Inpatient
39599		General Surgery	Diaphragm surgery procedure	Only Inpatient
41130		Respiratory System Surgery	Partial removal of tongue	Only Inpatient
41135		Respiratory System Surgery	Tongue and neck surgery	Only Inpatient
41140		Respiratory System Surgery	Removal of tongue	Only Inpatient
41145		Respiratory System Surgery	Tongue removal neck surgery	Only Inpatient
41150		Respiratory System Surgery	Tongue mouth jaw surgery	Only Inpatient
41153		Respiratory System Surgery	Tongue mouth neck surgery	Only Inpatient
41155		Respiratory System Surgery	Tongue jaw & neck surgery	Only Inpatient
41512		Sleep Apnea Surgeries	Tongue suspension	
41530		Sleep Apnea Surgeries	Tongue base vol reduction	
41599		Sleep Apnea Surgeries	Tongue and mouth surgery	
42145		Sleep Apnea Surgeries	Repair palate pharynx/uvula	
42426		Digestive System Surgery	Excise parotid gland/lesion	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
42845		Digestive System Surgery	Extensive surgery of throat	Only Inpatient
42894		Digestive System Surgery	Revision of pharyngeal walls	Only Inpatient
42953		Digestive System Surgery	Repair throat esophagus	Only Inpatient
42961		Digestive System Surgery	Control throat bleeding	Only Inpatient
42971		Digestive System Surgery	Control nose/throat bleeding	Only Inpatient
43045		Digestive System Surgery	Incision of esophagus	Only Inpatient
43100		Digestive System Surgery	Excision of esophagus lesion	Only Inpatient
43101		Digestive System Surgery	Excision of esophagus lesion	Only Inpatient
43107		Digestive System Surgery	Removal of esophagus	Only Inpatient
43108		Digestive System Surgery	Removal of esophagus	Only Inpatient
43112		Digestive System Surgery	Esphg tot w/thrcm	Only Inpatient
43113		Digestive System Surgery	Removal of esophagus	Only Inpatient
43116		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43117		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43118		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43121		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43122		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43123		Digestive System Surgery	Partial removal of esophagus	Only Inpatient
43124		Digestive System Surgery	Removal of esophagus	Only Inpatient
43135		Digestive System Surgery	Removal of esophagus pouch	Only Inpatient
43279		Digestive System Surgery	Lap myotomy heller	Only Inpatient
43282		Digestive System Surgery	Lap paraesoph her rpr w/mesh	
43283		Digestive System Surgery	Lap esoph lengthening	Only Inpatient
43286		Digestive System Surgery	Esphg tot w/laps mobilj	Only Inpatient
43287		Digestive System Surgery	Esphg dstl 2/3 w/laps mobilj	Only Inpatient
43288		Digestive System Surgery	Esphg thrsc mobilj	Only Inpatient
43300		Digestive System Surgery	Repair of esophagus	Only Inpatient
43305		Digestive System Surgery	Repair esophagus and fistula	Only Inpatient
43310		Digestive System Surgery	Repair of esophagus	Only Inpatient
43312		Digestive System Surgery	Repair esophagus and fistula	Only Inpatient
43313		Digestive System Surgery	Esophagoplasty congenital	Only Inpatient
43314		Digestive System Surgery	Tracheo-esophagoplasty cong	Only Inpatient
43320		Digestive System Surgery	Fuse esophagus & stomach	Only Inpatient
43325		Digestive System Surgery	Revise esophagus & stomach	Only Inpatient
43327		Digestive System Surgery	Esoph fundoplasty lap	Only Inpatient
43328		Digestive System Surgery	Esoph fundoplasty thor	Only Inpatient
43330		Digestive System Surgery	Esophagomyotomy abdominal	Only Inpatient
43331		Digestive System Surgery	Esophagomyotomy thoracic	Only Inpatient
43332		Digestive System Surgery	Transab esoph hiat hern rpr	Only Inpatient
43333		Digestive System Surgery	Transab esoph hiat hern rpr	Only Inpatient
43334		Digestive System Surgery	Transthor diaphrag hern rpr	Only Inpatient
43335		Digestive System Surgery	Transthor diaphrag hern rpr	Only Inpatient
43336		Digestive System Surgery	Thorabd diaphr hern repair	Only Inpatient
43337		Digestive System Surgery	Thorabd diaphr hern repair	Only Inpatient
43338		Digestive System Surgery	Esoph lengthening	Only Inpatient
43340		Digestive System Surgery	Fuse esophagus & intestine	Only Inpatient
43341		Digestive System Surgery	Fuse esophagus & intestine	Only Inpatient
43351		Digestive System Surgery	Surgical opening esophagus	Only Inpatient
43352		Digestive System Surgery	Surgical opening esophagus	Only Inpatient
43360		Digestive System Surgery	Gastrointestinal repair	Only Inpatient
43361		Digestive System Surgery	Gastrointestinal repair	Only Inpatient
43400		Digestive System Surgery	Ligate esophagus veins	Only Inpatient
43401		Digestive System Surgery	Esophagus surgery for veins	Only Inpatient
43405		Digestive System Surgery	Ligate/staple esophagus	Only Inpatient

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
43410		Digestive System Surgery	Repair esophagus wound	Only Inpatient
43415		Digestive System Surgery	Repair esophagus wound	Only Inpatient
43425		Digestive System Surgery	Repair esophagus opening	Only Inpatient
43460		Digestive System Surgery	Pressure treatment esophagus	Only Inpatient
43496		Digestive System Surgery	Free jejunum flap microvasc	Only Inpatient
43500		Digestive System Surgery	Surgical opening of stomach	Only Inpatient
43501		Digestive System Surgery	Surgical repair of stomach	Only Inpatient
43502		Digestive System Surgery	Surgical repair of stomach	Only Inpatient
43520		Digestive System Surgery	Incision of pyloric muscle	Only Inpatient
43605		Digestive System Surgery	Biopsy of stomach	Only Inpatient
43610		Digestive System Surgery	Excision of stomach lesion	Only Inpatient
43611		Digestive System Surgery	Excision of stomach lesion	Only Inpatient
43620		Digestive System Surgery	Removal of stomach	Only Inpatient
43621		Digestive System Surgery	Removal of stomach	Only Inpatient
43622		Digestive System Surgery	Removal of stomach	Only Inpatient
43631		Digestive System Surgery	Removal of stomach partial	Only Inpatient
43632		Digestive System Surgery	Removal of stomach partial	Only Inpatient
43633		Bariatrics Surgery	Removal of stomach partial	Only Inpatient
43634		Digestive System Surgery	Removal of stomach partial	Only Inpatient
43635		Digestive System Surgery	Removal of stomach partial	Only Inpatient
43640		Digestive System Surgery	Vagotomy & pylorus repair	Only Inpatient
43641		Digestive System Surgery	Vagotomy & pylorus repair	Only Inpatient
43644		Bariatrics Surgery	Lap gastric bypass/roux-en-y	Only Inpatient
43645		Bariatrics Surgery	Lap gastr bypass incl smll i	Only Inpatient
43659		Bariatrics Surgery	Laparoscope proc stom	
43770		Bariatrics Surgery	Lap place gastr adj device	
43771		Bariatrics Surgery	Lap revise gastr adj device	Only Inpatient
43772		Bariatrics Surgery	Lap rmlv gastr adj device	
43773		Bariatrics Surgery	Lap replace gastr adj device	
43774		Bariatrics Surgery	Lap rmlv gastr adj all parts	
43775		Bariatrics Surgery	Lap sleeve gastrectomy	Only Inpatient
43800		Digestive System Surgery	Reconstruction of pylorus	Only Inpatient
43810		Digestive System Surgery	Fusion of stomach and bowel	Only Inpatient
43820		Digestive System Surgery	Fusion of stomach and bowel	Only Inpatient
43825		Digestive System Surgery	Fusion of stomach and bowel	Only Inpatient
43832		Digestive System Surgery	Place gastrostomy tube	Only Inpatient
43840		Digestive System Surgery	Repair of stomach lesion	Only Inpatient
43843		Bariatrics Surgery	Gastroplasty w/o v-band	Only Inpatient
43845		Bariatrics Surgery	Gastroplasty duodenal switch	Only Inpatient
43846		Bariatrics Surgery	Gastric bypass for obesity	Only Inpatient
43847		Bariatrics Surgery	Gastric bypass incl small i	Only Inpatient
43848		Bariatrics Surgery	Revision gastroplasty	Only Inpatient
43850		Digestive System Surgery	Revise stomach-bowel fusion	Only Inpatient
43855		Digestive System Surgery	Revise stomach-bowel fusion	Only Inpatient
43860		Bariatrics Surgery	Revise stomach-bowel fusion	Only Inpatient
43865		Bariatrics Surgery	Revise stomach-bowel fusion	Only Inpatient
43880		Digestive System Surgery	Repair stomach-bowel fistula	Only Inpatient
43881		Digestive System Surgery	Impl/redo electrd antrum	Only Inpatient
43882		Digestive System Surgery	Revise/remove electrd antrum	Only Inpatient
43886		Bariatrics Surgery	Revise gastric port open	
43888		Bariatrics Surgery	Change gastric port open	
43999		Bariatrics Surgery	Stomach surgery procedure	
44005		Digestive System Surgery	Freeing of bowel adhesion	Only Inpatient
44010		Digestive System Surgery	Incision of small bowel	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
44015		Digestive System Surgery	Insert needle cath bowel	Only Inpatient
44020		Digestive System Surgery	Explore small intestine	Only Inpatient
44021		Digestive System Surgery	Decompress small bowel	Only Inpatient
44025		Digestive System Surgery	Incision of large bowel	Only Inpatient
44050		Digestive System Surgery	Reduce bowel obstruction	Only Inpatient
44055		Digestive System Surgery	Correct malrotation of bowel	Only Inpatient
44110		Digestive System Surgery	Excise intestine lesion(s)	Only Inpatient
44111		Digestive System Surgery	Excision of bowel lesion(s)	Only Inpatient
44120		Digestive System Surgery	Removal of small intestine	Only Inpatient
44121		Digestive System Surgery	Removal of small intestine	Only Inpatient
44125		Digestive System Surgery	Removal of small intestine	Only Inpatient
44126		Digestive System Surgery	Enterectomy w/o taper cong	Only Inpatient
44127		Digestive System Surgery	Enterectomy w/taper cong	Only Inpatient
44128		Digestive System Surgery	Enterectomy cong add-on	Only Inpatient
44130		Digestive System Surgery	Bowel to bowel fusion	Only Inpatient
44132		Transplant Procedures	Enterectomy cadaver donor	Only Inpatient
44133		Transplant Procedures	Enterectomy live donor	Only Inpatient
44135		Transplant Procedures	Intestine transplnt cadaver	Only Inpatient
44136		Transplant Procedures	Intestine transplant live	Only Inpatient
44137		Transplant Procedures	Remove intestinal allograft	Only Inpatient
44139		Digestive System Surgery	Mobilization of colon	Only Inpatient
44140		Digestive System Surgery	Partial removal of colon	Only Inpatient
44141		Digestive System Surgery	Partial removal of colon	Only Inpatient
44143		Digestive System Surgery	Partial removal of colon	Only Inpatient
44144		Digestive System Surgery	Partial removal of colon	Only Inpatient
44145		Digestive System Surgery	Partial removal of colon	Only Inpatient
44146		Digestive System Surgery	Partial removal of colon	Only Inpatient
44147		Digestive System Surgery	Partial removal of colon	Only Inpatient
44150		Digestive System Surgery	Removal of colon	Only Inpatient
44151		Digestive System Surgery	Removal of colon/ileostomy	Only Inpatient
44155		Digestive System Surgery	Removal of colon/ileostomy	Only Inpatient
44156		Digestive System Surgery	Removal of colon/ileostomy	Only Inpatient
44157		Digestive System Surgery	Colectomy w/ileoanal anast	Only Inpatient
44158		Digestive System Surgery	Colectomy w/neo-rectum pouch	Only Inpatient
44160		Digestive System Surgery	Removal of colon	Only Inpatient
44187		Digestive System Surgery	Lap ileo/jejuno-stomy	Only Inpatient
44188		Digestive System Surgery	Lap colostomy	Only Inpatient
44202		Digestive System Surgery	Lap enterectomy	Only Inpatient
44203		Digestive System Surgery	Lap resect s/intestine addl	Only Inpatient
44204		Digestive System Surgery	Laparo partial colectomy	Only Inpatient
44205		Digestive System Surgery	Lap colectomy part w/ileum	Only Inpatient
44206		Digestive System Surgery	Lap part colectomy w/stoma	Only Inpatient
44207		Digestive System Surgery	L colectomy/coloproctostomy	Only Inpatient
44208		Digestive System Surgery	L colectomy/coloproctostomy	Only Inpatient
44210		Digestive System Surgery	Laparo total proctocolectomy	Only Inpatient
44211		Digestive System Surgery	Lap colectomy w/proctectomy	Only Inpatient
44212		Digestive System Surgery	Laparo total proctocolectomy	Only Inpatient
44213		Digestive System Surgery	Lap mobil splenic fl add-on	Only Inpatient
44227		Digestive System Surgery	Lap close enterostomy	Only Inpatient
44300		Digestive System Surgery	Open bowel to skin	Only Inpatient
44310		Digestive System Surgery	Ileostomy/jejunostomy	Only Inpatient
44314		Digestive System Surgery	Revision of ileostomy	Only Inpatient
44316		Digestive System Surgery	Devise bowel pouch	Only Inpatient
44320		Digestive System Surgery	Colostomy	Only Inpatient



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Code	Mod	Procedures & Services	Description	Rule Description
44322		Digestive System Surgery	Colostomy with biopsies	Only Inpatient
44345		Digestive System Surgery	Revision of colostomy	Only Inpatient
44346		Digestive System Surgery	Revision of colostomy	Only Inpatient
44602		Digestive System Surgery	Suture small intestine	Only Inpatient
44603		Digestive System Surgery	Suture small intestine	Only Inpatient
44604		Digestive System Surgery	Suture large intestine	Only Inpatient
44605		Digestive System Surgery	Repair of bowel lesion	Only Inpatient
44615		Digestive System Surgery	Intestinal stricturoplasty	Only Inpatient
44620		Digestive System Surgery	Repair bowel opening	Only Inpatient
44625		Digestive System Surgery	Repair bowel opening	Only Inpatient
44626		Digestive System Surgery	Repair bowel opening	Only Inpatient
44640		Digestive System Surgery	Repair bowel-skin fistula	Only Inpatient
44650		Digestive System Surgery	Repair bowel fistula	Only Inpatient
44660		Digestive System Surgery	Repair bowel-bladder fistula	Only Inpatient
44661		Digestive System Surgery	Repair bowel-bladder fistula	Only Inpatient
44680		Digestive System Surgery	Surgical revision intestine	Only Inpatient
44700		Digestive System Surgery	Suspend bowel w/prosthesis	Only Inpatient
44715		Transplant Procedures	Prepare donor intestine	Only Inpatient
44720		Transplant Procedures	Prep donor intestine/venous	Only Inpatient
44721		Transplant Procedures	Prep donor intestine/artery	Only Inpatient
44799		Bariatrics Surgery	Unlisted px small intestine	
44800		Digestive System Surgery	Excision of bowel pouch	Only Inpatient
44820		Digestive System Surgery	Excision of mesentery lesion	Only Inpatient
44850		Digestive System Surgery	Repair of mesentery	Only Inpatient
44899		Digestive System Surgery	Bowel surgery procedure	Only Inpatient
44900		Digestive System Surgery	Drain appendix abscess open	Only Inpatient
44960		Digestive System Surgery	Appendectomy	Only Inpatient
45110		Digestive System Surgery	Removal of rectum	Only Inpatient
45111		Digestive System Surgery	Partial removal of rectum	Only Inpatient
45112		Digestive System Surgery	Removal of rectum	Only Inpatient
45113		Digestive System Surgery	Partial proctectomy	Only Inpatient
45114		Digestive System Surgery	Partial removal of rectum	Only Inpatient
45116		Digestive System Surgery	Partial removal of rectum	Only Inpatient
45119		Digestive System Surgery	Remove rectum w/reservoir	Only Inpatient
45120		Digestive System Surgery	Removal of rectum	Only Inpatient
45121		Digestive System Surgery	Removal of rectum and colon	Only Inpatient
45123		Digestive System Surgery	Partial proctectomy	Only Inpatient
45126		Digestive System Surgery	Pelvic exenteration	Only Inpatient
45130		Digestive System Surgery	Excision of rectal prolapse	Only Inpatient
45135		Digestive System Surgery	Excision of rectal prolapse	Only Inpatient
45136		Digestive System Surgery	Excise ileoanal reservoir	Only Inpatient
45395		Digestive System Surgery	Lap removal of rectum	Only Inpatient
45397		Digestive System Surgery	Lap remove rectum w/pouch	Only Inpatient
45400		Digestive System Surgery	Laparoscopic proc	Only Inpatient
45402		Digestive System Surgery	Lap proctopexy w/sig resect	Only Inpatient
45540		Digestive System Surgery	Correct rectal prolapse	Only Inpatient
45550		Digestive System Surgery	Repair rectum/remove sigmoid	Only Inpatient
45562		Digestive System Surgery	Exploration/repair of rectum	Only Inpatient
45563		Digestive System Surgery	Exploration/repair of rectum	Only Inpatient
45800		Digestive System Surgery	Repair rect/bladder fistula	Only Inpatient
45805		Digestive System Surgery	Repair fistula w/colostomy	Only Inpatient
45820		Digestive System Surgery	Repair rectourethral fistula	Only Inpatient
45825		Digestive System Surgery	Repair fistula w/colostomy	Only Inpatient
46705		Digestive System Surgery	Repair of anal stricture	Only Inpatient

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
46710		Digestive System Surgery	Repr per/vag pouch snl proc	Only Inpatient
46712		Digestive System Surgery	Repr per/vag pouch dbl proc	Only Inpatient
46715		Digestive System Surgery	Rep perf anoper fistu	Only Inpatient
46716		Digestive System Surgery	Rep perf anoper/vestib fistu	Only Inpatient
46730		Digestive System Surgery	Construction of absent anus	Only Inpatient
46735		Digestive System Surgery	Construction of absent anus	Only Inpatient
46740		Digestive System Surgery	Construction of absent anus	Only Inpatient
46742		Digestive System Surgery	Repair of imperforated anus	Only Inpatient
46744		Digestive System Surgery	Repair of cloacal anomaly	Only Inpatient
46746		Digestive System Surgery	Repair of cloacal anomaly	Only Inpatient
46748		Digestive System Surgery	Repair of cloacal anomaly	Only Inpatient
46751		Digestive System Surgery	Repair of anal sphincter	Only Inpatient
47010		Digestive System Surgery	Open drainage liver lesion	Only Inpatient
47015		Digestive System Surgery	Inject/aspirate liver cyst	Only Inpatient
47100		Digestive System Surgery	Wedge biopsy of liver	Only Inpatient
47120		Digestive System Surgery	Partial removal of liver	Only Inpatient
47122		Digestive System Surgery	Extensive removal of liver	Only Inpatient
47125		Digestive System Surgery	Partial removal of liver	Only Inpatient
47130		Digestive System Surgery	Partial removal of liver	Only Inpatient
47133		Transplant Procedures	Removal of donor liver	Only Inpatient
47135		Transplant Procedures	Transplantation of liver	Only Inpatient
47140		Transplant Procedures	Partial removal donor liver	Only Inpatient
47141		Transplant Procedures	Partial removal donor liver	Only Inpatient
47142		Transplant Procedures	Partial removal donor liver	Only Inpatient
47143		Transplant Procedures	Prep donor liver whole	Only Inpatient
47144		Transplant Procedures	Prep donor liver 3-segment	Only Inpatient
47145		Transplant Procedures	Prep donor liver lobe split	Only Inpatient
47146		Transplant Procedures	Prep donor liver/venous	Only Inpatient
47147		Transplant Procedures	Prep donor liver/arterial	Only Inpatient
47300		Digestive System Surgery	Surgery for liver lesion	Only Inpatient
47350		Digestive System Surgery	Repair liver wound	Only Inpatient
47360		Digestive System Surgery	Repair liver wound	Only Inpatient
47361		Digestive System Surgery	Repair liver wound	Only Inpatient
47362		Digestive System Surgery	Repair liver wound	Only Inpatient
47380		Digestive System Surgery	Open ablate liver tumor rf	Only Inpatient
47381		Digestive System Surgery	Open ablate liver tumor cryo	Only Inpatient
47400		Digestive System Surgery	Incision of liver duct	Only Inpatient
47420		Digestive System Surgery	Incision of bile duct	Only Inpatient
47425		Digestive System Surgery	Incision of bile duct	Only Inpatient
47460		Digestive System Surgery	Incise bile duct sphincter	Only Inpatient
47480		Digestive System Surgery	Incision of gallbladder	Only Inpatient
47550		Digestive System Surgery	Bile duct endoscopy add-on	Only Inpatient
47570		Digestive System Surgery	Laparo cholecystoenterostomy	Only Inpatient
47600		Digestive System Surgery	Removal of gallbladder	Only Inpatient
47605		Digestive System Surgery	Removal of gallbladder	Only Inpatient
47610		Digestive System Surgery	Removal of gallbladder	Only Inpatient
47612		Digestive System Surgery	Removal of gallbladder	Only Inpatient
47620		Digestive System Surgery	Removal of gallbladder	Only Inpatient
47700		Digestive System Surgery	Exploration of bile ducts	Only Inpatient
47701		Digestive System Surgery	Bile duct revision	Only Inpatient
47711		Digestive System Surgery	Excision of bile duct tumor	Only Inpatient
47712		Digestive System Surgery	Excision of bile duct tumor	Only Inpatient
47715		Digestive System Surgery	Excision of bile duct cyst	Only Inpatient
47720		Digestive System Surgery	Fuse gallbladder & bowel	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
47721		Digestive System Surgery	Fuse upper gi structures	Only Inpatient
47740		Digestive System Surgery	Fuse gallbladder & bowel	Only Inpatient
47741		Digestive System Surgery	Fuse gallbladder & bowel	Only Inpatient
47760		Digestive System Surgery	Fuse bile ducts and bowel	Only Inpatient
47765		Digestive System Surgery	Fuse liver ducts & bowel	Only Inpatient
47780		Digestive System Surgery	Fuse bile ducts and bowel	Only Inpatient
47785		Digestive System Surgery	Fuse bile ducts and bowel	Only Inpatient
47800		Digestive System Surgery	Reconstruction of bile ducts	Only Inpatient
47801		Digestive System Surgery	Placement bile duct support	Only Inpatient
47802		Digestive System Surgery	Fuse liver duct & intestine	Only Inpatient
47900		Digestive System Surgery	Suture bile duct injury	Only Inpatient
48000		Digestive System Surgery	Drainage of abdomen	Only Inpatient
48001		Digestive System Surgery	Placement of drain pancreas	Only Inpatient
48020		Digestive System Surgery	Removal of pancreatic stone	Only Inpatient
48100		Digestive System Surgery	Biopsy of pancreas open	Only Inpatient
48105		Digestive System Surgery	Resect/debride pancreas	Only Inpatient
48120		Digestive System Surgery	Removal of pancreas lesion	Only Inpatient
48140		Digestive System Surgery	Partial removal of pancreas	Only Inpatient
48145		Digestive System Surgery	Partial removal of pancreas	Only Inpatient
48146		Digestive System Surgery	Pancreatectomy	Only Inpatient
48148		Digestive System Surgery	Removal of pancreatic duct	Only Inpatient
48150		Digestive System Surgery	Partial removal of pancreas	Only Inpatient
48152		Digestive System Surgery	Pancreatectomy	Only Inpatient
48153		Digestive System Surgery	Pancreatectomy	Only Inpatient
48154		Digestive System Surgery	Pancreatectomy	Only Inpatient
48155		Digestive System Surgery	Removal of pancreas	Only Inpatient
48400		Injection Procedures	Injection intraop add-on	Only Inpatient
48500		Digestive System Surgery	Surgery of pancreatic cyst	Only Inpatient
48510		Digestive System Surgery	Drain pancreatic pseudocyst	Only Inpatient
48520		Digestive System Surgery	Fuse pancreas cyst and bowel	Only Inpatient
48540		Digestive System Surgery	Fuse pancreas cyst and bowel	Only Inpatient
48545		Digestive System Surgery	Pancreatorrhaphy	Only Inpatient
48547		Digestive System Surgery	Duodenal exclusion	Only Inpatient
48548		Digestive System Surgery	Fuse pancreas and bowel	Only Inpatient
48551		Transplant Procedures	Prep donor pancreas	Only Inpatient
48552		Transplant Procedures	Prep donor pancreas/venous	Only Inpatient
48554		Transplant Procedures	Transpl allograft pancreas	Only Inpatient
48556		Transplant Procedures	Removal allograft pancreas	Only Inpatient
49000		Digestive System Surgery	Exploration of abdomen	Only Inpatient
49002		Digestive System Surgery	Reopening of abdomen	Only Inpatient
49010		Digestive System Surgery	Exploration behind abdomen	Only Inpatient
49020		Digestive System Surgery	Drainage abdom abscess open	Only Inpatient
49040		Digestive System Surgery	Drain open abdom abscess	Only Inpatient
49060		Digestive System Surgery	Drain open retroperi abscess	Only Inpatient
49062		Digestive System Surgery	Drain to peritoneal cavity	Only Inpatient
49203		Digestive System Surgery	Exc abd tum 5 cm or less	Only Inpatient
49204		Digestive System Surgery	Exc abd tum over 5 cm	Only Inpatient
49205		Digestive System Surgery	Exc abd tum over 10 cm	Only Inpatient
49215		Digestive System Surgery	Excise sacral spine tumor	Only Inpatient
49220		Digestive System Surgery	Multiple surgery abdomen	Only Inpatient
49255		Digestive System Surgery	Removal of omentum	Only Inpatient
49412		Digestive System Surgery	Ins device for rt guide open	Only Inpatient
49425		Digestive System Surgery	Insert abdomen-venous drain	Only Inpatient
49428		Digestive System Surgery	Ligation of shunt	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
49605		Digestive System Surgery	Repair umbilical lesion	Only Inpatient
49606		Digestive System Surgery	Repair umbilical lesion	Only Inpatient
49610		Digestive System Surgery	Repair umbilical lesion	Only Inpatient
49611		Digestive System Surgery	Repair umbilical lesion	Only Inpatient
49900		Digestive System Surgery	Repair of abdominal wall	Only Inpatient
49904		Digestive System Surgery	Omental flap extra-abdom	Only Inpatient
49905		Digestive System Surgery	Omental flap intra-abdom	Only Inpatient
49906		Digestive System Surgery	Free omental flap microvasc	Only Inpatient
50010		Urinary System Surgery	Exploration of kidney	Only Inpatient
50040		Urinary System Surgery	Drainage of kidney	Only Inpatient
50045		Urinary System Surgery	Exploration of kidney	Only Inpatient
50060		Urinary System Surgery	Removal of kidney stone	Only Inpatient
50065		Urinary System Surgery	Incision of kidney	Only Inpatient
50070		Urinary System Surgery	Incision of kidney	Only Inpatient
50075		Urinary System Surgery	Removal of kidney stone	Only Inpatient
50100		Urinary System Surgery	Revise kidney blood vessels	Only Inpatient
50120		Urinary System Surgery	Exploration of kidney	Only Inpatient
50125		Urinary System Surgery	Explore and drain kidney	Only Inpatient
50130		Urinary System Surgery	Removal of kidney stone	Only Inpatient
50135		Urinary System Surgery	Exploration of kidney	Only Inpatient
50205		Urinary System Surgery	Renal biopsy open	Only Inpatient
50220		Urinary System Surgery	Remove kidney open	Only Inpatient
50225		Urinary System Surgery	Removal kidney open complex	Only Inpatient
50230		Urinary System Surgery	Removal kidney open radical	Only Inpatient
50234		Urinary System Surgery	Removal of kidney & ureter	Only Inpatient
50236		Urinary System Surgery	Removal of kidney & ureter	Only Inpatient
50240		Urinary System Surgery	Partial removal of kidney	Only Inpatient
50250		Urinary System Surgery	Cryoablate renal mass open	Only Inpatient
50280		Urinary System Surgery	Removal of kidney lesion	Only Inpatient
50290		Urinary System Surgery	Removal of kidney lesion	Only Inpatient
50300		Transplant Procedures	Remove cadaver donor kidney	Only Inpatient
50320		Transplant Procedures	Remove kidney living donor	Only Inpatient
50323		Transplant Procedures	Prep cadaver renal allograft	Only Inpatient
50325		Transplant Procedures	Prep donor renal graft	Only Inpatient
50327		Transplant Procedures	Prep renal graft/venous	Only Inpatient
50328		Transplant Procedures	Prep renal graft/arterial	Only Inpatient
50329		Transplant Procedures	Prep renal graft/ureteral	Only Inpatient
50340		Transplant Procedures	Removal of kidney	Only Inpatient
50360		Transplant Procedures	Transplantation of kidney	Only Inpatient
50365		Transplant Procedures	Transplantation of kidney	Only Inpatient
50370		Transplant Procedures	Remove transplanted kidney	Only Inpatient
50380		Transplant Procedures	Reimplantation of kidney	Only Inpatient
50400		Genitourinary System Surgery	Revision of kidney/ureter	Only Inpatient
50405		Genitourinary System Surgery	Revision of kidney/ureter	Only Inpatient
50500		Genitourinary System Surgery	Repair of kidney wound	Only Inpatient
50520		Genitourinary System Surgery	Close kidney-skin fistula	Only Inpatient
50525		Genitourinary System Surgery	Close nephrovisceral fistula	Only Inpatient
50526		Genitourinary System Surgery	Close nephrovisceral fistula	Only Inpatient
50540		Genitourinary System Surgery	Revision of horseshoe kidney	Only Inpatient
50545		Genitourinary System Surgery	Laparo radical nephrectomy	Only Inpatient
50546		Genitourinary System Surgery	Laparoscopic nephrectomy	Only Inpatient
50547		Genitourinary System Surgery	Laparo removal donor kidney	Only Inpatient
50548		Genitourinary System Surgery	Laparo remove w/ureter	Only Inpatient
50600		Genitourinary System Surgery	Exploration of ureter	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
50605		Genitourinary System Surgery	Insert ureteral support	Only Inpatient
50610		Genitourinary System Surgery	Removal of ureter stone	Only Inpatient
50620		Genitourinary System Surgery	Removal of ureter stone	Only Inpatient
50630		Genitourinary System Surgery	Removal of ureter stone	Only Inpatient
50650		Genitourinary System Surgery	Removal of ureter	Only Inpatient
50660		Genitourinary System Surgery	Removal of ureter	Only Inpatient
50700		Genitourinary System Surgery	Revision of ureter	Only Inpatient
50715		Genitourinary System Surgery	Release of ureter	Only Inpatient
50722		Genitourinary System Surgery	Release of ureter	Only Inpatient
50725		Genitourinary System Surgery	Release/revise ureter	Only Inpatient
50728		Genitourinary System Surgery	Revise ureter	Only Inpatient
50740		Genitourinary System Surgery	Fusion of ureter & kidney	Only Inpatient
50750		Genitourinary System Surgery	Fusion of ureter & kidney	Only Inpatient
50760		Genitourinary System Surgery	Fusion of ureters	Only Inpatient
50770		Genitourinary System Surgery	Splicing of ureters	Only Inpatient
50780		Genitourinary System Surgery	Reimplant ureter in bladder	Only Inpatient
50782		Genitourinary System Surgery	Reimplant ureter in bladder	Only Inpatient
50783		Genitourinary System Surgery	Reimplant ureter in bladder	Only Inpatient
50785		Genitourinary System Surgery	Reimplant ureter in bladder	Only Inpatient
50800		Genitourinary System Surgery	Implant ureter in bowel	Only Inpatient
50810		Genitourinary System Surgery	Fusion of ureter & bowel	Only Inpatient
50815		Genitourinary System Surgery	Urine shunt to intestine	Only Inpatient
50820		Genitourinary System Surgery	Construct bowel bladder	Only Inpatient
50825		Genitourinary System Surgery	Construct bowel bladder	Only Inpatient
50830		Genitourinary System Surgery	Revise urine flow	Only Inpatient
50840		Genitourinary System Surgery	Replace ureter by bowel	Only Inpatient
50845		Genitourinary System Surgery	Appendico-vesicostomy	Only Inpatient
50860		Genitourinary System Surgery	Transplant ureter to skin	Only Inpatient
50900		Genitourinary System Surgery	Repair of ureter	Only Inpatient
50920		Genitourinary System Surgery	Closure ureter/skin fistula	Only Inpatient
50930		Genitourinary System Surgery	Closure ureter/bowel fistula	Only Inpatient
50940		Genitourinary System Surgery	Release of ureter	Only Inpatient
51525		Genitourinary System Surgery	Removal of bladder lesion	Only Inpatient
51530		Genitourinary System Surgery	Removal of bladder lesion	Only Inpatient
51550		Genitourinary System Surgery	Partial removal of bladder	Only Inpatient
51555		Genitourinary System Surgery	Partial removal of bladder	Only Inpatient
51565		Genitourinary System Surgery	Revise bladder & ureter(s)	Only Inpatient
51570		Genitourinary System Surgery	Removal of bladder	Only Inpatient
51575		Genitourinary System Surgery	Removal of bladder & nodes	Only Inpatient
51580		Genitourinary System Surgery	Remove bladder/revise tract	Only Inpatient
51585		Genitourinary System Surgery	Removal of bladder & nodes	Only Inpatient
51590		Genitourinary System Surgery	Remove bladder/revise tract	Only Inpatient
51595		Genitourinary System Surgery	Remove bladder/revise tract	Only Inpatient
51596		Genitourinary System Surgery	Remove bladder/create pouch	Only Inpatient
51597		Genitourinary System Surgery	Removal of pelvic structures	Only Inpatient
51800		Genitourinary System Surgery	Revision of bladder/urethra	Only Inpatient
51820		Genitourinary System Surgery	Revision of urinary tract	Only Inpatient
51840		Genitourinary System Surgery	Attach bladder/urethra	Only Inpatient
51841		Genitourinary System Surgery	Attach bladder/urethra	Only Inpatient
51865		Genitourinary System Surgery	Repair of bladder wound	Only Inpatient
51900		Genitourinary System Surgery	Repair bladder/vagina lesion	Only Inpatient
51920		Genitourinary System Surgery	Close bladder-uterus fistula	Only Inpatient
51925		Genitourinary System Surgery	Hysterectomy/bladder repair	Only Inpatient
51940		Genitourinary System Surgery	Correction of bladder defect	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
51960		Genitourinary System Surgery	Revision of bladder & bowel	Only Inpatient
51980		Genitourinary System Surgery	Construct bladder opening	Only Inpatient
53415		Genitourinary System Surgery	Reconstruction of urethra	Only Inpatient
53448		Genitourinary System Surgery	Remov/replc ur sphinctr comp	Only Inpatient
54125		Genitourinary System Surgery	Removal of penis	Only Inpatient
54130		Genitourinary System Surgery	Remove penis & nodes	Only Inpatient
54135		Genitourinary System Surgery	Remove penis & nodes	Only Inpatient
54390		Genitourinary System Surgery	Repair penis and bladder	Only Inpatient
54400		Penile Implant - Cosmetic & Reconstructive	Insert semi-rigid prosthesis	
54401		Penile Implant - Cosmetic & Reconstructive	Insert self-contd prosthesis	
54430		Genitourinary System Surgery	Revision of penis	Only Inpatient
54438		Genitourinary System Surgery	Replantation of penis	Only Inpatient
55605		Genitourinary System Surgery	Incise sperm duct pouch	Only Inpatient
55650		Genitourinary System Surgery	Remove sperm duct pouch	Only Inpatient
55801		Genitourinary System Surgery	Removal of prostate	Only Inpatient
55810		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55812		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55815		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55821		Genitourinary System Surgery	Removal of prostate	Only Inpatient
55831		Genitourinary System Surgery	Removal of prostate	Only Inpatient
55840		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55842		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55845		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55862		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55865		Genitourinary System Surgery	Extensive prostate surgery	Only Inpatient
55866		Genitourinary System Surgery	Laparo radical prostatectomy	
56630		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56631		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56632		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56633		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56634		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56637		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
56640		Genitourinary System Surgery	Extensive vulva surgery	Only Inpatient
57110		Genitourinary System Surgery	Remove vagina wall complete	Only Inpatient
57111		Genitourinary System Surgery	Remove vagina tissue compl	Only Inpatient
57112		Genitourinary System Surgery	Vaginectomy w/nodes compl	Only Inpatient
57270		Genitourinary System Surgery	Repair of bowel pouch	Only Inpatient
57280		Genitourinary System Surgery	Suspension of vagina	Only Inpatient
57296		Genitourinary System Surgery	Revise vag graft open abd	Only Inpatient
57305		Genitourinary System Surgery	Repair rectum-vagina fistula	Only Inpatient
57307		Genitourinary System Surgery	Fistula repair & colostomy	Only Inpatient
57308		Genitourinary System Surgery	Fistula repair transperine	Only Inpatient
57311		Genitourinary System Surgery	Repair urethrovaginal lesion	Only Inpatient
57531		Genitourinary System Surgery	Removal of cervix radical	Only Inpatient
57540		Genitourinary System Surgery	Removal of residual cervix	Only Inpatient
57545		Genitourinary System Surgery	Remove cervix/repair pelvis	Only Inpatient
58140		Genitourinary System Surgery	Myomectomy abdom method	Only Inpatient
58146		Genitourinary System Surgery	Myomectomy abdom complex	Only Inpatient
58150		Genitourinary System Surgery	Total hysterectomy	Only Inpatient
58152		Genitourinary System Surgery	Total hysterectomy	Only Inpatient
58180		Genitourinary System Surgery	Partial hysterectomy	Only Inpatient
58200		Genitourinary System Surgery	Extensive hysterectomy	Only Inpatient
58210		Genitourinary System Surgery	Extensive hysterectomy	Only Inpatient
58240		Genitourinary System Surgery	Removal of pelvis contents	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
58267		Genitourinary System Surgery	Vag hyst w/urinary repair	Only Inpatient
58275		Genitourinary System Surgery	Hysterectomy/revise vagina	Only Inpatient
58280		Genitourinary System Surgery	Hysterectomy/revise vagina	Only Inpatient
58285		Genitourinary System Surgery	Extensive hysterectomy	Only Inpatient
58293		Genitourinary System Surgery	Vag hyst w/uro repair compl	Only Inpatient
58400		Genitourinary System Surgery	Suspension of uterus	Only Inpatient
58410		Genitourinary System Surgery	Suspension of uterus	Only Inpatient
58520		Genitourinary System Surgery	Repair of ruptured uterus	Only Inpatient
58540		Genitourinary System Surgery	Revision of uterus	Only Inpatient
58575		Genitourinary System Surgery	Laps tot hyst resj mal	Only Inpatient
58605		Genitourinary System Surgery	Division of fallopian tube	Only Inpatient
58611		Genitourinary System Surgery	Ligate oviduct(s) add-on	Only Inpatient
58700		Genitourinary System Surgery	Removal of fallopian tube	Only Inpatient
58720		Genitourinary System Surgery	Removal of ovary/tube(s)	Only Inpatient
58740		Genitourinary System Surgery	Adhesiolysis tube ovary	Only Inpatient
58750		Genitourinary System Surgery	Repair oviduct	Only Inpatient
58752		Genitourinary System Surgery	Revise ovarian tube(s)	Only Inpatient
58760		Genitourinary System Surgery	Fimbrioplasty	Only Inpatient
58822		Genitourinary System Surgery	Drain ovary abscess percut	Only Inpatient
58825		Genitourinary System Surgery	Transposition ovary(s)	Only Inpatient
58940		Genitourinary System Surgery	Removal of ovary(s)	Only Inpatient
58943		Genitourinary System Surgery	Removal of ovary(s)	Only Inpatient
58950		Genitourinary System Surgery	Resect ovarian malignancy	Only Inpatient
58951		Genitourinary System Surgery	Resect ovarian malignancy	Only Inpatient
58952		Genitourinary System Surgery	Resect ovarian malignancy	Only Inpatient
58953		Genitourinary System Surgery	Tah rad dissect for debulk	Only Inpatient
58954		Genitourinary System Surgery	Tah rad debulk/lymph remove	Only Inpatient
58956		Genitourinary System Surgery	Bso omentectomy w/tah	Only Inpatient
58957		Genitourinary System Surgery	Resect recurrent gyn mal	Only Inpatient
58958		Genitourinary System Surgery	Resect recur gyn mal w/lym	Only Inpatient
58960		Genitourinary System Surgery	Exploration of abdomen	Only Inpatient
59120		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59121		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59130		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59135		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59136		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59140		Maternity Care & Delivery	Treat ectopic pregnancy	Only Inpatient
59325		Maternity Care & Delivery	Revision of cervix	Only Inpatient
59350		Maternity Care & Delivery	Repair of uterus	Only Inpatient
59514		Maternity Care & Delivery	Cesarean delivery only	Only Inpatient
59525		Maternity Care & Delivery	Remove uterus after cesarean	Only Inpatient
59620		Maternity Care & Delivery	Attempted vbac delivery only	Only Inpatient
59830		Maternity Care & Delivery	Treat uterus infection	Only Inpatient
59850		Maternity Care & Delivery	Abortion	Only Inpatient
59851		Maternity Care & Delivery	Abortion	Only Inpatient
59852		Maternity Care & Delivery	Abortion	Only Inpatient
59855		Maternity Care & Delivery	Abortion	Only Inpatient
59856		Maternity Care & Delivery	Abortion	Only Inpatient
59857		Maternity Care & Delivery	Abortion	Only Inpatient
60254		Endocrine System Surgery	Extensive thyroid surgery	Only Inpatient
60270		Endocrine System Surgery	Removal of thyroid	Only Inpatient
60505		Endocrine System Surgery	Explore parathyroid glands	Only Inpatient
60521		Endocrine System Surgery	Removal of thymus gland	Only Inpatient
60522		Endocrine System Surgery	Removal of thymus gland	Only Inpatient

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
60540		Endocrine System Surgery	Explore adrenal gland	Only Inpatient
60545		Endocrine System Surgery	Explore adrenal gland	Only Inpatient
60600		Endocrine System Surgery	Remove carotid body lesion	Only Inpatient
60605		Endocrine System Surgery	Remove carotid body lesion	Only Inpatient
60650		Endocrine System Surgery	Laparoscopy adrenalectomy	Only Inpatient
61105		Nervous System Surgery	Twist drill hole	Only Inpatient
61107		Nervous System Surgery	Drill skull for implantation	Only Inpatient
61108		Nervous System Surgery	Drill skull for drainage	Only Inpatient
61120		Nervous System Surgery	Burr hole for puncture	Only Inpatient
61140		Nervous System Surgery	Pierce skull for biopsy	Only Inpatient
61150		Nervous System Surgery	Pierce skull for drainage	Only Inpatient
61151		Nervous System Surgery	Pierce skull for drainage	Only Inpatient
61154		Nervous System Surgery	Pierce skull & remove clot	Only Inpatient
61156		Nervous System Surgery	Pierce skull for drainage	Only Inpatient
61210		Nervous System Surgery	Pierce skull implant device	Only Inpatient
61250		Nervous System Surgery	Pierce skull & explore	Only Inpatient
61253		Nervous System Surgery	Pierce skull & explore	Only Inpatient
61304		Nervous System Surgery	Open skull for exploration	Only Inpatient
61305		Nervous System Surgery	Open skull for exploration	Only Inpatient
61312		Nervous System Surgery	Open skull for drainage	Only Inpatient
61313		Nervous System Surgery	Open skull for drainage	Only Inpatient
61314		Nervous System Surgery	Open skull for drainage	Only Inpatient
61315		Nervous System Surgery	Open skull for drainage	Only Inpatient
61316		Nervous System Surgery	Implt cran bone flap to abdo	Only Inpatient
61320		Nervous System Surgery	Open skull for drainage	Only Inpatient
61321		Nervous System Surgery	Open skull for drainage	Only Inpatient
61322		Nervous System Surgery	Decompressive craniotomy	Only Inpatient
61323		Nervous System Surgery	Decompressive lobectomy	Only Inpatient
61332		Nervous System Surgery	Explore/biopsy eye socket	Only Inpatient
61333		Nervous System Surgery	Explore orbit/remove lesion	Only Inpatient
61340		Nervous System Surgery	Subtemporal decompression	Only Inpatient
61343		Nervous System Surgery	Incise skull (press relief)	Only Inpatient
61345		Nervous System Surgery	Relieve cranial pressure	Only Inpatient
61450		Nervous System Surgery	Incise skull for surgery	Only Inpatient
61458		Nervous System Surgery	Incise skull for brain wound	Only Inpatient
61460		Nervous System Surgery	Incise skull for surgery	Only Inpatient
61480		Nervous System Surgery	Incise skull for surgery	Only Inpatient
61500		Nervous System Surgery	Removal of skull lesion	Only Inpatient
61501		Nervous System Surgery	Remove infected skull bone	Only Inpatient
61510		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61512		Nervous System Surgery	Remove brain lining lesion	Only Inpatient
61514		Nervous System Surgery	Removal of brain abscess	Only Inpatient
61516		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61517		Nervous System Surgery	Implt brain chemotx add-on	Only Inpatient
61518		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61519		Nervous System Surgery	Remove brain lining lesion	Only Inpatient
61520		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61521		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61522		Nervous System Surgery	Removal of brain abscess	Only Inpatient
61524		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61526		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61530		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61531		Nervous System Surgery	Implant brain electrodes	Only Inpatient
61533		Nervous System Surgery	Implant brain electrodes	Only Inpatient



## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
61534		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61535		Nervous System Surgery	Remove brain electrodes	Only Inpatient
61536		Nervous System Surgery	Removal of brain lesion	Only Inpatient
61537		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61538		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61539		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61540		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61541		Nervous System Surgery	Incision of brain tissue	Only Inpatient
61543		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61544		Nervous System Surgery	Remove & treat brain lesion	Only Inpatient
61545		Nervous System Surgery	Excision of brain tumor	Only Inpatient
61546		Nervous System Surgery	Removal of pituitary gland	Only Inpatient
61548		Nervous System Surgery	Removal of pituitary gland	Only Inpatient
61550		Nervous System Surgery	Release of skull seams	Only Inpatient
61552		Nervous System Surgery	Release of skull seams	Only Inpatient
61556		Nervous System Surgery	Incise skull/sutures	Only Inpatient
61557		Nervous System Surgery	Incise skull/sutures	Only Inpatient
61558		Nervous System Surgery	Excision of skull/sutures	Only Inpatient
61559		Nervous System Surgery	Excision of skull/sutures	Only Inpatient
61563		Nervous System Surgery	Excision of skull tumor	Only Inpatient
61564		Nervous System Surgery	Excision of skull tumor	Only Inpatient
61566		Nervous System Surgery	Removal of brain tissue	Only Inpatient
61567		Nervous System Surgery	Incision of brain tissue	Only Inpatient
61570		Nervous System Surgery	Remove foreign body brain	Only Inpatient
61571		Nervous System Surgery	Incise skull for brain wound	Only Inpatient
61575		Nervous System Surgery	Skull base/brainstem surgery	Only Inpatient
61576		Nervous System Surgery	Skull base/brainstem surgery	Only Inpatient
61580		Nervous System Surgery	Craniofacial approach skull	Only Inpatient
61581		Nervous System Surgery	Craniofacial approach skull	Only Inpatient
61582		Nervous System Surgery	Craniofacial approach skull	Only Inpatient
61583		Nervous System Surgery	Craniofacial approach skull	Only Inpatient
61584		Nervous System Surgery	Orbitocranial approach/skull	Only Inpatient
61585		Nervous System Surgery	Orbitocranial approach/skull	Only Inpatient
61586		Nervous System Surgery	Resect nasopharynx skull	Only Inpatient
61590		Nervous System Surgery	Infratemporal approach/skull	Only Inpatient
61591		Nervous System Surgery	Infratemporal approach/skull	Only Inpatient
61592		Nervous System Surgery	Orbitocranial approach/skull	Only Inpatient
61595		Nervous System Surgery	Transtemporal approach/skull	Only Inpatient
61596		Nervous System Surgery	Transcochlear approach/skull	Only Inpatient
61597		Nervous System Surgery	Transcondylar approach/skull	Only Inpatient
61598		Nervous System Surgery	Transpetrosal approach/skull	Only Inpatient
61600		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61601		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61605		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61606		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61607		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61608		Nervous System Surgery	Resect/excise cranial lesion	Only Inpatient
61610		Nervous System Surgery	Transect artery sinus	Only Inpatient
61611		Nervous System Surgery	Transect artery sinus	Only Inpatient
61612		Nervous System Surgery	Transect artery sinus	Only Inpatient
61613		Nervous System Surgery	Remove aneurysm sinus	Only Inpatient
61615		Nervous System Surgery	Resect/excise lesion skull	Only Inpatient
61616		Nervous System Surgery	Resect/excise lesion skull	Only Inpatient
61618		Nervous System Surgery	Repair dura	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
61619		Nervous System Surgery	Repair dura	Only Inpatient
61624		Nervous System Surgery	Transcath occlusion cns	Only Inpatient
61630		Nervous System Surgery	Intracranial angioplasty	Only Inpatient
61635		Nervous System Surgery	Intracran angioplasty w/stent	Only Inpatient
61645		Nervous System Surgery	Perq art m-thrombect &/nfs	Only Inpatient
61650		Nervous System Surgery	Evasc prlng admn rx agnt 1st	Only Inpatient
61651		Nervous System Surgery	Evasc prlng admn rx agnt add	Only Inpatient
61680		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61682		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61684		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61686		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61690		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61692		Nervous System Surgery	Intracranial vessel surgery	Only Inpatient
61697		Nervous System Surgery	Brain aneurysm repr complx	Only Inpatient
61698		Nervous System Surgery	Brain aneurysm repr complx	Only Inpatient
61700		Nervous System Surgery	Brain aneurysm repr simple	Only Inpatient
61702		Nervous System Surgery	Inner skull vessel surgery	Only Inpatient
61703		Nervous System Surgery	Clamp neck artery	Only Inpatient
61705		Nervous System Surgery	Revise circulation to head	Only Inpatient
61708		Nervous System Surgery	Revise circulation to head	Only Inpatient
61710		Nervous System Surgery	Revise circulation to head	Only Inpatient
61711		Nervous System Surgery	Fusion of skull arteries	Only Inpatient
61735		Nervous System Surgery	Incise skull/brain surgery	Only Inpatient
61750		Nervous System Surgery	Incise skull/brain biopsy	Only Inpatient
61751		Nervous System Surgery	Brain biopsy w/ct/mr guide	Only Inpatient
61760		Nervous System Surgery	Implant brain electrodes	Only Inpatient
61850		Nervous System Surgery	Implant neuroelectrodes	Only Inpatient
61860		Nervous System Surgery	Implant neuroelectrodes	Only Inpatient
61863		Nervous System Surgery	Implant neuroelectrode	Only Inpatient
61864		Nervous System Surgery	Implant neuroelectrde addl	Only Inpatient
61867		Nervous System Surgery	Implant neuroelectrode	Only Inpatient
61868		Nervous System Surgery	Implant neuroelectrde addl	Only Inpatient
61870		Nervous System Surgery	Implant neuroelectrodes	Only Inpatient
62005		Nervous System Surgery	Treat skull fracture	Only Inpatient
62010		Nervous System Surgery	Treatment of head injury	Only Inpatient
62100		Nervous System Surgery	Repair brain fluid leakage	Only Inpatient
62115		Nervous System Surgery	Reduction of skull defect	Only Inpatient
62117		Nervous System Surgery	Reduction of skull defect	Only Inpatient
62120		Nervous System Surgery	Repair skull cavity lesion	Only Inpatient
62121		Nervous System Surgery	Incise skull repair	Only Inpatient
62140		Nervous System Surgery	Repair of skull defect	Only Inpatient
62141		Nervous System Surgery	Repair of skull defect	Only Inpatient
62142		Nervous System Surgery	Remove skull plate/flap	Only Inpatient
62143		Nervous System Surgery	Replace skull plate/flap	Only Inpatient
62145		Nervous System Surgery	Repair of skull & brain	Only Inpatient
62146		Nervous System Surgery	Repair of skull with graft	Only Inpatient
62147		Nervous System Surgery	Repair of skull with graft	Only Inpatient
62148		Nervous System Surgery	Retr bone flap to fix skull	Only Inpatient
62161		Nervous System Surgery	Dissect brain w/scope	Only Inpatient
62162		Nervous System Surgery	Remove colloid cyst w/scope	Only Inpatient
62163		Nervous System Surgery	Zneuroendoscopy w/fb removal	Only Inpatient
62164		Nervous System Surgery	Remove brain tumor w/scope	Only Inpatient
62165		Nervous System Surgery	Remove pituit tumor w/scope	Only Inpatient
62180		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
62190		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient
62192		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient
62200		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient
62201		Nervous System Surgery	Brain cavity shunt w/scope	Only Inpatient
62220		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient
62223		Nervous System Surgery	Establish brain cavity shunt	Only Inpatient
62256		Nervous System Surgery	Remove brain cavity shunt	Only Inpatient
62258		Nervous System Surgery	Replace brain cavity shunt	Only Inpatient
62323		Injection Procedures	Njx interlaminar lmr/sac	
63001		Orthopedic Surgeries	Remove spine lamina 1/2 crvl	
63003		Orthopedic Surgeries	Remove spine lamina 1/2 thrc	
63005		Orthopedic Surgeries	Remove spine lamina 1/2 lmr	
63011		Orthopedic Surgeries	Remove spine lamina 1/2 scr1	
63012		Orthopedic Surgeries	Remove lamina/facets lumbar	
63015		Orthopedic Surgeries	Remove spine lamina >2 crvcl	
63016		Orthopedic Surgeries	Remove spine lamina >2 thrc	
63017		Orthopedic Surgeries	Remove spine lamina >2 lmr	
63020		Orthopedic Surgeries	Neck spine disk surgery	
63030		Orthopedic Surgeries	Low back disk surgery	
63040		Orthopedic Surgeries	Laminotomy single cervical	
63042		Orthopedic Surgeries	Laminotomy single lumbar	
63045		Orthopedic Surgeries	Remove spine lamina 1 crvl	
63046		Orthopedic Surgeries	Remove spine lamina 1 thrc	
63047		Orthopedic Surgeries	Remove spine lamina 1 lmr	
63048		Orthopedic Surgeries	Remove spinal lamina add-on	
63050		Orthopedic Surgeries	Cervical laminoplasty 2/> seg	Only Inpatient
63051		Orthopedic Surgeries	C-laminoplasty w/graft/plate	Only Inpatient
63055		Orthopedic Surgeries	Decompress spinal cord thrc	
63056		Orthopedic Surgeries	Decompress spinal cord lmr	
63064		Orthopedic Surgeries	Decompress spinal cord thrc	
63075		Orthopedic Surgeries	Neck spine disk surgery	
63077		Orthopedic Surgeries	Spine disk surgery thorax	Only Inpatient
63078		Nervous System Surgery	Spine disk surgery thorax	Only Inpatient
63081		Orthopedic Surgeries	Remove vert body dcprn crvl	Only Inpatient
63082		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63085		Orthopedic Surgeries	Remove vert body dcprn thrc	Only Inpatient
63086		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63087		Orthopedic Surgeries	Remov vertbr dcprn thrclmr	Only Inpatient
63088		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63090		Orthopedic Surgeries	Remove vert body dcprn lmr	Only Inpatient
63091		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63101		Orthopedic Surgeries	Remove vert body dcprn thrc	Only Inpatient
63102		Orthopedic Surgeries	Remove vert body dcprn lmr	Only Inpatient
63103		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63170		Orthopedic Surgeries	Incise spinal cord tract(s)	Only Inpatient
63172		Orthopedic Surgeries	Drainage of spinal cyst	Only Inpatient
63173		Orthopedic Surgeries	Drainage of spinal cyst	Only Inpatient
63180		Orthopedic Surgeries	Revise spinal cord ligaments	Only Inpatient
63182		Orthopedic Surgeries	Revise spinal cord ligaments	Only Inpatient
63185		Orthopedic Surgeries	Incise spine nrv half segmnt	Only Inpatient
63190		Orthopedic Surgeries	Incise spine nrv >2 segmnts	Only Inpatient
63191		Orthopedic Surgeries	Incise spine accessory nerve	Only Inpatient
63194		Orthopedic Surgeries	Incise spine & cord cervical	Only Inpatient
63195		Orthopedic Surgeries	Incise spine & cord thoracic	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
63196		Orthopedic Surgeries	Incise spine&cord 2 trx crvl	Only Inpatient
63197		Orthopedic Surgeries	Incise spine&cord 2 trx thrc	Only Inpatient
63198		Orthopedic Surgeries	Incise spin&cord 2 stgs crvl	Only Inpatient
63199		Orthopedic Surgeries	Incise spin&cord 2 stgs thrc	Only Inpatient
63200		Orthopedic Surgeries	Release spinal cord lumbar	Only Inpatient
63250		Nervous System Surgery	Revise spinal cord vsls crvl	Only Inpatient
63251		Nervous System Surgery	Revise spinal cord vsls thrc	Only Inpatient
63252		Nervous System Surgery	Revise spine cord vsl thrlmb	Only Inpatient
63265		Nervous System Surgery	Excise intraspinal lesion crv	Only Inpatient
63266		Nervous System Surgery	Excise intraspinal lesion thrc	Only Inpatient
63267		Nervous System Surgery	Excise intraspinal lesion lmb	Only Inpatient
63268		Nervous System Surgery	Excise intraspinal lesion scrl	Only Inpatient
63270		Nervous System Surgery	Excise intraspinal lesion crvl	Only Inpatient
63271		Nervous System Surgery	Excise intraspinal lesion thrc	Only Inpatient
63272		Nervous System Surgery	Excise intraspinal lesion lmb	Only Inpatient
63273		Nervous System Surgery	Excise intraspinal lesion scrl	Only Inpatient
63275		Nervous System Surgery	Bx/exc xdr spine lesn crvl	Only Inpatient
63276		Nervous System Surgery	Bx/exc xdr spine lesn thrc	Only Inpatient
63277		Nervous System Surgery	Bx/exc xdr spine lesn lmb	Only Inpatient
63278		Nervous System Surgery	Bx/exc xdr spine lesn scrl	Only Inpatient
63280		Nervous System Surgery	Bx/exc idrl spine lesn crvl	Only Inpatient
63281		Nervous System Surgery	Bx/exc idrl spine lesn thrc	Only Inpatient
63282		Nervous System Surgery	Bx/exc idrl spine lesn lmb	Only Inpatient
63283		Nervous System Surgery	Bx/exc idrl spine lesn scrl	Only Inpatient
63285		Nervous System Surgery	Bx/exc idrl imed lesn cervl	Only Inpatient
63286		Nervous System Surgery	Bx/exc idrl imed lesn thrc	Only Inpatient
63287		Nervous System Surgery	Bx/exc idrl imed lesn thrlmb	Only Inpatient
63290		Nervous System Surgery	Bx/exc xdr/idrl lsn any lvl	Only Inpatient
63295		Nervous System Surgery	Repair laminectomy defect	Only Inpatient
63300		Nervous System Surgery	Remove vert xdr body crvl	Only Inpatient
63301		Nervous System Surgery	Remove vert xdr body thrc	Only Inpatient
63302		Nervous System Surgery	Remove vert xdr body thrlmb	Only Inpatient
63303		Nervous System Surgery	Remov vert xdr bdy lmb/sac	Only Inpatient
63304		Nervous System Surgery	Remove vert idrl body crvl	Only Inpatient
63305		Nervous System Surgery	Remove vert idrl body thrc	Only Inpatient
63306		Nervous System Surgery	Remov vert idrl bdy thrlmb	Only Inpatient
63307		Nervous System Surgery	Remov vert idrl bdy lmb/sac	Only Inpatient
63308		Nervous System Surgery	Remove vertebral body add-on	Only Inpatient
63650		Spinal Stimulator for Pain Management	Implant neuroelectrodes	
63655		Spinal Stimulator for Pain Management	Implant neuroelectrodes	
63685		Spinal Stimulator for Pain Management	Insrt/redo spine n generator	
63700		Nervous System Surgery	Repair of spinal herniation	Only Inpatient
63702		Nervous System Surgery	Repair of spinal herniation	Only Inpatient
63704		Nervous System Surgery	Repair of spinal herniation	Only Inpatient
63706		Nervous System Surgery	Repair of spinal herniation	Only Inpatient
63707		Nervous System Surgery	Repair spinal fluid leakage	Only Inpatient
63709		Nervous System Surgery	Repair spinal fluid leakage	Only Inpatient
63710		Nervous System Surgery	Graft repair of spine defect	Only Inpatient
63740		Nervous System Surgery	Install spinal shunt	Only Inpatient
64479		Injection Procedures	Inj foramen epidural c/t	
64480		Injection Procedures	Inj foramen epidural add-on	
64483		Injection Procedures	Inj foramen epidural l/s	
64484		Injection Procedures	Inj foramen epidural add-on	
64490		Injection Procedures	Inj paravert f jnt c/t 1 lev	

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Code	Mod	Procedures & Services	Description	Rule Description
64491		Injection Procedures	Inj paravert f jnt c/t 2 lev	
64492		Injection Procedures	Inj paravert f jnt c/t 3 lev	
64493		Injection Procedures	Inj paravert f jnt l/s 1 lev	
64494		Injection Procedures	Inj paravert f jnt l/s 2 lev	
64495		Injection Procedures	Inj paravert f jnt l/s 3 lev	
64555		Nervous System & Orthopedic Procedures	Implant neuroelectrodes	
64590		Bariatrics Surgery	Insrt/redo pn/gastr stimul	
64633		Nervous System & Orthopedic Procedures	Destroy cerv/thor facet jnt	
64634		Nervous System & Orthopedic Procedures	Destroy c/th facet jnt addl	
64635		Nervous System & Orthopedic Procedures	Destroy lumb/sac facet jnt	
64636		Nervous System & Orthopedic Procedures	Destroy l/s facet jnt addl	
64721		Carpal Tunnel Surgery	Carpal tunnel surgery	
64722		Nervous System Surgery	Relieve pressure on nerve(s)	
64744		Nervous System Surgery	Incise nerve back of head	
64755		Nervous System Surgery	Incision of stomach nerves	Only Inpatient
64760		Nervous System Surgery	Incision of vagus nerve	Only Inpatient
64809		Nervous System Surgery	Remove sympathetic nerves	Only Inpatient
64818		Nervous System Surgery	Remove sympathetic nerves	Only Inpatient
64866		Nervous System Surgery	Fusion of facial/other nerve	Only Inpatient
64868		Nervous System Surgery	Fusion of facial/other nerve	Only Inpatient
65273		Eye & Ocular Surgery	Repair of eye wound	Only Inpatient
66180		Eye & Ocular Surgery	Aqueous shunt eye w/graft	
67900		Cosmetic & Reconstructive	Repair brow defect	
67901		Cosmetic & Reconstructive	Repair eyelid defect	
67902		Cosmetic & Reconstructive	Repair eyelid defect	
67903		Cosmetic & Reconstructive	Repair eyelid defect	
67904		Cosmetic & Reconstructive	Repair eyelid defect	
67906		Cosmetic & Reconstructive	Repair eyelid defect	
67908		Cosmetic & Reconstructive	Repair eyelid defect	
67909		Cosmetic & Reconstructive	Revise eyelid defect	
67911		Cosmetic & Reconstructive	Revise eyelid defect	
67912		Cosmetic & Reconstructive	Correction eyelid w/implant	
67914		Cosmetic & Reconstructive	Repair eyelid defect	
67915		Cosmetic & Reconstructive	Repair eyelid defect	
67916		Cosmetic & Reconstructive	Repair eyelid defect	
67917		Cosmetic & Reconstructive	Repair eyelid defect	
67921		Cosmetic & Reconstructive	Repair eyelid defect	
67922		Cosmetic & Reconstructive	Repair eyelid defect	
67923		Cosmetic & Reconstructive	Repair eyelid defect	
67924		Cosmetic & Reconstructive	Repair eyelid defect	
67950		Cosmetic & Reconstructive	Revision of eyelid	
67961		Cosmetic & Reconstructive	Revision of eyelid	
67966		Cosmetic & Reconstructive	Revision of eyelid	
69155		Auditory System Surgery	Extensive ear/neck surgery	Only Inpatient
69300		Otoplasty - Cosmetic & Reconstructive	Revise external ear	
69535		Auditory System Surgery	Remove part of temporal bone	Only Inpatient
69554		Auditory System Surgery	Remove ear lesion	Only Inpatient
69714		Auditory Implants	Implant temple bone w/stimul	
69715		Auditory Implants	Temple bne implnt w/stimulat	
69717		Auditory Implants	Temple bone implant revision	
69718		Auditory Implants	Revise temple bone implant	
69799		Auditory Implants	Middle ear surgery procedure	
69930		Auditory Implants	Implant cochlear device	
69950		Auditory System Surgery	Incise inner ear nerve	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
69979		Cochlear Implants and Other Auditory Implants	Temporal bone surgery	
70010		Radiology-Head & Neck	Contrast x-ray of brain	
70015		Radiology-Head & Neck	Contrast x-ray of brain	
70332		Radiology-Head & Neck	X-ray exam of jaw joint	
70336		Radiology-Head & Neck	Magnetic image jaw joint	
70450		Radiology-Head & Neck	CT head/brain w/o dye	
70460		Radiology-Head & Neck	CT head/brain w/dye	
70470		Radiology-Head & Neck	CT head/brain w/o & w/dye	
70480		Radiology-Head & Neck	CT orbit/ear/fossa w/o dye	
70481		Radiology-Head & Neck	CT orbit/ear/fossa w/dye	
70486		Radiology-Head & Neck	CT maxillofacial w/o dye	
70487		Radiology-Head & Neck	CT maxillofacial w/dye	
70488		Radiology-Head & Neck	CT maxillofacial w/o & w/dye	
70490		Radiology-Head & Neck	CT soft tissue neck w/o dye	
70491		Radiology-Head & Neck	CT soft tissue neck w/dye	
70492		Radiology-Head & Neck	CT sft tsue nck w/o & w/dye	
70496		Radiology-Head & Neck	CT angiography head	
70498		Radiology-Head & Neck	CT angiography neck	
70540		Radiology-Head & Neck	MRI orbit/face/neck w/o dye	
70542		Radiology-Head & Neck	MRI orbit/face/neck w/dye	
70543		Radiology-Head & Neck	MRI orbt/fac/nck w/o &w/dye	
70544		Radiology-Head & Neck	MR angiography head w/o dye	
70545		Radiology-Head & Neck	MR angiography head w/dye	
70546		Radiology-Head & Neck	MR angiograph head w/o&w/dye	
70547		Radiology-Head & Neck	MR angiography neck w/o dye	
70548		Radiology-Head & Neck	MR angiography neck w/dye	
70549		Radiology-Head & Neck	MR angiograph neck w/o&w/dye	
70551		Radiology-Head & Neck	MRI brain stem w/o dye	
70552		Radiology-Head & Neck	MRI brain stem w/dye	
70553		Radiology-Head & Neck	MRI brain stem w/o & w/dye	
70554		Radiology-Head & Neck	FMRI brain by tech	
70555		Radiology-Head & Neck	FMRI brain by phys/psych	
70557		Radiology-Head & Neck	MRI brain w/o dye	
70558		Radiology-Head & Neck	MRI brain w/dye	
70559		Radiology-Head & Neck	MRI brain w/o & w/dye	
71250		Radiology-Chest	CT thorax w/o dye	
71260		Radiology-Chest	CT thorax w/dye	
71270		Radiology-Chest	CT thorax w/o & w/dye	
71275		Radiology-Chest	CT angiography chest	
71550		Radiology-Chest	MRI chest w/o dye	
71551		Radiology-Chest	MRI chest w/dye	
71552		Radiology-Chest	MRI chest w/o & w/dye	
71555		Radiology-Chest	MRI angio chest w or w/o dye	
72125		Radiology-Spine & Pelvis	CT neck spine w/o dye	
72126		Radiology-Spine & Pelvis	CT neck spine w/dye	
72127		Radiology-Spine & Pelvis	CT neck spine w/o & w/dye	
72128		Radiology-Spine & Pelvis	CT chest spine w/o dye	
72129		Radiology-Spine & Pelvis	CT chest spine w/dye	
72130		Radiology-Spine & Pelvis	CT chest spine w/o & w/dye	
72131		Radiology-Spine & Pelvis	CT lumbar spine w/o dye	
72132		Radiology-Spine & Pelvis	CT lumbar spine w/dye	
72133		Radiology-Spine & Pelvis	CT lumbar spine w/o & w/dye	
72141		Radiology-Spine & Pelvis	MRI neck spine w/o dye	
72142		Radiology-Spine & Pelvis	MRI neck spine w/dye	

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72146		Radiology-Spine & Pelvis	MRI chest spine w/o dye	
72147		Radiology-Spine & Pelvis	MRI chest spine w/dye	
72148		Radiology-Spine & Pelvis	MRI lumbar spine w/o dye	
72149		Radiology-Spine & Pelvis	MRI lumbar spine w/dye	
72156		Radiology-Spine & Pelvis	MRI neck spine w/o & w/dye	
72157		Radiology-Spine & Pelvis	MRI chest spine w/o & w/dye	
72158		Radiology-Spine & Pelvis	MRI lumbar spine w/o & w/dye	
72159		Radiology-Spine & Pelvis	MR angio spine w/o&w/dye	
72191		Radiology-Spine & Pelvis	CT angiograph pelv w/o&w/dye	
72192		Radiology-Spine & Pelvis	CT pelvis w/o dye	
72193		Radiology-Spine & Pelvis	CT pelvis w/dye	
72194		Radiology-Spine & Pelvis	CT pelvis w/o & w/dye	
72195		Radiology-Spine & Pelvis	MRI pelvis w/o dye	
72196		Radiology-Spine & Pelvis	MRI pelvis w/dye	
72197		Radiology-Spine & Pelvis	MRI pelvis w/o & w/dye	
72198		Radiology-Spine & Pelvis	MR angio pelvis w/o & w/dye	
72240		Radiology-Spine & Pelvis	Myelography neck spine	
72255		Radiology-Spine & Pelvis	Myelography thoracic spine	
72265		Radiology-Spine & Pelvis	Myelography l-s spine	
72270		Radiology-Spine & Pelvis	Myelography 2/> spine regions	
72275		Radiology-Spine & Pelvis	Epidurography	
72285		Radiology-Spine & Pelvis	Discography cerv/thor spine	
72295		Radiology-Spine & Pelvis	X-ray of lower spine disk	
73200		Radiology-Upper Extremities	CT upper extremity w/o dye	
73201		Radiology-Upper Extremities	CT upper extremity w/dye	
73202		Radiology-Upper Extremities	CT uppr extremity w/o&w/dye	
73206		Radiology-Upper Extremities	CT angio upr extrm w/o&w/dye	
73218		Radiology-Upper Extremities	MRI upper extremity w/o dye	
73219		Radiology-Upper Extremities	MRI upper extremity w/dye	
73220		Radiology-Upper Extremities	MRI uppr extremity w/o&w/dye	
73221		Radiology-Upper Extremities	MRI joint upr extrem w/o dye	
73222		Radiology-Upper Extremities	MRI joint upr extrem w/dye	
73223		Radiology-Upper Extremities	MRI joint upr extr w/o&w/dye	
73225		Radiology-Upper Extremities	MR angio upr extr w/o&w/dye	
73700		Radiology-Lower Extremities	CT lower extremity w/o dye	
73701		Radiology-Lower Extremities	CT lower extremity w/dye	
73702		Radiology-Lower Extremities	CT lwr extremity w/o&w/dye	
73706		Radiology-Lower Extremities	CT angio lwr extr w/o&w/dye	
73718		Radiology-Lower Extremities	MRI lower extremity w/o dye	
73719		Radiology-Lower Extremities	MRI lower extremity w/dye	
73720		Radiology-Lower Extremities	MRI lwr extremity w/o&w/dye	
73721		Radiology-Lower Extremities	MRI jnt of lwr extre w/o dye	
73722		Radiology-Lower Extremities	MRI joint of lwr extr w/dye	
73723		Radiology-Lower Extremities	MRI joint lwr extr w/o&w/dye	
73725		Radiology-Lower Extremities	MR ang lwr ext w or w/o dye	
74150		Radiology-Abdomen	CT abdomen w/o dye	
74160		Radiology-Abdomen	CT abdomen w/dye	
74170		Radiology-Abdomen	CT abdomen w/o & w/dye	
74174		Radiology-Abdomen	CT angio abd&pelv w/o&w/dye	
74175		Radiology-Abdomen	CT angio abdom w/o & w/dye	
74176		Radiology-Abdomen	CT abd & pelvis w/o contrast	
74177		Radiology-Abdomen	CT abd & pelv w/contrast	
74178		Radiology-Abdomen	CT abd & pelv 1/> regns	
74181		Radiology-Abdomen	MRI abdomen w/o dye	

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74182		Radiology-Abdomen	MRI abdomen w/dye	
74183		Radiology-Abdomen	MRI abdomen w/o & w/dye	
74185		Radiology-Abdomen	MRI angio abdom w orw/o dye	
74190		Radiology-Abdomen	X-ray exam of peritoneum	
74260		Radiology-Gastrointestinal Tract	X-ray exam of small bowel	
74261		Radiology-Gastrointestinal Tract	CT colonography dx	
74262		Radiology-Gastrointestinal Tract	CT colonography dx w/dye	
74263		Radiology-Gastrointestinal Tract	CT colonography screening	
74290		Radiology-Gastrointestinal Tract	Contrast x-ray gallbladder	
74300		Radiology-Gastrointestinal Tract	X-ray bile ducts/pancreas	
74301		Radiology-Gastrointestinal Tract	X-rays at surgery add-on	
74328		Radiology-Gastrointestinal Tract	X-ray bile duct endoscopy	
74329		Radiology-Gastrointestinal Tract	X-ray for pancreas endoscopy	
74330		Radiology-Gastrointestinal Tract	X-ray bile/panc endoscopy	
74340		Radiology-Gastrointestinal Tract	X-ray guide for gi tube	
74355		Radiology-Gastrointestinal Tract	X-ray guide intestinal tube	
74360		Radiology-Gastrointestinal Tract	X-ray guide gi dilation	
74363		Radiology-Gastrointestinal Tract	X-ray bile duct dilation	
74485		Radiology-Urinary Tract	X-ray guide gu dilation	
74712		Radiology-Gynecological & Obstetrical	MRI fetal snl/1st gestation	
74713		Radiology-Gynecological & Obstetrical	MRI fetal ea adtl gestation	
74740		Radiology-Gynecological & Obstetrical	X-ray female genital tract	
74742		Radiology-Gynecological & Obstetrical	X-ray fallopian tube	
74775		Radiology-Gynecological & Obstetrical	X-ray exam of perineum	
75557		Radiology-Heart	Cardiac MRI for morph	
75559		Radiology-Heart	Cardiac MRI w/stress img	
75561		Radiology-Heart	Cardiac MRI for morph w/dye	
75563		Radiology-Heart	Card MRI w/stress img & dye	
75565		Radiology-Heart	Card MRI veloc flow mapping	
75571		Radiology-Heart	CT hrt w/o dye w/ca test	
75572		Radiology-Heart	CT hrt w/3d image	
75573		Radiology-Heart	CT hrt w/3d image congen	
75574		Radiology-Heart	CT angio hrt w/3d image	
75600		Radiology-Vascular Procedures	Contrast exam thoracic aorta	
75605		Radiology-Vascular Procedures	Contrast exam thoracic aorta	
75625		Radiology-Aortography	Contrast exam abdominl aorta	
75630		Radiology-Aortography	X-ray aorta leg arteries	
75635		Radiology-Aortography	CT angio abdominal arteries	
75705		Radiology-Aortography	Artery x-rays spine	
75710		Radiology-Aortography	Artery x-rays arm/leg	
75716		Radiology-Aortography	Artery x-rays arms/legs	
75726		Radiology-Aortography	Artery x-rays abdomen	
75731		Radiology-Aortography	Artery x-rays adrenal gland	
75733		Radiology-Aortography	Artery x-rays adrenals	
75736		Radiology-Aortography	Artery x-rays pelvis	
75741		Radiology-Aortography	Artery x-rays lung	
75743		Radiology-Aortography	Artery x-rays lungs	
75746		Radiology-Aortography	Artery x-rays lung	
75756		Radiology-Aortography	Artery x-rays chest	
75774		Radiology-Aortography	Artery x-ray each vessel	
75801		Radiology-Viens & Lymphatics	Lymph vessel x-ray arm/leg	
75803		Radiology-Viens & Lymphatics	Lymph vessel x-ray arms/legs	
75805		Radiology-Viens & Lymphatics	Lymph vessel x-ray trunk	
75807		Radiology-Viens & Lymphatics	Lymph vessel x-ray trunk	



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75809		Radiology-Viens & Lymphatics	Nonvascular shunt x-ray	
75810		Radiology-Viens & Lymphatics	Vein x-ray spleen/liver	
75820		Radiology-Viens & Lymphatics	Vein x-ray arm/leg	
75822		Radiology-Viens & Lymphatics	Vein x-ray arms/legs	
75825		Radiology-Viens & Lymphatics	Vein x-ray trunk	
75827		Radiology-Venography	Vein x-ray chest	
75831		Radiology-Venography	Vein x-ray kidney	
75833		Radiology-Venography	Vein x-ray kidneys	
75840		Radiology-Venography	Vein x-ray adrenal gland	
75842		Radiology-Venography	Vein x-ray adrenal glands	
75860		Radiology-Venography	Vein x-ray neck	
75870		Radiology-Venography	Vein x-ray skull	
75872		Radiology-Venography	Vein x-ray skull epidural	
75880		Radiology-Venography	Vein x-ray eye socket	
75885		Radiology-Venography	Vein x-ray liver w/hemodynam	
75887		Radiology-Venography	Vein x-ray liver w/o hemodyn	
75889		Radiology-Venography	Vein x-ray liver w/hemodynam	
75891		Radiology-Venography	Vein x-ray liver	
75893		Radiology-Venography	Venous sampling by catheter	
75894		Radiology-Transcatheter Procedures	X-rays transcath therapy	
75898		Radiology-Transcatheter Procedures	Follow-up angiography	
75901		Radiology-Transcatheter Procedures	Remove cva device obstruct	
75902		Radiology-Transcatheter Procedures	Remove cva lumen obstruct	
75956		Radiology-Transcatheter Procedures	Xray endovasc thor ao repr	Only Inpatient
75957		Radiology-Transcatheter Procedures	Xray endovasc thor ao repr	Only Inpatient
75958		Radiology-Transcatheter Procedures	Xray place prox ext thor ao	Only Inpatient
75959		Radiology-Transcatheter Procedures	Xray place dist ext thor ao	Only Inpatient
75970		Radiology-Transcatheter Procedures	Vascular biopsy	
75984		Radiology-Transcatheter Procedures	Xray control catheter change	
75989		Radiology-Transcatheter Procedures	Abscess drainage under x-ray	
76000		Radiology-Other Procedures	Fluoroscopy <1 hr phys/ghp	
76001		Radiology-Other Procedures	Fluoroscope exam extensive	
76380		Radiology-Other Procedures	Cat scan follow-up study	
76390		Radiology-Other Procedures	MR spectroscopy	
76496		Radiology-Other Procedures	Fluoroscopic procedure	
76497		Radiology-Other Procedures	CT procedure	
76498		Radiology-Other Procedures	MRI procedure	
76499		Radiology-Other Procedures	Radiographic procedure	
77011		Radiology-Fluoroscopic Guidance	Ct scan for localization	
77012		Radiology-Breast	CT scan for needle biopsy	
77013		Radiology-Breast	CT guide for tissue ablation	
77014		Radiology-Breast	CT scan for therapy guide	
77021		Radiology-Magnetic Resonance Guidance	MR guidance for needle place	
77022		Radiology-Magnetic Resonance Guidance	MRI for tissue ablation	
77058		Radiology-Breast, Mammography	MRI one breast	
77059		Radiology-Breast, Mammography	MRI both breasts	
77078		Radiology-Bone/Joint Studies	CT bone density axial	
77084		Radiology-Radiology Oncology	Magnetic image bone marrow	
77261		Radiology Oncology - Clinical Trtmt Planning	Radiation therapy planning	
77262		Radiology Oncology - Clinical Trtmt Planning	Radiation therapy planning	
77263		Radiology Oncology - Clinical Trtmt Planning	Radiation therapy planning	
77280		Radiology Oncology - Clinical Trtmt Planning	Set radiation therapy field	
77285		Radiology Oncology - Clinical Trtmt Planning	Set radiation therapy field	
77290		Radiology Oncology - Clinical Trtmt Planning	Set radiation therapy field	

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77293		Radiology Oncology - Clinical Trtmt Planning	Respirator motion mgmt simul	
77295		Medical Radiation Physics, Services	3-d radiotherapy plan	
77299		Radiology Oncology - Clinical Trtmt Planning	Radiation therapy planning	
77300		Medical Radiation Physics, Services	Radiation therapy dose plan	
77301		Medical Radiation Physics, Services	Radiotherapy dose plan imrt	
77306		Medical Radiation Physics, Services	Telethx isodose plan simple	
77307		Medical Radiation Physics, Services	Telethx isodose plan cplx	
77316		Medical Radiation Physics, Services	Brachytx isodose plan simple	
77317		Medical Radiation Physics, Services	Brachytx isodose intermed	
77318		Medical Radiation Physics, Services	Brachytx isodose complex	
77321		Medical Radiation Physics, Services	Special teletx port plan	
77331		Medical Radiation Physics, Services	Special radiation dosimetry	
77332		Medical Radiation Physics, Services	Radiation treatment aid(s)	
77333		Medical Radiation Physics, Services	Radiation treatment aid(s)	
77334		Medical Radiation Physics, Services	Radiation treatment aid(s)	
77336		Medical Radiation Physics, Services	Radiation physics consult	
77338		Medical Radiation Physics, Services	Design mlc device for imrt	
77370		Medical Radiation Physics, Services	Radiation physics consult	
77371		Stereotactic Radiation Treatment Delivery	Srs multisource	
77372		Stereotactic Radiation Treatment Delivery	Srs linear based	
77373		Stereotactic Radiation Treatment Delivery	Sbrt delivery	
77385		Radiation Treatment Delivery	Ntsty modul rad tx dlvr simpl	
77386		Radiation Treatment Delivery	Ntsty modul rad tx dlvr cplx	
77387		Radiation Treatment Delivery	Guidance for radiaj tx dlvr	
77399		Radiology-Other Procedures	External radiation dosimetry	
77401		Radiation Treatment Delivery	Radiation treatment delivery	
77402		Radiation Treatment Delivery	Radiation treatment delivery	
77407		Radiation Treatment Delivery	Radiation treatment delivery	
77412		Radiation Treatment Delivery	Radiation treatment delivery	
77417		Radiation Treatment Delivery	Radiology port images(s)	
77423		Neutron Beam Treatment Delivery	Neutron beam tx complex	
77424		Neutron Beam Treatment Delivery	lo rad tx delivery by x-ray	
77425		Neutron Beam Treatment Delivery	lo rad tx deliver by elctns	
77427		Radiation Treatment Management	Radiation tx management x5	
77431		Radiation Treatment Management	Radiation therapy management	
77432		Radiation Treatment Management	Stereotactic radiation trmt	
77435		Radiation Treatment Management	Sbrt management	
77469		Radiation Treatment Management	lo radiation tx management	
77470		Radiation Treatment Management	Special radiation treatment	
77499		Radiation Treatment Management	Radiation therapy management	
77520		Proton Beam Treatment Delivery	Proton trmt simple w/o comp	
77522		Proton Beam Treatment Delivery	Proton trmt simple w/comp	
77523		Proton Beam Treatment Delivery	Proton trmt intermediate	
77525		Proton Beam Treatment Delivery	Proton treatment complex	
77600		Radiology-Hyperthermia	Hyperthermia treatment	
77605		Radiology-Hyperthermia	Hyperthermia treatment	
77610		Radiology-Hyperthermia	Hyperthermia treatment	
77615		Radiology-Hyperthermia	Hyperthermia treatment	
77620		Radiology-Clinical Intracavitary Hyperthermia	Hyperthermia treatment	
77750		Radiology-Clinical Intracavitary Hyperthermia	Infuse radioactive materials	
77761		Radiology-Clinical Intracavitary Hyperthermia	Apply intrcav radiat simple	
77762		Radiology-Clinical Intracavitary Hyperthermia	Apply intrcav radiat interm	
77763		Radiology-Clinical Intracavitary Hyperthermia	Apply intrcav radiat compl	
77767		Radiology-Clinical Intracavitary Hyperthermia	Hdr rdnc l skn surf brachytx	

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
77768		Radiology-Clinical Intracavitary Hyperthermia	Hdr rdnc1 skn surf brachytx	
77770		Radiology-Clinical Intracavitary Hyperthermia	Hdr rdnc1 ntrstl/icav brchtx	
77771		Radiology-Clinical Intracavitary Hyperthermia	Hdr rdnc1 ntrstl/icav brchtx	
77772		Radiology-Clinical Intracavitary Hyperthermia	Hdr rdnc1 ntrstl/icav brchtx	
77778		Radiology-Clinical Intracavitary Hyperthermia	Apply interstit radiat compl	
77789		Radiology-Clinical Intracavitary Hyperthermia	Apply surf ldr radionuclide	
77790		Radiology-Clinical Intracavitary Hyperthermia	Radiation handling	
77799		Radiology-Clinical Intracavitary Hyperthermia	Radium/radioisotope therapy	
78012		Radiology-Nuclear Medicine, Diagnostic	Thyroid uptake measurement	
78013		Radiology-Nuclear Medicine, Diagnostic	Thyroid imaging w/blood flow	
78014		Radiology-Nuclear Medicine, Diagnostic	Thyroid imaging w/blood flow	
78015		Radiology-Nuclear Medicine, Diagnostic	Thyroid met imaging	
78016		Radiology-Nuclear Medicine, Diagnostic	Thyroid met imaging/studies	
78070		Radiology-Nuclear Medicine, Diagnostic	Parathyroid planar imaging	
78071		Radiology-Nuclear Medicine, Diagnostic	Parathyrd planar w/wo subtrj	
78072		Radiology-Nuclear Medicine, Diagnostic	Parathyrd planar w/spect&ct	
78075		Radiology-Nuclear Medicine, Diagnostic	Adrenal cortex & medulla img	
78099		Radiology-Nuclear Medicine, Diagnostic	Endocrine nuclear procedure	
78102		Radiology-Nuclear Medicine, Diagnostic	Bone marrow imaging ltd	
78103		Radiology-Nuclear Medicine, Diagnostic	Bone marrow imaging mult	
78104		Radiology-Nuclear Medicine, Diagnostic	Bone marrow imaging body	
78110		Radiology-Nuclear Medicine, Diagnostic	Plasma volume single	
78111		Radiology-Nuclear Medicine, Diagnostic	Plasma volume multiple	
78120		Radiology-Nuclear Medicine, Diagnostic	Red cell mass single	
78121		Radiology-Nuclear Medicine, Diagnostic	Red cell mass multiple	
78122		Radiology-Nuclear Medicine, Diagnostic	Blood volume	
78130		Radiology-Nuclear Medicine, Diagnostic	Red cell survival study	
78135		Radiology-Nuclear Medicine, Diagnostic	Red cell survival kinetics	
78140		Radiology-Nuclear Medicine, Diagnostic	Red cell sequestration	
78185		Radiology-Nuclear Medicine, Diagnostic	Spleen imaging	
78191		Radiology-Nuclear Medicine, Diagnostic	Platelet survival	
78195		Radiology-Nuclear Medicine, Diagnostic	Lymph system imaging	
78199		Radiology-Nuclear Medicine, Diagnostic	Blood/lymph nuclear exam	
78201		Radiology-Nuclear Medicine, Diagnostic	Liver imaging	
78202		Radiology-Nuclear Medicine, Diagnostic	Liver imaging with flow	
78205		Radiology-Nuclear Medicine, Diagnostic	Liver imaging (3d)	
78206		Radiology-Nuclear Medicine, Diagnostic	Liver image (3d) with flow	
78215		Radiology-Nuclear Medicine, Diagnostic	Liver and spleen imaging	
78216		Radiology-Nuclear Medicine, Diagnostic	Liver & spleen image/flow	
78226		Radiology-Nuclear Medicine, Diagnostic	Hepatobiliary system imaging	
78227		Radiology-Nuclear Medicine, Diagnostic	Hepatobil syst image w/drug	
78230		Radiology-Nuclear Medicine, Diagnostic	Salivary gland imaging	
78231		Radiology-Nuclear Medicine, Diagnostic	Serial salivary imaging	
78232		Radiology-Nuclear Medicine, Diagnostic	Salivary gland function exam	
78258		Radiology-Nuclear Medicine, Diagnostic	Esophageal motility study	
78261		Radiology-Nuclear Medicine, Diagnostic	Gastric mucosa imaging	
78262		Radiology-Nuclear Medicine, Diagnostic	Gastroesophageal reflux exam	
78264		Radiology-Nuclear Medicine, Diagnostic	Gastric emptying imag study	
78265		Radiology-Nuclear Medicine, Diagnostic	Gastric emptying imag study	
78266		Radiology-Nuclear Medicine, Diagnostic	Gastric emptying imag study	
78267		Radiology-Nuclear Medicine, Diagnostic	Breath tst attain/anal c-14	
78268		Radiology-Nuclear Medicine, Diagnostic	Breath test analysis c-14	
78270		Radiology-Nuclear Medicine, Diagnostic	Vit b-12 absorption exam	
78271		Radiology-Nuclear Medicine, Diagnostic	Vit b-12 absrp exam int fac	

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Code	Mod	Procedures & Services	Description	Rule Description
78272		Radiology-Nuclear Medicine, Diagnostic	Vit b-12 absorp combined	
78278		Radiology-Nuclear Medicine, Diagnostic	Acute gi blood loss imaging	
78282		Radiology-Nuclear Medicine, Diagnostic	Gi protein loss exam	
78290		Radiology-Nuclear Medicine, Diagnostic	Meckels divert exam	
78291		Radiology-Nuclear Medicine, Diagnostic	Leveen/shunt patency exam	
78299		Radiology-Nuclear Medicine, Diagnostic	Gi nuclear procedure	
78300		Radiology-Nuclear Medicine, Diagnostic	Bone imaging limited area	
78305		Radiology-Nuclear Medicine, Diagnostic	Bone imaging multiple areas	
78306		Radiology-Nuclear Medicine, Diagnostic	Bone imaging whole body	
78315		Radiology-Nuclear Medicine, Diagnostic	Bone imaging 3 phase	
78320		Radiology-Nuclear Medicine, Diagnostic	Bone imaging (3d)	
78350		Radiology-Nuclear Medicine, Diagnostic	Bone mineral single photon	
78351		Radiology-Nuclear Medicine, Diagnostic	Bone mineral dual photon	
78399		Radiology-Nuclear Medicine, Diagnostic	Musculoskeletal nuclear exam	
78414		Radiology-Nuclear Medicine, Diagnostic	Non-imaging heart function	
78428		Radiology-Nuclear Medicine, Diagnostic	Cardiac shunt imaging	
78445		Radiology-Nuclear Medicine, Diagnostic	Vascular flow imaging	
78451		Radiology-Nuclear Medicine, Diagnostic	Ht muscle image spect sing	
78452		Radiology-Nuclear Medicine, Diagnostic	Ht muscle image spect mult	
78453		Radiology-Nuclear Medicine, Diagnostic	Ht muscle image planar sing	
78454		Radiology-Nuclear Medicine, Diagnostic	Ht musc image planar mult	
78456		Radiology-Nuclear Medicine, Diagnostic	Acute venous thrombus image	
78457		Radiology-Nuclear Medicine, Diagnostic	Venous thrombosis imaging	
78458		Radiology-Nuclear Medicine, Diagnostic	Ven thrombosis images bilat	
78459		Radiology-Nuclear Medicine, Diagnostic	Heart muscle imaging (PET)	
78466		Radiology-Nuclear Medicine, Diagnostic	Heart infarct image	
78468		Radiology-Nuclear Medicine, Diagnostic	Heart infarct image (ef)	
78469		Radiology-Nuclear Medicine, Diagnostic	Heart infarct image (3d)	
78472		Radiology-Nuclear Medicine, Diagnostic	Gated heart planar single	
78473		Radiology-Nuclear Medicine, Diagnostic	Gated heart multiple	
78481		Radiology-Nuclear Medicine, Diagnostic	Heart first pass single	
78483		Radiology-Nuclear Medicine, Diagnostic	Heart first pass multiple	
78491		Radiology-Nuclear Medicine, Diagnostic	Heart image (PET) single	
78492		Radiology-Nuclear Medicine, Diagnostic	Heart image (PET) multiple	
78494		Radiology-Nuclear Medicine, Diagnostic	Heart image spect	
78496		Radiology-Nuclear Medicine, Diagnostic	Heart first pass add-on	
78499		Radiology-Nuclear Medicine, Diagnostic	Cardiovascular nuclear exam	
78579		Radiology-Nuclear Medicine, Diagnostic	Lung ventilation imaging	
78580		Radiology-Nuclear Medicine, Diagnostic	Lung perfusion imaging	
78582		Radiology-Nuclear Medicine, Diagnostic	Lung ventilat&perfus imaging	
78597		Radiology-Nuclear Medicine, Diagnostic	Lung perfusion differential	
78598		Radiology-Nuclear Medicine, Diagnostic	Lung perf&ventilat diferentl	
78599		Radiology-Nuclear Medicine, Diagnostic	Respiratory nuclear exam	
78600		Radiology-Nuclear Medicine, Diagnostic	Brain image < 4 views	
78601		Radiology-Nuclear Medicine, Diagnostic	Brain image w/flow < 4 views	
78605		Radiology-Nuclear Medicine, Diagnostic	Brain image 4+ views	
78606		Radiology-Nuclear Medicine, Diagnostic	Brain image w/flow 4 + views	
78607		Radiology-Nuclear Medicine, Diagnostic	Brain imaging (3d)	
78608		Radiology-Nuclear Medicine, Diagnostic	Brain imaging (PET)	
78609		Radiology-Nuclear Medicine, Diagnostic	Brain imaging (PET)	
78610		Radiology-Nuclear Medicine, Diagnostic	Brain flow imaging only	
78630		Radiology-Nuclear Medicine, Diagnostic	Cerebrospinal fluid scan	
78635		Radiology-Nuclear Medicine, Diagnostic	Csf ventriculography	
78645		Radiology-Nuclear Medicine, Diagnostic	Csf shunt evaluation	

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Code	Mod	Procedures & Services	Description	Rule Description
78647		Radiology-Nuclear Medicine, Diagnostic	Cerebrospinal fluid scan	
78650		Radiology-Nuclear Medicine, Diagnostic	Csf leakage imaging	
78660		Radiology-Nuclear Medicine, Diagnostic	Nuclear exam of tear flow	
78699		Radiology-Nuclear Medicine, Diagnostic	Nervous system nuclear exam	
78700		Radiology-Nuclear Medicine, Diagnostic	Kidney imaging morphol	
78701		Radiology-Nuclear Medicine, Diagnostic	Kidney imaging with flow	
78707		Radiology-Nuclear Medicine, Diagnostic	K flow/funct image w/o drug	
78708		Radiology-Nuclear Medicine, Diagnostic	K flow/funct image w/drug	
78709		Radiology-Nuclear Medicine, Diagnostic	K flow/funct image multiple	
78710		Radiology-Nuclear Medicine, Diagnostic	Kidney imaging (3d)	
78725		Radiology-Nuclear Medicine, Diagnostic	Kidney function study	
78730		Radiology-Nuclear Medicine, Diagnostic	Urinary bladder retention	
78740		Radiology-Nuclear Medicine, Diagnostic	Ureteral reflux study	
78761		Radiology-Nuclear Medicine, Diagnostic	Testicular imaging w/flow	
78799		Radiology-Nuclear Medicine, Diagnostic	Genitourinary nuclear exam	
78800		Radiology-Nuclear Medicine, Diagnostic	Tumor imaging limited area	
78801		Radiology-Nuclear Medicine, Diagnostic	Tumor imaging mult areas	
78802		Radiology-Nuclear Medicine, Diagnostic	Tumor imaging whole body	
78803		Radiology-Nuclear Medicine, Diagnostic	Tumor imaging (3d)	
78804		Radiology-Nuclear Medicine, Diagnostic	Tumor imaging whole body	
78805		Radiology-Nuclear Medicine, Diagnostic	Abscess imaging ltd area	
78806		Radiology-Nuclear Medicine, Diagnostic	Abscess imaging whole body	
78807		Radiology-Nuclear Medicine, Diagnostic	Nuclear localization/abscess	
78808		Radiology-Nuclear Medicine, Diagnostic	IV inj ra drug dx study	
78811		Radiology-Nuclear Medicine, Diagnostic	PET image ltd area	
78812		Radiology-Nuclear Medicine, Diagnostic	PET image skull-thigh	
78813		Radiology-Nuclear Medicine, Diagnostic	PET image full body	
78814		Radiology-Nuclear Medicine, Diagnostic	PET image w/ct lmtd	
78815		Radiology-Nuclear Medicine, Diagnostic	PET image w/ct skull-thigh	
78816		Radiology-Nuclear Medicine, Diagnostic	PET image w/ct full body	
78999		Radiology-Nuclear Medicine, Diagnostic	Nuclear diagnostic exam	
79005		Radiology-Nuclear Medicine, Therapeutic	Nuclear rx oral admin	
79101		Radiology-Nuclear Medicine, Therapeutic	Nuclear rx iv admin	
79200		Radiology-Nuclear Medicine, Therapeutic	Nuclear rx intracav admin	
79300		Radiology-Nuclear Medicine, Therapeutic	Nuclr rx interstit colloid	
79403		Radiology-Nuclear Medicine, Therapeutic	Hematopoietic nuclear tx	
79440		Radiology-Nuclear Medicine, Therapeutic	Nuclear rx intra-articular	
79445		Radiology-Nuclear Medicine, Therapeutic	Nuclear rx intra-arterial	
79999		Radiology-Nuclear Medicine, Therapeutic	Nuclear medicine therapy	
90867		Behavioral Health Services	Tcranial magn stim tx plan	
90868		Behavioral Health Services	Tcranial magn stim tx deli	
90869		Behavioral Health Services	Tcran magn stim redetermine	
90870		Behavioral Health Services	Electroconvulsive therapy	
92507		Home Health Therapy PT/OT/ST	Speech/hearing therapy	
92970		Other Therapies & Procedures	Cardioassist internal	Only Inpatient
92971		Other Therapies & Procedures	Cardioassist external	Only Inpatient
92975		Other Therapies & Procedures	Dissolve clot heart vessel	Only Inpatient
92992		Other Therapies & Procedures	Revision of heart chamber	Only Inpatient
92993		Other Therapies & Procedures	Revision of heart chamber	Only Inpatient
93005		Cardiology	Electrocardiogram tracing	
93224		Cardiology	Ecg monit/reprt up to 48 hrs	
93229		Cardiology	Remote 30 day ecg tech supp	
93285		Cardiology	Ilr device eval progr	
93291		Cardiology	Ilr device interrogate	

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Code	Mod	Procedures & Services	Description	Rule Description
93298		Cardiology	Ilr device interrogat remote	
93299		Cardiology	Icm/ilr remote tech serv	
93303		Diagnostic Ultrasound	Echo transthoracic	
93304		Diagnostic Ultrasound	Echo transthoracic	
93306		Diagnostic Ultrasound	Tte w/doppler complete	
93307		Diagnostic Ultrasound	Tte w/o doppler complete	
93308		Diagnostic Ultrasound	Tte f-up or lmtd	
93312		Diagnostic Ultrasound	Echo transesophageal	
93313		Diagnostic Ultrasound	Echo transesophageal	
93314		Diagnostic Ultrasound	Echo transesophageal	
93315		Diagnostic Radiology	Echo transesophageal	
93316		Diagnostic Radiology	Echo transesophageal	
93317		Diagnostic Radiology	Echo transesophageal	
93318		Diagnostic Radiology	Echo transesophageal intraop	
93320		Diagnostic Radiology	Doppler echo exam heart	
93321		Diagnostic Radiology	Doppler echo exam heart	
93325		Diagnostic Radiology	Doppler color flow add-on	
93350		Diagnostic Radiology	Stress tte only	
93351		Diagnostic Radiology	Stress tte complete	
93355		Diagnostic Radiology	Echo transesophageal (tee)	
93451		Cardiology	Right heart cath	
93452		Cardiology	Left hrt cath w/ventrclgrphy	
93453		Cardiology	R&I hrt cath w/ventriclgrphy	
93454		Cardiology	Coronary artery angio S&I	
93455		Cardiology	Coronary art/grft angio S&I	
93456		Cardiology	R hrt coronary artery angio	
93457		Cardiology	R hrt art/grft angio	
93458		Cardiology	L hrt artery/ventricle angio	
93459		Cardiology	L hrt art/grft angio	
93460		Cardiology	R&I hrt art/ventricle angio	
93461		Cardiology	R&I hrt art/ventricle angio	
93462		Cardiology	L hrt cath trnsptl puncture	
93463		Cardiology	Drug admin & hemodynmic meas	
93464		Cardiology	Exercise w/hemodynamic meas	
93530		Cardiology	Rt heart cath congenital	
93531		Cardiology	R & I heart cath congenital	
93532		Cardiology	R & I heart cath congenital	
93533		Cardiology	R & I heart cath congenital	
93583		Cardiology	Perq transcath septal reduxn	Only Inpatient
93600		Cardiology	Bundle of his recording	
93602		Cardiology	Intra-atrial recording	
93603		Cardiology	Right ventricular recording	
93609		Cardiology	Map tachycardia add-on	
93613		Cardiology	Electrophys map 3d add-on	
93618		Cardiology	Heart rhythm pacing	
93619		Cardiology	Electrophysiology evaluation	
93620		Cardiology	Electrophysiology evaluation	
93621		Cardiology	Electrophysiology evaluation	
93622		Cardiology	Electrophysiology evaluation	
93623		Cardiology	Stimulation pacing heart	
93624		Cardiology	Electrophysiologic study	
93650		Cardiology	Ablate heart dysrhythm focus	
93653		Cardiology	Ep & ablate supravent arrhyt	
93654		Cardiology	Ep & ablate ventric tachy	

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Code	Mod	Procedures & Services	Description	Rule Description
93656		Cardiology	Tx atrial fib pulm vein isol	
93792		Home & Outpatient INR Monitoring Care	Pt/caregiver trainj home inr	
93793		Home & Outpatient INR Monitoring Care	Anticoag mgmt pt warfarin	
94010		Pulmonary Medicine & Care	Breathing capacity test	
94664		Pulmonary Medicine & Care	Evaluate pt use of inhaler	
94750		Pulmonary Medicine & Care	Pulmonary compliance study	
94762		Pulmonary Medicine & Care	Measure blood oxygen level	
95782		Sleep Studies - Facility Based	Polysom <6 yrs 4/> paramtrs	
95783		Sleep Studies - Facility Based	Polysom <6 yrs cpap/bilvl	
95803		Sleep Studies - Facility Based	Actigraphy testing	
95807		Sleep Studies - Facility Based	Sleep study attended	
95808		Sleep Studies - Facility Based	Polysom any age 1-3> param	
95810		Sleep Studies - Facility Based	Polysom 6/> yrs 4/> param	
95811		Sleep Studies - Facility Based	Polysom 6/>yrs cpap 4/> parm	
95965		Neuromuscular Diagnostics	MEG spontaneous	
95966		Neuromuscular Diagnostics	MEG evoked single	
99183		Hyperbaric Therapy	Hyperbaric oxygen therapy	
99184		Medicine Services & Procedures	Hypothermia ill neonate	Only Inpatient
99190		Medicine Services & Procedures	Special pump services	Only Inpatient
99191		Medicine Services & Procedures	Special pump services	Only Inpatient
99192		Medicine Services & Procedures	Special pump services	Only Inpatient
99356		Medicine Services & Procedures	Prolonged service inpatient	Only Inpatient
99357		Medicine Services & Procedures	Prolonged service inpatient	Only Inpatient
99374		Home Health Nursing & NH Aid	Home health care supervision	
99462		Neonatal E & M Services	Sbsq nb em per day hosp	Only Inpatient
99468		Neonatal E & M Services	Neonate crit care initial	Only Inpatient
99469		Neonatal E & M Services	Neonate crit care subsq	Only Inpatient
99471		Neonatal E & M Services	Ped critical care initial	Only Inpatient
99472		Neonatal E & M Services	Ped critical care subsq	Only Inpatient
99475		Neonatal E & M Services	Ped crit care age 2-5 init	Only Inpatient
99476		Neonatal E & M Services	Ped crit care age 2-5 subsq	Only Inpatient
99477		Neonatal E & M Services	Init day hosp neonate care	Only Inpatient
99478		Neonatal E & M Services	Ic lbw inf < 1500 gm subsq	Only Inpatient
99479		Neonatal E & M Services	Ic lbw inf 1500-2500 g subsq	Only Inpatient
99480		Neonatal E & M Services	Ic inf pbw 2501-5000 g subsq	Only Inpatient
0001U		DNA Lab Tests	Rbc dna hea 35 ag 11 bld grp	
0002U		DNA Lab Tests	Onc clrct 3 ur metab alg plp	
0003U		DNA Lab Tests	Onc ovar 5 prtn ser alg scor	
0005U		DNA Lab Tests	Onco prst8 3 gene ur alg	
0006U		DNA Lab Tests	Rx mntr 120+ drugs & sbsts	
0007U		DNA Lab Tests	Rx test prsmv ur w/def conf	
0008U		DNA Lab Tests	Hpylori detcj abx rstnc dna	
0009U		DNA Lab Tests	Onc brst ca erbb2 amp/nonamp	
0010U		DNA Lab Tests	Nfct ds strn typ whl gen seq	
0011U		DNA Lab Tests	Rx mntr lc-ms/ms oral fluid	
0012U		DNA Lab Tests	Germln do gene reargmt detcj	
0013U		DNA Lab Tests	Onc sld org neo gene reargmt	
0014U		DNA Lab Tests	Hem hmtlmf neo gene reargmt	
0016U		DNA Lab Tests	Onc hmtlmf neo rna bcr/abl1	
0017U		DNA Lab Tests	Onc hmtlmf neo jak2 mut dna	
0042T		CPT Category III Code	Ct perfusion w/contrast cbf	
0054T		CPT Category III Code	Bone srgry cmprtr fluor image	
0055T		CPT Category III Code	Bone srgry cmprtr ct/mri imag	
0058T		CPT Category III Code	Cryopreservation ovary tiss	

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Code	Mod	Procedures & Services	Description	Rule Description
0071T		CPT Category III Code	Us leiomyomata ablate <200	
0072T		CPT Category III Code	Us leiomyomata ablate >200	
0075T		CPT Category III Code	Perq stent/chest vert art	Only Inpatient
0076T		CPT Category III Code	S&i stent/chest vert art	Only Inpatient
0085T		CPT Category III Code	Breath test heart reject	
0095T		CPT Category III Code	Rmvl artific disc addl crvcl	Only Inpatient
0098T		CPT Category III Code	Rev artific disc addl	Only Inpatient
0100T		CPT Category III Code	Prosth retina receive&gen	
0101T		CPT Category III Code	Extracorp shockwv tx hi enrg	
0102T		CPT Category III Code	Extracorp shockwv tx anesth	
0106T		CPT Category III Code	Touch quant sensory test	
0107T		CPT Category III Code	Vibrate quant sensory test	
0108T		CPT Category III Code	Cool quant sensory test	
0109T		CPT Category III Code	Heat quant sensory test	
0110T		CPT Category III Code	Nos quant sensory test	
0111T		CPT Category III Code	Rbc membranes fatty acids	
0126T		CPT Category III Code	Chd risk imt study	
0159T		CPT Category III Code	Cad breast mri	
0163T		CPT Category III Code	Lumb artif disectomy addl	Only Inpatient
0164T		CPT Category III Code	Remove lumb artif disc addl	Only Inpatient
0165T		CPT Category III Code	Revise lumb artif disc addl	Only Inpatient
0174T		CPT Category III Code	Cad cxr with interp	
0175T		CPT Category III Code	Cad cxr remote	
0184T		CPT Category III Code	Exc rectal tumor endoscopic	
0188T		CPT Category III Code	Videoconf crit care 74 min	
0189T		CPT Category III Code	Videoconf crit care addl 30	
0190T		CPT Category III Code	Place intraoc radiation src	
0191T		CPT Category III Code	Insert ant segment drain int	
0195T		CPT Category III Code	Prescrl fuse w/o instr I5/s1	Only Inpatient
0196T		CPT Category III Code	Prescrl fuse w/o instr I4/I5	Only Inpatient
0198T		CPT Category III Code	Ocular blood flow measure	
0200T		CPT Category III Code	Perq sacral augmt unilat inj	
0201T		CPT Category III Code	Perq sacral augmt bilat inj	
0202T		CPT Category III Code	Post vert arthrplst 1 lumbar	Only Inpatient
0205T		CPT Category III Code	Inirs each vessel add-on	
0206T		CPT Category III Code	Cptr dbs alys car elec dta	
0207T		CPT Category III Code	Clear eyelid gland w/heat	
0208T		CPT Category III Code	Audiometry air only	
0209T		CPT Category III Code	Audiometry air & bone	
0210T		CPT Category III Code	Speech audiometry threshold	
0211T		CPT Category III Code	Speech audiom thresh & recog	
0212T		CPT Category III Code	Compre audiometry evaluation	
0213T		CPT Category III Code	Njx paravert w/us cer/thor	
0214T		CPT Category III Code	Njx paravert w/us cer/thor	
0215T		CPT Category III Code	Njx paravert w/us cer/thor	
0216T		CPT Category III Code	Njx paravert w/us lumb/sac	
0217T		CPT Category III Code	Njx paravert w/us lumb/sac	
0218T		CPT Category III Code	Njx paravert w/us lumb/sac	
0219T		CPT Category III Code	Plmt post facet implt cerv	Only Inpatient
0220T		CPT Category III Code	Plmt post facet implt thor	Only Inpatient
0221T		CPT Category III Code	Plmt post facet implt lumb	
0222T		CPT Category III Code	Plmt post facet implt addl	
0228T		CPT Category III Code	Njx tfrml eprl w/us cer/thor	
0229T		CPT Category III Code	Njx tfrml eprl w/us cer/thor	



## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
0230T		CPT Category III Code	Njx tfrml eprl w/us lumb/sac	
0231T		CPT Category III Code	Njx tfrml eprl w/us lumb/sac	
0232T		CPT Category III Code	Njx platelet plasma	
0234T		CPT Category III Code	Trluml perip athrc renal art	
0235T		CPT Category III Code	Trluml perip athrc visceral	Only Inpatient
0236T		CPT Category III Code	Trluml perip athrc abd aorta	
0237T		CPT Category III Code	Trluml perip athrc brchiocph	
0238T		CPT Category III Code	Trluml perip athrc iliac art	
0249T		CPT Category III Code	Ligation hemorrhoid w/us	
0253T		CPT Category III Code	Insert aqueous drain device	
0254T		CPT Category III Code	Evasc rpr iliac art bifur	Only Inpatient
0263T		CPT Category III Code	Im b1 mrw cel ther cmlpl	
0264T		CPT Category III Code	Im b1 mrw cel ther xcl hrvt	
0265T		CPT Category III Code	Im b1 mrw cel ther hrvt onl	
0266T		CPT Category III Code	Implt/rpl crtd sns dev total	Only Inpatient
0267T		CPT Category III Code	Implt/rpl crtd sns dev lead	
0268T		CPT Category III Code	Implt/rpl crtd sns dev gen	
0269T		CPT Category III Code	Rev/remvl crtd sns dev total	
0270T		CPT Category III Code	Rev/remvl crtd sns dev lead	
0271T		CPT Category III Code	Rev/remvl crtd sns dev gen	
0272T		CPT Category III Code	Interrogate crtd sns dev	
0273T		CPT Category III Code	Interrogate crtd sns w/pgrmg	
0274T		CPT Category III Code	Perq lamot/lam crv/thrc	
0275T		CPT Category III Code	Perq lamot/lam lumbar	
0278T		CPT Category III Code	Tempr	
0290T		CPT Category III Code	Laser inc for pkp/lkp recip	
0295T		CPT Category III Code	Ext ecg complete	
0296T		CPT Category III Code	Ext ecg recording	
0297T		CPT Category III Code	Ext ecg scan w/report	
0298T		CPT Category III Code	Ext ecg review and interp	
0308T		CPT Category III Code	Insj ocular telescope prosth	
0312T		CPT Category III Code	Laps impltj nstim vagus	
0313T		CPT Category III Code	Laps rmlv nstim array vagus	
0314T		CPT Category III Code	Laps rmlv vgl arry&pls gen	
0315T		CPT Category III Code	Rmlv vagus nerve pls gen	
0316T		CPT Category III Code	Replc vagus nerve pls gen	
0317T		CPT Category III Code	Elec alys vagus nrv pls gen	
0329T		CPT Category III Code	Mntr io press 24hrs/> uni/bi	
0330T		CPT Category III Code	Tear film img uni/bi w/i&r	
0331T		CPT Category III Code	Heart symp image plnr	
0332T		CPT Category III Code	Heart symp image plnr spect	
0333T		CPT Category III Code	Visual ep acuity screen auto	
0335T		CPT Category III Code	Extraosseous joint stblztion	
0337T		CPT Category III Code	Endothel fxnassmnt non-invas	
0338T		CPT Category III Code	Trnscth renal symp denrv unl	
0339T		CPT Category III Code	Trnscth renal symp denrv bil	
0341T		CPT Category III Code	Quant pupillometry w/ rpt	
0342T		CPT Category III Code	Thxp apheresis w/hdl delip	
0345T		CPT Category III Code	Transcath mtral vlve repair	Only Inpatient
0346T		CPT Category III Code	Ultrasound elastography	
0347T		CPT Category III Code	Ins bone device for rsa	
0348T		CPT Category III Code	Rsa spine exam	
0349T		CPT Category III Code	Rsa upper extr exam	
0350T		CPT Category III Code	Rsa lower extr exam	

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Code	Mod	Procedures & Services	Description	Rule Description
0351T		CPT Category III Code	Intraop oct brst/node spec	
0352T		CPT Category III Code	Oct brst/node i&r per spec	
0353T		CPT Category III Code	Intraop oct breast cavity	
0354T		CPT Category III Code	Oct breast surg cavity i&r	
0355T		CPT Category III Code	Gi tract capsule endoscopy	
0356T		CPT Category III Code	Insrt drug device for iop	
0357T		CPT Category III Code	Cryopreservation oocyte(s)	
0358T		CPT Category III Code	Bia whole body	
0359T		CPT Category III Code	Behavioral id assessment	
0360T		CPT Category III Code	Observ behav assessment	
0361T		CPT Category III Code	Observ behav assess addl	
0362T		CPT Category III Code	Expose behav assessment	
0363T		CPT Category III Code	Expose behav assess addl	
0364T		CPT Category III Code	Adaptive behavior treatment	
0365T		CPT Category III Code	Adaptive behavior tx addl	
0366T		CPT Category III Code	Group behavior treatment	
0367T		CPT Category III Code	Group behav treatment addl	
0368T		CPT Category III Code	Behavior treatment modified	
0369T		CPT Category III Code	Behav treatment modify addl	
0370T		CPT Category III Code	Fam behav treatment guidance	
0371T		CPT Category III Code	Mult fam behav treat guide	
0372T		CPT Category III Code	Social skills training group	
0373T		CPT Category III Code	Exposure behavior treatment	
0374T		CPT Category III Code	Expose behav treatment addl	
0375T		CPT Category III Code	Total disc arthrp ant appr	Only Inpatient
0376T		CPT Category III Code	Insert ant segment drain int	
0377T		CPT Category III Code	Anoscopy inj agent for incont	
0378T		CPT Category III Code	Visual field assmnt rev/rprt	
0379T		CPT Category III Code	Vis field assmnt tech suppt	
0380T		CPT Category III Code	Comp animat ret imag series	
0381T		CPT Category III Code	Ext h rate epi sz 14 days	
0382T		CPT Category III Code	Ext h rate sz 14 day ri only	
0383T		CPT Category III Code	Ext h rate sz up to 30 days	
0384T		CPT Category III Code	Ex h rate sz 30 day ri only	
0385T		CPT Category III Code	Ex h rate for sz ovr 30 day	
0386T		CPT Category III Code	Ex h rate sz 30+ day ri only	
0387T		CPT Category III Code	Leadless c pm ins/rpl ventr	
0388T		CPT Category III Code	Leadless c pm remove ventr	
0389T		CPT Category III Code	Prog eval inper leadls pm	
0390T		CPT Category III Code	Periproc eval inper ledls pm	
0391T		CPT Category III Code	Intergt eval inper leadls pm	
0394T		CPT Category III Code	Hdr electrnc skn surf brchtx	
0395T		CPT Category III Code	Hdr elctr ntrst/ntrcv brchtx	
0396T		CPT Category III Code	Intraop kinetic balnce sensr	
0397T		CPT Category III Code	Ercp w/optical endomicroscopy	
0398T		CPT Category III Code	Mrgfus strtctc les abltj	
0399T		CPT Category III Code	Myocardial strain imaging	
0400T		CPT Category III Code	Mltispectrl digital les alys	
0401T		CPT Category III Code	Mltispectrl digital les alys	
0402T		CPT Category III Code	Collagen crosslinking cornea	
0403T		CPT Category III Code	Diabetes prev standard curr	
0404T		CPT Category III Code	Trnscrvt uterin fibroid abltj	
0405T		CPT Category III Code	Ovrsght xtrcorp liv asst pat	
0406T		CPT Category III Code	Sin ndsc plmt drg elut mplnt	

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0407T		CPT Category III Code	Sin ndsc plmt drg elut mplnt	
0408T		CPT Category III Code	Insj/rplc cardiac modulj sys	
0409T		CPT Category III Code	Insj/rplc car modulj pls gn	
0410T		CPT Category III Code	Insj/rplc car modulj atr elt	
0411T		CPT Category III Code	Insj/rplc car modulj vnt elt	
0412T		CPT Category III Code	Rmvl cardiac modulj pls gen	
0413T		CPT Category III Code	Rmvl car modulj tranvns elt	
0414T		CPT Category III Code	Rmvl & rpl car modulj pls gn	
0415T		CPT Category III Code	Repos car modulj tranvns elt	
0416T		CPT Category III Code	Reloc skin pocket pls gen	
0417T		CPT Category III Code	Prgrmg eval cardiac modulj	
0418T		CPT Category III Code	Interro eval cardiac modulj	
0419T		CPT Category III Code	Dstrj neurofibroma xtmsv	
0420T		CPT Category III Code	Dstrj neurofibroma xtmsv	
0421T		CPT Category III Code	Waterjet prostate abltj compl	
0422T		CPT Category III Code	Tactile breast img uni/bi	
0423T		CPT Category III Code	Assay secretory type ii pla2	
0424T		CPT Category III Code	Insj/rplc nstim apnea compl	
0425T		CPT Category III Code	Insj/rplc nstim apnea sen ld	
0426T		CPT Category III Code	Insj/rplc nstim apnea stm ld	
0427T		CPT Category III Code	Insj/rplc nstim apnea pls gn	
0428T		CPT Category III Code	Rmvl nstim apnea pls gen	
0429T		CPT Category III Code	Rmvl nstim apnea sen ld	
0430T		CPT Category III Code	Rmvl nstim apnea stimj ld	
0431T		CPT Category III Code	Rmvl/rplc nstim apnea pls gn	
0432T		CPT Category III Code	Repos nstim apnea stimj ld	
0433T		CPT Category III Code	Repos nstim apnea sensing ld	
0434T		CPT Category III Code	Interro eval npgs apnea	
0435T		CPT Category III Code	Prgrmg eval npgs apnea 1 ses	
0436T		CPT Category III Code	Prgrmg eval npgs apnea study	
0437T		CPT Category III Code	Impltj synth rnfcmnt abdl wal	
0439T		CPT Category III Code	Myocrd contrast prfuj echo	
0440T		CPT Category III Code	Abltj perc lxtr/perph nrv	
0441T		CPT Category III Code	Abltj perc lxtr/perph nrv	
0442T		CPT Category III Code	Abltj perc plex/trncl nrv	
0443T		CPT Category III Code	R-t spctrl alys prst8 tiss	
0444T		CPT Category III Code	1st plmt drug elut oc ins	
0445T		CPT Category III Code	Sbsqt plmt drug elut oc ins	
0446T		CPT Category III Code	Insj impltbl glucose sensor	
0447T		CPT Category III Code	Rmvl impltbl glucose sensor	
0448T		CPT Category III Code	Remvl insj impltbl gluc sens	
0449T		CPT Category III Code	Insj aqueous drain dev 1st	
0450T		CPT Category III Code	Insj aqueous drain dev each	
0451T		CPT Category III Code	Insj/rplcmt aortic ventr sys	Only Inpatient
0452T		CPT Category III Code	Insj/rplcmt dev vasc seal	Only Inpatient
0453T		CPT Category III Code	Insj/rplcmt mech-elec ntrfce	
0454T		CPT Category III Code	Insj/rplcmt subq electrode	
0455T		CPT Category III Code	Remvl aortic ventr compl sys	Only Inpatient
0456T		CPT Category III Code	Remvl aortic dev vasc seal	Only Inpatient
0457T		CPT Category III Code	Remvl mech-elec skin ntrfce	
0458T		CPT Category III Code	Remvl subq electrode	
0459T		CPT Category III Code	Relocaj rplcmt aortic ventr	Only Inpatient
0460T		CPT Category III Code	Repos aortic ventr dev eltrd	
0461T		CPT Category III Code	Repos aortic contrpulsj dev	Only Inpatient

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Code	Mod	Procedures & Services	Description	Rule Description
0462T		CPT Category III Code	Prgrmg eval aortic ventr sys	
0463T		CPT Category III Code	Interrog aortic ventr sys	
0464T		CPT Category III Code	Visual ep test for glaucoma	
0465T		CPT Category III Code	Supchrld njx rx w/o supply	
0466T		CPT Category III Code	Insj ch wal respir eltrd/ra	
0467T		CPT Category III Code	Revj/rplmnt ch respir eltrd	
0468T		CPT Category III Code	Rmvl ch wal respir eltrd/ra	
0469T		CPT Category III Code	Rta polarize scan oc scr bi	
0470T		CPT Category III Code	Oct skn img acquisj i&r 1st	
0471T		CPT Category III Code	Oct skn img acquisj i&r addl	
0472T		CPT Category III Code	Prgrmg io rta eltrd ra	
0473T		CPT Category III Code	Reprgrmg io rta eltrd ra	
0474T		CPT Category III Code	Insj aqueous drg dev io rsvr	
0475T		CPT Category III Code	Rec ftl car sgl 3 ch i&r	
0476T		CPT Category III Code	Rec ftl car sgl elec tr data	
0477T		CPT Category III Code	Rec ftl car sgl xrtj alys	
0478T		CPT Category III Code	Rec ftl car 3 ch rev i&r	
0479T		CPT Category III Code	Fxjl abl lsr 1st 100 sq cm	
0480T		CPT Category III Code	Fxjl abl lsr ea addl 100sqcm	
0481T		CPT Category III Code	Njx autol wbc concentrate	
0482T		CPT Category III Code	Absl quan myocrd bld flo pet	
0483T		CPT Category III Code	Tmvi percutaneous approach	Only Inpatient
0484T		CPT Category III Code	Tmvi transthoracic exposure	Only Inpatient
0485T		CPT Category III Code	Oct mid ear i&r unilateral	
0486T		CPT Category III Code	Oct mid ear i&r bilateral	
0487T		CPT Category III Code	Trvg biomchn mapg w/reprt	
0488T		CPT Category III Code	Diabetes prev online/elec	
0489T		CPT Category III Code	Regn cell tx scldr hands	
0490T		CPT Category III Code	Regn cell tx scldr h mlt inj	
0491T		CPT Category III Code	Abl lsr opn wnd 1st 20 sqcm	
0492T		CPT Category III Code	Abl lsr opn wnd addl 20 sqcm	
0493T		CPT Category III Code	Near ifr spectrsc of wounds	
0494T		CPT Category III Code	Prep & cannulj cdvr don lung	Only Inpatient
0495T		CPT Category III Code	Mntr cdvr don lng 1st 2 hrs	Only Inpatient
0496T		CPT Category III Code	Mntr cdvr don lng ea addl hr	Only Inpatient
0497T		CPT Category III Code	Xtrnl pt act ecg in-off conn	
0498T		CPT Category III Code	Xtrnl pt act ecg r&i pr 30 d	
0499T		CPT Category III Code	Cysto f/urtl strix/stenosis	
0500T		CPT Category III Code	Hpv 5+ hi risk hpv types	
0501T		CPT Category III Code	Cor ffr derived cor cta data	
0502T		CPT Category III Code	Cor ffr data prep & transmis	
0503T		CPT Category III Code	Cor ffr alys gnrj ffr mdl	
0504T		CPT Category III Code	Cor ffr data review i&r	
0505T		CPT Category III Code	Ev Fempop Artl Revsc	
0506T		CPT Category III Code	Mac Pgmt Opt Dns Meas Hfp	
0507T		CPT Category III Code	Near Ifr 2Img Mibmn GlnD I&R	
0508T		CPT Category III Code	Pls Echo Us B1 Dns Meas Tib	
A0426		Ambulance Service	ALS L1, non-emergency transport	
A0428		Ambulance Service	BLS, non-emergency transport	
A4216		DMEPOS	Sterile water/saline, 10 ml	DME > \$500
A4217		DMEPOS	Sterile water/saline, 500 ml	DME > \$500
A4221		DMEPOS	Supp non-insulin inf cath/wk	DME > \$500
A4222		DMEPOS	Infusion supplies with pump	DME > \$500
A4224		DMEPOS	Supply insulin inf cath/wk	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A4225		DMEPOS	Sup/ext insulin inf pump syr	DME > \$500
A4233	NU	DMEPOS	Alkalin batt for glucose mon	DME > \$500
A4234	NU	DMEPOS	J-cell batt for glucose mon	DME > \$500
A4235	NU	DMEPOS	Lithium batt for glucose mon	DME > \$500
A4236	NU	DMEPOS	Silvr oxide batt glucose mon	DME > \$500
A4253	NU	DMEPOS	Blood glucose/reagent strips	DME > \$500
A4255		DMEPOS	Glucose monitor platforms	DME > \$500
A4256		DMEPOS	Calibrator solution/chips	DME > \$500
A4257		DMEPOS	Replace lensshield cartridge	DME > \$500
A4258		DMEPOS	Lancet device each	DME > \$500
A4259		DMEPOS	Lancets per box	DME > \$500
A4265		DMEPOS	Paraffin	DME > \$500
A4280		DMEPOS	Brst prsths adhsv attchmnt	DME > \$500
A4310		DMEPOS	Insert tray w/o bag/cath	DME > \$500
A4311		DMEPOS	Catheter w/o bag 2-way latex	DME > \$500
A4312		DMEPOS	Cath w/o bag 2-way silicone	DME > \$500
A4313		DMEPOS	Catheter w/bag 3-way	DME > \$500
A4314		DMEPOS	Cath w/drainage 2-way latex	DME > \$500
A4315		DMEPOS	Cath w/drainage 2-way silcne	DME > \$500
A4316		DMEPOS	Cath w/drainage 3-way	DME > \$500
A4320		DMEPOS	Irrigation tray	DME > \$500
A4321		DMEPOS	Cath therapeutic irrig agent	DME > \$500
A4322		DMEPOS	Irrigation syringe	DME > \$500
A4326		DMEPOS	Male external catheter	DME > \$500
A4327		DMEPOS	Fem urinary collect dev cup	DME > \$500
A4328		DMEPOS	Fem urinary collect pouch	DME > \$500
A4330		DMEPOS	Stool collection pouch	DME > \$500
A4331		DMEPOS	Extension drainage tubing	DME > \$500
A4332		DMEPOS	Lube sterile packet	DME > \$500
A4333		DMEPOS	Urinary cath anchor device	DME > \$500
A4334		DMEPOS	Urinary cath leg strap	DME > \$500
A4336		DMEPOS	Urethral insert	DME > \$500
A4338		DMEPOS	Indwelling catheter latex	DME > \$500
A4340		DMEPOS	Indwelling catheter special	DME > \$500
A4344		DMEPOS	Cath indw foley 2 way silicn	DME > \$500
A4346		DMEPOS	Cath indw foley 3 way	DME > \$500
A4349		DMEPOS	Disposable male external cat	DME > \$500
A4351		DMEPOS	Straight tip urine catheter	DME > \$500
A4352		DMEPOS	Coude tip urinary catheter	DME > \$500
A4353		DMEPOS	Intermittent urinary cath	DME > \$500
A4354		DMEPOS	Cath insertion tray w/bag	DME > \$500
A4355		DMEPOS	Bladder irrigation tubing	DME > \$500
A4356		DMEPOS	Ext ureth clmp or compr dvc	DME > \$500
A4357		DMEPOS	Bedside drainage bag	DME > \$500
A4358		DMEPOS	Urinary leg or abdomen bag	DME > \$500
A4360		DMEPOS	Disposable ext urethral dev	DME > \$500
A4361		DMEPOS	Ostomy face plate	DME > \$500
A4362		DMEPOS	Solid skin barrier	DME > \$500
A4363		DMEPOS	Ostomy clamp, replacement	DME > \$500
A4364		DMEPOS	Adhesive, liquid or equal	DME > \$500
A4366		DMEPOS	Ostomy vent	DME > \$500
A4367		DMEPOS	Ostomy belt	DME > \$500
A4368		DMEPOS	Ostomy filter	DME > \$500
A4369		DMEPOS	Skin barrier liquid per oz	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A4371		DMEPOS	Skin barrier powder per oz	DME > \$500
A4372		DMEPOS	Skin barrier solid 4x4 equiv	DME > \$500
A4373		DMEPOS	Skin barrier with flange	DME > \$500
A4375		DMEPOS	Drainable plastic pch w fcpl	DME > \$500
A4376		DMEPOS	Drainable rubber pch w fcplt	DME > \$500
A4377		DMEPOS	Drainable plstic pch w/o fp	DME > \$500
A4378		DMEPOS	Drainable rubber pch w/o fp	DME > \$500
A4379		DMEPOS	Urinary plastic pouch w fcpl	DME > \$500
A4380		DMEPOS	Urinary rubber pouch w fcplt	DME > \$500
A4381		DMEPOS	Urinary plastic pouch w/o fp	DME > \$500
A4382		DMEPOS	Urinary hvy plstc pch w/o fp	DME > \$500
A4383		DMEPOS	Urinary rubber pouch w/o fp	DME > \$500
A4384		DMEPOS	Ostomy faceplt/silicone ring	DME > \$500
A4385		DMEPOS	Ost skn barrier sld ext wear	DME > \$500
A4387		DMEPOS	Ost clsd pouch w att st barr	DME > \$500
A4388		DMEPOS	Drainable pch w ex wear barr	DME > \$500
A4389		DMEPOS	Drainable pch w st wear barr	DME > \$500
A4390		DMEPOS	Drainable pch ex wear convex	DME > \$500
A4391		DMEPOS	Urinary pouch w ex wear barr	DME > \$500
A4392		DMEPOS	Urinary pouch w st wear barr	DME > \$500
A4393		DMEPOS	Urine pch w ex wear bar conv	DME > \$500
A4394		DMEPOS	Ostomy pouch liq deodorant	DME > \$500
A4395		DMEPOS	Ostomy pouch solid deodorant	DME > \$500
A4396		DMEPOS	Peristomal hernia supprt blt	DME > \$500
A4397		DMEPOS	Irrigation supply sleeve	DME > \$500
A4398		DMEPOS	Ostomy irrigation bag	DME > \$500
A4399		DMEPOS	Ostomy irrig cone/cath w brs	DME > \$500
A4400		DMEPOS	Ostomy irrigation set	DME > \$500
A4402		DMEPOS	Lubricant per ounce	DME > \$500
A4404		DMEPOS	Ostomy ring each	DME > \$500
A4405		DMEPOS	Nonpectin based ostomy paste	DME > \$500
A4406		DMEPOS	Pectin based ostomy paste	DME > \$500
A4407		DMEPOS	Ext wear ost skn barr <=4sq"	DME > \$500
A4408		DMEPOS	Ext wear ost skn barr >4sq"	DME > \$500
A4409		DMEPOS	Ost skn barr convex <=4 sq i	DME > \$500
A4410		DMEPOS	Ost skn barr extnd >4 sq	DME > \$500
A4411		DMEPOS	Ost skn barr extnd =4sq	DME > \$500
A4412		DMEPOS	Ost pouch drain high output	DME > \$500
A4413		DMEPOS	2 pc drainable ost pouch	DME > \$500
A4414		DMEPOS	Ost sknbar w/o conv<=4 sq in	DME > \$500
A4415		DMEPOS	Ost skn barr w/o conv >4 sqi	DME > \$500
A4416		DMEPOS	Ost pch clsd w barrier/fltr	DME > \$500
A4417		DMEPOS	Ost pch w bar/bltinconv/fltr	DME > \$500
A4418		DMEPOS	Ost pch clsd w/o bar w fltr	DME > \$500
A4419		DMEPOS	Ost pch for bar w flange/flt	DME > \$500
A4420		DMEPOS	Ost pch clsd for bar w lk fl	DME > \$500
A4422		DMEPOS	Ost pouch absorbent material	DME > \$500
A4423		DMEPOS	Ost pch for bar w lk fl/fltr	DME > \$500
A4424		DMEPOS	Ost pch drain w bar & filter	DME > \$500
A4425		DMEPOS	Ost pch drain for barrier fl	DME > \$500
A4426		DMEPOS	Ost pch drain 2 piece system	DME > \$500
A4427		DMEPOS	Ost pch drain/barr lk flng/f	DME > \$500
A4428		DMEPOS	Urine ost pouch w faucet/tap	DME > \$500
A4429		DMEPOS	Urine ost pouch w bltinconv	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A4430		DMEPOS	Ost urine pch w b/bltin conv	DME > \$500
A4431		DMEPOS	Ost pch urine w barrier/tapv	DME > \$500
A4432		DMEPOS	Os pch urine w bar/fange/tap	DME > \$500
A4433		DMEPOS	Urine ost pch bar w lock fln	DME > \$500
A4434		DMEPOS	Ost pch urine w lock flng/ft	DME > \$500
A4435		DMEPOS	1pc ost pch drain high output	DME > \$500
A4450	AU	DMEPOS	Non-waterproof tape	DME > \$500
A4452	AU	DMEPOS	Waterproof tape	DME > \$500
A4455		DMEPOS	Adhesive remover per ounce	DME > \$500
A4456		DMEPOS	Adhesive remover, wipes	DME > \$500
A4461		DMEPOS	Surgicl dress hold non-reuse	DME > \$500
A4463		DMEPOS	Surgical dress holder reuse	DME > \$500
A4481		DMEPOS	Tracheostoma filter	DME > \$500
A4483		DMEPOS	Moisture exchanger	DME > \$500
A4556		DMEPOS	Electrodes, pair	DME > \$500
A4557		DMEPOS	Lead wires, pair	DME > \$500
A4558		DMEPOS	Conductive gel or paste	DME > \$500
A4559		DMEPOS	Coupling gel or paste	DME > \$500
A4561		DMEPOS	Pessary rubber, any type	DME > \$500
A4562		DMEPOS	Pessary, non rubber,any type	DME > \$500
A4565		DMEPOS	Slings	DME > \$500
A4595		DMEPOS	Tens suppl 2 lead per month	DME > \$500
A4602	NU	DMEPOS	Replace lithium battery 1.5v	DME > \$500
A4604	NU	DMEPOS	Tubing with heating element	DME > \$500
A4605	NU	DMEPOS	Trach suction cath close sys	DME > \$500
A4608		DMEPOS	Transtracheal oxygen cath	DME > \$500
A4614		DMEPOS	Hand-held pepr meter	DME > \$500
A4615		DMEPOS	Cannula nasal	DME > \$500
A4616		DMEPOS	Tubing (oxygen) per foot	DME > \$500
A4617		DMEPOS	Mouth piece	DME > \$500
A4618	NU	DMEPOS	Breathing circuits	DME > \$500
A4619	NU	DMEPOS	Face tent	DME > \$500
A4620		DMEPOS	Variable concentration mask	DME > \$500
A4623		DMEPOS	Tracheostomy inner cannula	DME > \$500
A4624	NU	DMEPOS	Tracheal suction tube	DME > \$500
A4625		DMEPOS	Trach care kit for new trach	DME > \$500
A4626		DMEPOS	Tracheostomy cleaning brush	DME > \$500
A4628	NU	DMEPOS	Oropharyngeal suction cath	DME > \$500
A4629		DMEPOS	Tracheostomy care kit	DME > \$500
A4630	NU	DMEPOS	Repl bat t.e.n.s. own by pt	DME > \$500
A4633	NU	DMEPOS	Uvl replacement bulb	DME > \$500
A4635	NU	DMEPOS	Underarm crutch pad	DME > \$500
A4636	NU	DMEPOS	Handgrip for cane etc	DME > \$500
A4637	NU	DMEPOS	Repl tip cane/crutch/walker	DME > \$500
A4638	NU	DMEPOS	Repl batt pulse gen sys	DME > \$500
A4639	RR	DMEPOS	Infrared ht sys replcmnt pad	DME > \$500
A4640	NU	DMEPOS	Alternating pressure pad	Always requires Prior Authorization.
A4640	RR	DMEPOS	Alternating pressure pad	Always requires Prior Authorization.
A4640	UE	DMEPOS	Alternating pressure pad	Always requires Prior Authorization.
A5051		DMEPOS	Pouch clsd w barr attached	DME > \$500
A5052		DMEPOS	Clsd ostomy pouch w/o barr	DME > \$500
A5053		DMEPOS	Clsd ostomy pouch faceplate	DME > \$500
A5054		DMEPOS	Clsd ostomy pouch w/flange	DME > \$500
A5055		DMEPOS	Stoma cap	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A5056		DMEPOS	1 pc ost pouch w filter	DME > \$500
A5057		DMEPOS	1 pc ost pou w built-in conv	DME > \$500
A5061		DMEPOS	Pouch drainable w barrier at	DME > \$500
A5062		DMEPOS	Drnble ostomy pouch w/o barr	DME > \$500
A5063		DMEPOS	Drain ostomy pouch w/flange	DME > \$500
A5071		DMEPOS	Urinary pouch w/barrier	DME > \$500
A5072		DMEPOS	Urinary pouch w/o barrier	DME > \$500
A5073		DMEPOS	Urinary pouch on barr w/flng	DME > \$500
A5081		DMEPOS	Stoma plug or seal, any type	DME > \$500
A5082		DMEPOS	Continent stoma catheter	DME > \$500
A5083		DMEPOS	Stoma absorptive cover	DME > \$500
A5093		DMEPOS	Ostomy accessory convex inse	DME > \$500
A5102		DMEPOS	Bedside drain btl w/wo tube	DME > \$500
A5105		DMEPOS	Urinary suspensory	DME > \$500
A5112		DMEPOS	Urinary leg bag	DME > \$500
A5113		DMEPOS	Latex leg strap	DME > \$500
A5114		DMEPOS	Foam/fabric leg strap	DME > \$500
A5120	AU	DMEPOS	Skin barrier, wipe or swab	DME > \$500
A5120	AV	DMEPOS	Skin barrier, wipe or swab	DME > \$500
A5121		DMEPOS	Solid skin barrier 6x6	DME > \$500
A5122		DMEPOS	Solid skin barrier 8x8	DME > \$500
A5126		DMEPOS	Disk/foam pad +or- adhesive	DME > \$500
A5131		DMEPOS	Appliance cleaner	DME > \$500
A5200		DMEPOS	Percutaneous catheter anchor	DME > \$500
A5500		DMEPOS	Diab shoe for density insert	Always requires Prior Authorization.
A5501		DMEPOS	Diabetic custom molded shoe	Always requires Prior Authorization.
A5503		DMEPOS	Diabetic shoe w/roller/rockr	Always requires Prior Authorization.
A5504		DMEPOS	Diabetic shoe with wedge	Always requires Prior Authorization.
A5505		DMEPOS	Diab shoe w/metatarsal bar	Always requires Prior Authorization.
A5506		DMEPOS	Diabetic shoe w/off set heel	Always requires Prior Authorization.
A5507		DMEPOS	Modification diabetic shoe	Always requires Prior Authorization.
A5512		DMEPOS	Multi den insert direct form	Always requires Prior Authorization.
A5513		DMEPOS	Multi den insert custom mold	Always requires Prior Authorization.
A6010		DMEPOS	Collagen based wound filler	DME > \$500
A6011		DMEPOS	Collagen gel/paste wound fil	DME > \$500
A6021		DMEPOS	Collagen dressing <=16 sq in	DME > \$500
A6022		DMEPOS	Collagen drsg>16<=48 sq in	DME > \$500
A6023		DMEPOS	Collagen dressing >48 sq in	DME > \$500
A6024		DMEPOS	Collagen dsg wound filler	DME > \$500
A6154		DMEPOS	Wound pouch each	DME > \$500
A6196		DMEPOS	Alginate dressing <=16 sq in	DME > \$500
A6197		DMEPOS	Alginate drsg >16 <=48 sq in	DME > \$500
A6199		DMEPOS	Alginate drsg wound filler	DME > \$500
A6203		DMEPOS	Composite drsg <= 16 sq in	DME > \$500
A6204		DMEPOS	Composite drsg >16<=48 sq in	DME > \$500
A6207		DMEPOS	Contact layer >16<= 48 sq in	DME > \$500
A6209		DMEPOS	Foam drsg <=16 sq in w/o bdr	DME > \$500
A6210		DMEPOS	Foam drg >16<=48 sq in w/o b	DME > \$500
A6211		DMEPOS	Foam drg > 48 sq in w/o brdr	DME > \$500
A6212		DMEPOS	Foam drg <=16 sq in w/border	DME > \$500
A6214		DMEPOS	Foam drg > 48 sq in w/border	DME > \$500
A6216		DMEPOS	Non-sterile gauze<=16 sq in	DME > \$500
A6217		DMEPOS	Non-sterile gauze>16<=48 sq	DME > \$500
A6219		DMEPOS	Gauze <= 16 sq in w/border	DME > \$500



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Code	Mod	Procedures & Services	Description	Rule Description
A6220		DMEPOS	Gauze >16 <=48 sq in w/bordr	DME > \$500
A6222		DMEPOS	Gauze <=16 in no w/sal w/o b	DME > \$500
A6223		DMEPOS	Gauze >16<=48 no w/sal w/o b	DME > \$500
A6224		DMEPOS	Gauze > 48 in no w/sal w/o b	DME > \$500
A6229		DMEPOS	Gauze >16<=48 sq in watr/sal	DME > \$500
A6231		DMEPOS	Hydrogel dsg<=16 sq in	DME > \$500
A6232		DMEPOS	Hydrogel dsg>16<=48 sq in	DME > \$500
A6233		DMEPOS	Hydrogel dressing >48 sq in	DME > \$500
A6234		DMEPOS	Hydrocolld drg <=16 w/o bdr	DME > \$500
A6235		DMEPOS	Hydrocolld drg >16<=48 w/o b	DME > \$500
A6236		DMEPOS	Hydrocolld drg > 48 in w/o b	DME > \$500
A6237		DMEPOS	Hydrocolld drg <=16 in w/bdr	DME > \$500
A6238		DMEPOS	Hydrocolld drg >16<=48 w/bdr	DME > \$500
A6240		DMEPOS	Hydrocolld drg filler paste	DME > \$500
A6241		DMEPOS	Hydrocolloid drg filler dry	DME > \$500
A6242		DMEPOS	Hydrogel drg <=16 in w/o bdr	DME > \$500
A6243		DMEPOS	Hydrogel drg >16<=48 w/o bdr	DME > \$500
A6244		DMEPOS	Hydrogel drg >48 in w/o bdr	DME > \$500
A6245		DMEPOS	Hydrogel drg <= 16 in w/bdr	DME > \$500
A6246		DMEPOS	Hydrogel drg >16<=48 in w/b	DME > \$500
A6247		DMEPOS	Hydrogel drg > 48 sq in w/b	DME > \$500
A6248		DMEPOS	Hydrogel drsg gel filler	DME > \$500
A6251		DMEPOS	Absorpt drg <=16 sq in w/o b	DME > \$500
A6252		DMEPOS	Absorpt drg >16 <=48 w/o bdr	DME > \$500
A6253		DMEPOS	Absorpt drg > 48 sq in w/o b	DME > \$500
A6254		DMEPOS	Absorpt drg <=16 sq in w/bdr	DME > \$500
A6255		DMEPOS	Absorpt drg >16<=48 in w/bdr	DME > \$500
A6257		DMEPOS	Transparent film <= 16 sq in	DME > \$500
A6258		DMEPOS	Transparent film >16<=48 in	DME > \$500
A6259		DMEPOS	Transparent film > 48 sq in	DME > \$500
A6266		DMEPOS	Impreg gauze no h20/sal/yard	DME > \$500
A6402		DMEPOS	Sterile gauze <= 16 sq in	DME > \$500
A6403		DMEPOS	Sterile gauze>16 <= 48 sq in	DME > \$500
A6407		DMEPOS	Packing strips, non-impreg	DME > \$500
A6410		DMEPOS	Sterile eye pad	DME > \$500
A6411		DMEPOS	Non-sterile eye pad	DME > \$500
A6441		DMEPOS	Pad band w>=3" <5"/yd	DME > \$500
A6442		DMEPOS	Conform band n/s w<3"/yd	DME > \$500
A6443		DMEPOS	Conform band n/s w>=3" <5"/yd	DME > \$500
A6444		DMEPOS	Conform band n/s w>=5"/yd	DME > \$500
A6445		DMEPOS	Conform band s w <3"/yd	DME > \$500
A6446		DMEPOS	Conform band s w>=3" <5"/yd	DME > \$500
A6447		DMEPOS	Conform band s w >=5"/yd	DME > \$500
A6448		DMEPOS	Lt compres band <3"/yd	DME > \$500
A6449		DMEPOS	Lt compres band >=3" <5"/yd	DME > \$500
A6450		DMEPOS	Lt compres band >=5"/yd	DME > \$500
A6451		DMEPOS	Mod compres band w>=3" <5"/yd	DME > \$500
A6452		DMEPOS	High compres band w>=3" <5"/yd	DME > \$500
A6453		DMEPOS	Self-adher band w <3"/yd	DME > \$500
A6454		DMEPOS	Self-adher band w>=3" <5"/yd	DME > \$500
A6455		DMEPOS	Self-adher band >=5"/yd	DME > \$500
A6456		DMEPOS	Zinc paste band w >=3" <5"/yd	DME > \$500
A6457		DMEPOS	Tubular dressing	DME > \$500
A6501		DMEPOS	Compres burngarment bodysuit	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A6502		DMEPOS	Compres burngarment chinstrp	DME > \$500
A6503		DMEPOS	Compres burngarment facehood	DME > \$500
A6504		DMEPOS	Cmprsburngarment glove-wrist	DME > \$500
A6505		DMEPOS	Cmprsburngarment glove-elbow	DME > \$500
A6506		DMEPOS	Cmprsburngrmnt glove-axilla	DME > \$500
A6507		DMEPOS	Cmprs burngarment foot-knee	DME > \$500
A6508		DMEPOS	Cmprs burngarment foot-thigh	DME > \$500
A6509		DMEPOS	Compres burn garment jacket	DME > \$500
A6510		DMEPOS	Compres burn garment leotard	DME > \$500
A6511		DMEPOS	Compres burn garment panty	DME > \$500
A6513		DMEPOS	Compress burn mask face/neck	DME > \$500
A6531	AW	DMEPOS	Compression stocking bk30-40	DME > \$500
A6532	AW	DMEPOS	Compression stocking bk40-50	DME > \$500
A6545	AW	DMEPOS	Grad comp non-elastic bk	DME > \$500
A6545		DMEPOS	Grad comp non-elastic bk	DME > \$500
A6550		DMEPOS	Neg pres wound ther drsg set	DME > \$500
A7000	NU	DMEPOS	Disposable canister for pump	DME > \$500
A7001	NU	DMEPOS	Nondisposable pump canister	DME > \$500
A7002	NU	DMEPOS	Tubing used w suction pump	DME > \$500
A7003	NU	DMEPOS	Nebulizer administration set	DME > \$500
A7004	NU	DMEPOS	Disposable nebulizer sml vol	DME > \$500
A7005	NU	DMEPOS	Nondisposable nebulizer set	DME > \$500
A7006	NU	DMEPOS	Filtered nebulizer admin set	DME > \$500
A7007	NU	DMEPOS	Lg vol nebulizer disposable	DME > \$500
A7008	NU	DMEPOS	Disposable nebulizer refill	DME > \$500
A7009	NU	DMEPOS	Nebulizer reservoir bottle	DME > \$500
A7010	NU	DMEPOS	Disposable corrugated tubing	DME > \$500
A7012	NU	DMEPOS	Nebulizer water collec devic	DME > \$500
A7013	NU	DMEPOS	Disposable compressor filter	DME > \$500
A7014	NU	DMEPOS	Compressor nondispos filter	DME > \$500
A7015	NU	DMEPOS	Aerosol mask used w nebulize	DME > \$500
A7016	NU	DMEPOS	Nebulizer dome & mouthpiece	DME > \$500
A7017	NU	DMEPOS	Nebulizer not used w oxygen	DME > \$500
A7017	RR	DMEPOS	Nebulizer not used w oxygen	DME > \$500
A7017	UE	DMEPOS	Nebulizer not used w oxygen	DME > \$500
A7018		DMEPOS	Water distilled w/nebulizer	DME > \$500
A7020	NU	DMEPOS	Interface, cough stim device	DME > \$500
A7025	RR	DMEPOS	Replace chest compress vest	DME > \$500
A7026	NU	DMEPOS	Replace chst cmprss sys hose	DME > \$500
A7027	NU	DMEPOS	Combination oral/nasal mask	DME > \$500
A7028	NU	DMEPOS	Repl oral cushion combo mask	DME > \$500
A7029	NU	DMEPOS	Repl nasal pillow comb mask	DME > \$500
A7030	NU	DMEPOS	Cpap full face mask	DME > \$500
A7031	NU	DMEPOS	Replacement facemask interfa	DME > \$500
A7032	NU	DMEPOS	Replacement nasal cushion	DME > \$500
A7033	NU	DMEPOS	Replacement nasal pillows	DME > \$500
A7034	NU	DMEPOS	Nasal application device	DME > \$500
A7035	NU	DMEPOS	Pos airway press headgear	DME > \$500
A7036	NU	DMEPOS	Pos airway press chinstrap	DME > \$500
A7037	NU	DMEPOS	Pos airway pressure tubing	DME > \$500
A7038	NU	DMEPOS	Pos airway pressure filter	DME > \$500
A7039	NU	DMEPOS	Filter, non disposable w pap	DME > \$500
A7040		DMEPOS	One way chest drain valve	DME > \$500
A7041		DMEPOS	Water seal drain container	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
A7044	NU	DMEPOS	Pap oral interface	DME > \$500
A7045	NU	DMEPOS	Repl exhalation port for pap	DME > \$500
A7045	RR	DMEPOS	Repl exhalation port for pap	DME > \$500
A7045	UE	DMEPOS	Repl exhalation port for pap	DME > \$500
A7046	NU	DMEPOS	Repl water chamber, pap dev	DME > \$500
A7047	NU	DMEPOS	Resp suction oral interface	DME > \$500
A7048		DMEPOS	Vacuum drain bottle/tube kit	DME > \$500
A7501		DMEPOS	Tracheostoma valve w diaphra	DME > \$500
A7502		DMEPOS	Replacement diaphragm/fplate	DME > \$500
A7503		DMEPOS	Hmes filter holder or cap	DME > \$500
A7504		DMEPOS	Tracheostoma hmes filter	DME > \$500
A7505		DMEPOS	Hmes or trach valve housing	DME > \$500
A7506		DMEPOS	Hmes/trachvalve adhesivedisk	DME > \$500
A7507		DMEPOS	Integrated filter & holder	DME > \$500
A7508		DMEPOS	Housing & integrated adhesiv	DME > \$500
A7509		DMEPOS	Heat & moisture exchange sys	DME > \$500
A7520		DMEPOS	Trach/laryn tube non-cuffed	DME > \$500
A7521		DMEPOS	Trach/laryn tube cuffed	DME > \$500
A7522		DMEPOS	Trach/laryn tube stainless	DME > \$500
A7524		DMEPOS	Tracheostoma stent/stud/bttn	DME > \$500
A7525		DMEPOS	Tracheostomy mask	DME > \$500
A7526		DMEPOS	Tracheostomy tube collar	DME > \$500
A7527		DMEPOS	Trach/laryn tube plug/stop	DME > \$500
A8000	NU	DMEPOS	Soft protect helmet prefab	DME > \$500
A8000	RR	DMEPOS	Soft protect helmet prefab	DME > \$500
A8000	UE	DMEPOS	Soft protect helmet prefab	DME > \$500
A8001	NU	DMEPOS	Hard protect helmet prefab	DME > \$500
A8001	RR	DMEPOS	Hard protect helmet prefab	DME > \$500
A8001	UE	DMEPOS	Hard protect helmet prefab	DME > \$500
A8002	NU	DMEPOS	Soft protect helmet custom	DME > \$500
A8002	RR	DMEPOS	Soft protect helmet custom	DME > \$500
A8002	UE	DMEPOS	Soft protect helmet custom	DME > \$500
A8003	NU	DMEPOS	Hard protect helmet custom	DME > \$500
A8003	RR	DMEPOS	Hard protect helmet custom	DME > \$500
A8003	UE	DMEPOS	Hard protect helmet custom	DME > \$500
A8004	NU	DMEPOS	Repl soft interface, helmet	DME > \$500
A8004	RR	DMEPOS	Repl soft interface, helmet	DME > \$500
A8004	UE	DMEPOS	Repl soft interface, helmet	DME > \$500
B4034		Enteral And Parenteral Therapy	Enter Feed Supkkit Syr By Day	PEN > \$500
B4035		Enteral And Parenteral Therapy	Enteral Feed Supp Pump Per D	PEN > \$500
B4036		Enteral And Parenteral Therapy	Enteral Feed Sup Kit Grav By	PEN > \$500
B4081		Enteral And Parenteral Therapy	Enteral Ng Tubing W/ Stylet	PEN > \$500
B4082		Enteral And Parenteral Therapy	Enteral Ng Tubing W/O Stylet	PEN > \$500
B4083		Enteral And Parenteral Therapy	Enteral Stomach Tube Levine	PEN > \$500
B4087		Enteral And Parenteral Therapy	Gastro/Jejuno Tube, Std	PEN > \$500
B4088		Enteral And Parenteral Therapy	Gastro/Jejuno Tube, Low-Pro	PEN > \$500
B4100		Enteral And Parenteral Therapy	Food Thickener Oral	PEN > \$500
B4102		Enteral And Parenteral Therapy	Ef Adult Fluids And Electro	PEN > \$500
B4103		Enteral And Parenteral Therapy	Ef Ped Fluid And Electrolyte	PEN > \$500
B4104		Enteral And Parenteral Therapy	Additive For Enteral Formula	PEN > \$500
B4149		Enteral And Parenteral Therapy	Ef Blenderized Foods	PEN > \$500
B4150		Enteral And Parenteral Therapy	Ef Complet W/Intact Nutrient	PEN > \$500
B4152		Enteral And Parenteral Therapy	Ef Calorie Dense>/=1.5Kcal	PEN > \$500
B4153		Enteral And Parenteral Therapy	Ef Hydrolyzed/Amino Acids	PEN > \$500

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
B4154		Enteral And Parenteral Therapy	Ef Spec Metabolic Noninherit	PEN > \$500
B4155		Enteral And Parenteral Therapy	Ef Incomplete/Modular	PEN > \$500
B4157		Enteral And Parenteral Therapy	Ef Special Metabolic Inherit	PEN > \$500
B4158		Enteral And Parenteral Therapy	Ef Ped Complete Intact Nut	PEN > \$500
B4159		Enteral And Parenteral Therapy	Ef Ped Complete Soy Based	PEN > \$500
B4160		Enteral And Parenteral Therapy	Ef Ped Caloric Dense>/=0.7Kc	PEN > \$500
B4161		Enteral And Parenteral Therapy	Ef Ped Hydrolyzed/Amino Acid	PEN > \$500
B4162		Enteral And Parenteral Therapy	Ef Ped Specmetabolic Inherit	PEN > \$500
B4164		Enteral And Parenteral Therapy	Parenteral 50% Dextrose Solu	PEN > \$500
B4168		Enteral And Parenteral Therapy	Parenteral Sol Amino Acid 3.	PEN > \$500
B4172		Enteral And Parenteral Therapy	Parenteral Sol Amino Acid 5.	PEN > \$500
B4176		Enteral And Parenteral Therapy	Parenteral Sol Amino Acid 7-	PEN > \$500
B4178		Enteral And Parenteral Therapy	Parenteral Sol Amino Acid >	PEN > \$500
B4180		Enteral And Parenteral Therapy	Parenteral Sol Carb > 50%	PEN > \$500
B4185		Enteral And Parenteral Therapy	Parenteral Sol 10 Gm Lipids	PEN > \$500
B4189		Enteral And Parenteral Therapy	Parenteral Sol Amino Acid &	Always requires Prior Authorization.
B4193		Enteral And Parenteral Therapy	Parenteral Sol 52-73 Gm Prot	Always requires Prior Authorization.
B4197		Enteral And Parenteral Therapy	Parenteral Sol 74-100 Gm Pro	Always requires Prior Authorization.
B4199		Enteral And Parenteral Therapy	Parenteral Sol > 100Gm Prote	Always requires Prior Authorization.
B4216		Enteral And Parenteral Therapy	Parenteral Nutrition Additiv	PEN > \$500
B4220		Enteral And Parenteral Therapy	Parenteral Supply Kit Premix	PEN > \$500
B4222		Enteral And Parenteral Therapy	Parenteral Supply Kit Homemi	PEN > \$500
B4224		Enteral And Parenteral Therapy	Parenteral Administration Ki	PEN > \$500
B5000		Enteral And Parenteral Therapy	Parenteral Sol Renal-Amirosy	PEN > \$500
B5100		Enteral And Parenteral Therapy	Parenteral Solution Hepatic	PEN > \$500
B5200		Enteral And Parenteral Therapy	Parenteral Sol Hepatic Fream	PEN > \$500
B9000		Enteral And Parenteral Therapy	Enter Infusion Pump w/o Alm	PEN > \$500
B9002		Enteral And Parenteral Therapy	Enter Nutr Inf Pump Any Type	PEN > \$500
B9004		Enteral And Parenteral Therapy	Parenteral Infus Pump Portab	Always requires Prior Authorization.
B9006		Enteral And Parenteral Therapy	Parenteral Infus Pump Statio	Always requires Prior Authorization.
B9998		Enteral And Parenteral Therapy	Enteral Supp Not Otherwise C	PEN > \$500
B9999		Enteral And Parenteral Therapy	Parenteral Supp Not Othrws C	PEN > \$500
E0100	NU	DMEPOS	Cane adjust/fixed with tip	DME > \$500
E0100	RR	DMEPOS	Cane adjust/fixed with tip	DME > \$500
E0100	UE	DMEPOS	Cane adjust/fixed with tip	DME > \$500
E0105	NU	DMEPOS	Cane adjust/fixed quad/3 pro	DME > \$500
E0105	RR	DMEPOS	Cane adjust/fixed quad/3 pro	DME > \$500
E0105	UE	DMEPOS	Cane adjust/fixed quad/3 pro	DME > \$500
E0110	NU	DMEPOS	Crutch forearm pair	DME > \$500
E0110	RR	DMEPOS	Crutch forearm pair	DME > \$500
E0110	UE	DMEPOS	Crutch forearm pair	DME > \$500
E0111	NU	DMEPOS	Crutch forearm each	DME > \$500
E0111	RR	DMEPOS	Crutch forearm each	DME > \$500
E0111	UE	DMEPOS	Crutch forearm each	DME > \$500
E0112	NU	DMEPOS	Crutch underarm pair wood	DME > \$500
E0112	RR	DMEPOS	Crutch underarm pair wood	DME > \$500
E0112	UE	DMEPOS	Crutch underarm pair wood	DME > \$500
E0113	NU	DMEPOS	Crutch underarm each wood	DME > \$500
E0113	RR	DMEPOS	Crutch underarm each wood	DME > \$500
E0113	UE	DMEPOS	Crutch underarm each wood	DME > \$500
E0114	NU	DMEPOS	Crutch underarm pair no wood	DME > \$500
E0114	RR	DMEPOS	Crutch underarm pair no wood	DME > \$500
E0114	UE	DMEPOS	Crutch underarm pair no wood	DME > \$500
E0116	NU	DMEPOS	Crutch underarm each no wood	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0116	RR	DMEPOS	Crutch underarm each no wood	DME > \$500
E0116	UE	DMEPOS	Crutch underarm each no wood	DME > \$500
E0117	RR	DMEPOS	Underarm springassist crutch	DME > \$500
E0130	NU	DMEPOS	Walker rigid adjust/fixed ht	DME > \$500
E0130	RR	DMEPOS	Walker rigid adjust/fixed ht	DME > \$500
E0130	UE	DMEPOS	Walker rigid adjust/fixed ht	DME > \$500
E0135	NU	DMEPOS	Walker folding adjust/fixed	DME > \$500
E0135	RR	DMEPOS	Walker folding adjust/fixed	DME > \$500
E0135	UE	DMEPOS	Walker folding adjust/fixed	DME > \$500
E0140	RR	DMEPOS	Walker w trunk support	DME > \$500
E0141	NU	DMEPOS	Rigid wheeled walker adj/fix	DME > \$500
E0141	RR	DMEPOS	Rigid wheeled walker adj/fix	DME > \$500
E0141	UE	DMEPOS	Rigid wheeled walker adj/fix	DME > \$500
E0143	NU	DMEPOS	Walker folding wheeled w/o s	DME > \$500
E0143	RR	DMEPOS	Walker folding wheeled w/o s	DME > \$500
E0143	UE	DMEPOS	Walker folding wheeled w/o s	DME > \$500
E0144	RR	DMEPOS	Enclosed walker w rear seat	DME > \$500
E0147	NU	DMEPOS	Walker variable wheel resist	DME > \$500
E0147	RR	DMEPOS	Walker variable wheel resist	DME > \$500
E0147	UE	DMEPOS	Walker variable wheel resist	DME > \$500
E0148	NU	DMEPOS	Heavyduty walker no wheels	DME > \$500
E0148	RR	DMEPOS	Heavyduty walker no wheels	DME > \$500
E0148	UE	DMEPOS	Heavyduty walker no wheels	DME > \$500
E0149	RR	DMEPOS	Heavy duty wheeled walker	DME > \$500
E0153	NU	DMEPOS	Forearm crutch platform atta	DME > \$500
E0153	RR	DMEPOS	Forearm crutch platform atta	DME > \$500
E0153	UE	DMEPOS	Forearm crutch platform atta	DME > \$500
E0154	NU	DMEPOS	Walker platform attachment	DME > \$500
E0154	RR	DMEPOS	Walker platform attachment	DME > \$500
E0154	UE	DMEPOS	Walker platform attachment	DME > \$500
E0155	NU	DMEPOS	Walker wheel attachment,pair	DME > \$500
E0155	RR	DMEPOS	Walker wheel attachment,pair	DME > \$500
E0155	UE	DMEPOS	Walker wheel attachment,pair	DME > \$500
E0156	NU	DMEPOS	Walker seat attachment	DME > \$500
E0156	RR	DMEPOS	Walker seat attachment	DME > \$500
E0156	UE	DMEPOS	Walker seat attachment	DME > \$500
E0157	NU	DMEPOS	Walker crutch attachment	DME > \$500
E0157	RR	DMEPOS	Walker crutch attachment	DME > \$500
E0157	UE	DMEPOS	Walker crutch attachment	DME > \$500
E0158	NU	DMEPOS	Walker leg extenders set of4	DME > \$500
E0158	RR	DMEPOS	Walker leg extenders set of4	DME > \$500
E0158	UE	DMEPOS	Walker leg extenders set of4	DME > \$500
E0159	NU	DMEPOS	Brake for wheeled walker	DME > \$500
E0159	RR	DMEPOS	Brake for wheeled walker	DME > \$500
E0159	UE	DMEPOS	Brake for wheeled walker	DME > \$500
E0160	NU	DMEPOS	Sitz type bath or equipment	DME > \$500
E0160	RR	DMEPOS	Sitz type bath or equipment	DME > \$500
E0160	UE	DMEPOS	Sitz type bath or equipment	DME > \$500
E0161	NU	DMEPOS	Sitz bath/equipment w/faucet	DME > \$500
E0161	RR	DMEPOS	Sitz bath/equipment w/faucet	DME > \$500
E0161	UE	DMEPOS	Sitz bath/equipment w/faucet	DME > \$500
E0162	NU	DMEPOS	Sitz bath chair	DME > \$500
E0162	RR	DMEPOS	Sitz bath chair	DME > \$500
E0162	UE	DMEPOS	Sitz bath chair	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0163	NU	DMEPOS	Commode chair with fixed arm	DME > \$500
E0163	RR	DMEPOS	Commode chair with fixed arm	DME > \$500
E0163	UE	DMEPOS	Commode chair with fixed arm	DME > \$500
E0165	RR	DMEPOS	Commode chair with detacharm	DME > \$500
E0167	NU	DMEPOS	Commode chair pail or pan	DME > \$500
E0167	RR	DMEPOS	Commode chair pail or pan	DME > \$500
E0167	UE	DMEPOS	Commode chair pail or pan	DME > \$500
E0168	NU	DMEPOS	Heavyduty/wide commode chair	DME > \$500
E0168	RR	DMEPOS	Heavyduty/wide commode chair	DME > \$500
E0168	UE	DMEPOS	Heavyduty/wide commode chair	DME > \$500
E0170	RR	DMEPOS	Commode chair electric	DME > \$500
E0171	RR	DMEPOS	Commode chair non-electric	DME > \$500
E0175	NU	DMEPOS	Commode chair foot rest	DME > \$500
E0175	RR	DMEPOS	Commode chair foot rest	DME > \$500
E0175	UE	DMEPOS	Commode chair foot rest	DME > \$500
E0181	RR	DMEPOS	Press pad alternating w/ pum	Always requires Prior Authorization.
E0182	RR	DMEPOS	Replace pump, alt press pad	DME > \$500
E0184	NU	DMEPOS	Dry pressure mattress	DME > \$500
E0184	RR	DMEPOS	Dry pressure mattress	DME > \$500
E0184	UE	DMEPOS	Dry pressure mattress	DME > \$500
E0185	NU	DMEPOS	Gel pressure mattress pad	Always requires Prior Authorization.
E0185	RR	DMEPOS	Gel pressure mattress pad	Always requires Prior Authorization.
E0185	UE	DMEPOS	Gel pressure mattress pad	Always requires Prior Authorization.
E0186	RR	DMEPOS	Air pressure mattress	Always requires Prior Authorization.
E0187	RR	DMEPOS	Water pressure mattress	Always requires Prior Authorization.
E0188	NU	DMEPOS	Synthetic sheepskin pad	DME > \$500
E0188	RR	DMEPOS	Synthetic sheepskin pad	DME > \$500
E0188	UE	DMEPOS	Synthetic sheepskin pad	DME > \$500
E0189	NU	DMEPOS	Lambswool sheepskin pad	DME > \$500
E0189	RR	DMEPOS	Lambswool sheepskin pad	DME > \$500
E0189	UE	DMEPOS	Lambswool sheepskin pad	DME > \$500
E0191	NU	DMEPOS	Protector heel or elbow	DME > \$500
E0191	RR	DMEPOS	Protector heel or elbow	DME > \$500
E0191	UE	DMEPOS	Protector heel or elbow	DME > \$500
E0193	RR	DMEPOS	Powered air flotation bed	Always requires Prior Authorization.
E0194	RR	DMEPOS	Air fluidized bed	Always requires Prior Authorization.
E0196	RR	DMEPOS	Gel pressure mattress	Always requires Prior Authorization.
E0197	RR	DMEPOS	Air pressure pad for mattres	Always requires Prior Authorization.
E0198	RR	DMEPOS	Water pressure pad for mattr	Always requires Prior Authorization.
E0199	NU	DMEPOS	Dry pressure pad for mattres	DME > \$500
E0199	RR	DMEPOS	Dry pressure pad for mattres	DME > \$500
E0199	UE	DMEPOS	Dry pressure pad for mattres	DME > \$500
E0200	NU	DMEPOS	Heat lamp without stand	DME > \$500
E0200	RR	DMEPOS	Heat lamp without stand	DME > \$500
E0200	UE	DMEPOS	Heat lamp without stand	DME > \$500
E0202	RR	DMEPOS	Phototherapy light w/ photom	DME > \$500
E0205	NU	DMEPOS	Heat lamp with stand	DME > \$500
E0205	RR	DMEPOS	Heat lamp with stand	DME > \$500
E0205	UE	DMEPOS	Heat lamp with stand	DME > \$500
E0210	NU	DMEPOS	Electric heat pad standard	DME > \$500
E0210	RR	DMEPOS	Electric heat pad standard	DME > \$500
E0210	UE	DMEPOS	Electric heat pad standard	DME > \$500
E0215	NU	DMEPOS	Electric heat pad moist	DME > \$500
E0215	RR	DMEPOS	Electric heat pad moist	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0215	UE	DMEPOS	Electric heat pad moist	DME > \$500
E0217	NU	DMEPOS	Water circ heat pad w pump	DME > \$500
E0217	RR	DMEPOS	Water circ heat pad w pump	DME > \$500
E0217	UE	DMEPOS	Water circ heat pad w pump	DME > \$500
E0225	NU	DMEPOS	Hydrocollator unit	DME > \$500
E0225	RR	DMEPOS	Hydrocollator unit	DME > \$500
E0225	UE	DMEPOS	Hydrocollator unit	DME > \$500
E0235	RR	DMEPOS	Paraffin bath unit portable	DME > \$500
E0236	RR	DMEPOS	Pump for water circulating p	DME > \$500
E0239	NU	DMEPOS	Hydrocollator unit portable	DME > \$500
E0239	RR	DMEPOS	Hydrocollator unit portable	DME > \$500
E0239	UE	DMEPOS	Hydrocollator unit portable	DME > \$500
E0249	NU	DMEPOS	Pad water circulating heat u	DME > \$500
E0249	RR	DMEPOS	Pad water circulating heat u	DME > \$500
E0249	UE	DMEPOS	Pad water circulating heat u	DME > \$500
E0250	RR	DMEPOS	Hosp bed fixed ht w/ mattres	DME > \$500
E0251	RR	DMEPOS	Hosp bed fixd ht w/o mattres	DME > \$500
E0255	RR	DMEPOS	Hospital bed var ht w/ mattr	DME > \$500
E0256	RR	DMEPOS	Hospital bed var ht w/o matt	DME > \$500
E0260	RR	DMEPOS	Hosp bed semi-electr w/ matt	Always requires Prior Authorization.
E0261	RR	DMEPOS	Hosp bed semi-electr w/o mat	Always requires Prior Authorization.
E0265	RR	DMEPOS	Hosp bed total electr w/ mat	Always requires Prior Authorization.
E0266	RR	DMEPOS	Hosp bed total elec w/o matt	Always requires Prior Authorization.
E0271	NU	DMEPOS	Mattress innerspring	DME > \$500
E0271	RR	DMEPOS	Mattress innerspring	DME > \$500
E0271	UE	DMEPOS	Mattress innerspring	DME > \$500
E0272	NU	DMEPOS	Mattress foam rubber	DME > \$500
E0272	RR	DMEPOS	Mattress foam rubber	DME > \$500
E0272	UE	DMEPOS	Mattress foam rubber	DME > \$500
E0275	NU	DMEPOS	Bed pan standard	DME > \$500
E0275	RR	DMEPOS	Bed pan standard	DME > \$500
E0275	UE	DMEPOS	Bed pan standard	DME > \$500
E0276	NU	DMEPOS	Bed pan fracture	DME > \$500
E0276	RR	DMEPOS	Bed pan fracture	DME > \$500
E0276	UE	DMEPOS	Bed pan fracture	DME > \$500
E0277	RR	DMEPOS	Powered pres-redu air mattrs	Always requires Prior Authorization.
E0280	NU	DMEPOS	Bed cradle	DME > \$500
E0280	RR	DMEPOS	Bed cradle	DME > \$500
E0280	UE	DMEPOS	Bed cradle	DME > \$500
E0290	RR	DMEPOS	Hosp bed fx ht w/o rails w/m	DME > \$500
E0291	RR	DMEPOS	Hosp bed fx ht w/o rail w/o	DME > \$500
E0292	RR	DMEPOS	Hosp bed var ht no sr w/matt	DME > \$500
E0293	RR	DMEPOS	Hosp bed var ht no sr no mat	DME > \$500
E0294	RR	DMEPOS	Hosp bed semi-elect w/ mattr	Always requires Prior Authorization.
E0295	RR	DMEPOS	Hosp bed semi-elect w/o matt	Always requires Prior Authorization.
E0296	RR	DMEPOS	Hosp bed total elect w/ matt	Always requires Prior Authorization.
E0297	RR	DMEPOS	Hosp bed total elect w/o mat	Always requires Prior Authorization.
E0300	RR	DMEPOS	Enclosed ped crib hosp grade	DME > \$500
E0301	RR	DMEPOS	Hd hosp bed, 350-600 lbs	Always requires Prior Authorization.
E0302	RR	DMEPOS	Ex hd hosp bed > 600 lbs	Always requires Prior Authorization.
E0303	RR	DMEPOS	Hosp bed hvy dty xtra wide	Always requires Prior Authorization.
E0304	RR	DMEPOS	Hosp bed xtra hvy dty x wide	Always requires Prior Authorization.
E0305	RR	DMEPOS	Rails bed side half length	DME > \$500
E0310	NU	DMEPOS	Rails bed side full length	DME > \$500

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E0310	RR	DMEPOS	Rails bed side full length	DME > \$500
E0310	UE	DMEPOS	Rails bed side full length	DME > \$500
E0316	RR	DMEPOS	Bed safety enclosure	DME > \$500
E0325	NU	DMEPOS	Urinal male jug-type	DME > \$500
E0325	RR	DMEPOS	Urinal male jug-type	DME > \$500
E0325	UE	DMEPOS	Urinal male jug-type	DME > \$500
E0326	NU	DMEPOS	Urinal female jug-type	DME > \$500
E0326	RR	DMEPOS	Urinal female jug-type	DME > \$500
E0326	UE	DMEPOS	Urinal female jug-type	DME > \$500
E0371	RR	DMEPOS	Nonpower mattress overlay	DME > \$500
E0372	RR	DMEPOS	Powered air mattress overlay	Always requires Prior Authorization.
E0373	RR	DMEPOS	Nonpowered pressure mattress	DME > \$500
E0424	RR	DMEPOS	Stationary compressed gas O2	Always requires Prior Authorization.
E0431	RR	DMEPOS	Portable gaseous O2	Always requires Prior Authorization.
E0433	RR	DMEPOS	Portable liquid oxygen sys	Always requires Prior Authorization.
E0434	RR	DMEPOS	Portable liquid O2	Always requires Prior Authorization.
E0439	RR	DMEPOS	Stationary liquid O2	Always requires Prior Authorization.
E0441		DMEPOS	Stationary o2 contents, gas	Always requires Prior Authorization.
E0442		DMEPOS	Stationary o2 contents, liq	Always requires Prior Authorization.
E0443		DMEPOS	Portable O2 contents, gas	Always requires Prior Authorization.
E0444		DMEPOS	Portable O2 contents, liquid	Always requires Prior Authorization.
E0462	RR	DMEPOS	Rocking bed w/ or w/o side r	Always requires Prior Authorization.
E0465	RR	DMEPOS	Home vent invasive interface	Always requires Prior Authorization.
E0466	RR	DMEPOS	Home vent non-invasive inter	Always requires Prior Authorization.
E0470	RR	DMEPOS	Rad w/o backup non-inv intrfc	DME > \$500
E0471	RR	DMEPOS	Rad w/backup non inv intrfc	DME > \$500
E0472	RR	DMEPOS	Rad w backup invasive intrfc	DME > \$500
E0480	RR	DMEPOS	Percussor elect/pneum home m	DME > \$500
E0482	RR	DMEPOS	Cough stimulating device	DME > \$500
E0483	RR	DMEPOS	Chest compression gen system	Always requires Prior Authorization.
E0484	NU	DMEPOS	Non-elec oscillatory pep dvc	DME > \$500
E0484	RR	DMEPOS	Non-elec oscillatory pep dvc	DME > \$500
E0484	UE	DMEPOS	Non-elec oscillatory pep dvc	DME > \$500
E0485	NU	DMEPOS	Oral device/appliance prefab	DME > \$500
E0485	RR	DMEPOS	Oral device/appliance prefab	DME > \$500
E0485	UE	DMEPOS	Oral device/appliance prefab	DME > \$500
E0486	NU	DMEPOS	Oral device/appliance cusfab	DME > \$500
E0486	RR	DMEPOS	Oral device/appliance cusfab	DME > \$500
E0486	UE	DMEPOS	Oral device/appliance cusfab	DME > \$500
E0500	RR	DMEPOS	Ippb all types	DME > \$500
E0550	RR	DMEPOS	Humidif extens supple w ippb	DME > \$500
E0560	NU	DMEPOS	Humidifier supplemental w/ i	DME > \$500
E0560	RR	DMEPOS	Humidifier supplemental w/ i	DME > \$500
E0560	UE	DMEPOS	Humidifier supplemental w/ i	DME > \$500
E0561	NU	DMEPOS	Humidifier nonheated w pap	DME > \$500
E0561	RR	DMEPOS	Humidifier nonheated w pap	DME > \$500
E0561	UE	DMEPOS	Humidifier nonheated w pap	DME > \$500
E0562	NU	DMEPOS	Humidifier heated used w pap	DME > \$500
E0562	RR	DMEPOS	Humidifier heated used w pap	DME > \$500
E0562	UE	DMEPOS	Humidifier heated used w pap	DME > \$500
E0565	RR	DMEPOS	Compressor air power source	DME > \$500
E0570	RR	DMEPOS	Nebulizer with compression	DME > \$500
E0572	RR	DMEPOS	Aerosol compressor adjust pr	DME > \$500
E0574	RR	DMEPOS	Ultrasonic generator w svneb	DME > \$500



## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
E0575	RR	DMEPOS	Nebulizer ultrasonic	DME > \$500
E0580	NU	DMEPOS	Nebulizer for use w/ regulat	DME > \$500
E0580	RR	DMEPOS	Nebulizer for use w/ regulat	DME > \$500
E0580	UE	DMEPOS	Nebulizer for use w/ regulat	DME > \$500
E0585	RR	DMEPOS	Nebulizer w/ compressor & he	DME > \$500
E0600	RR	DMEPOS	Suction pump portab hom modl	DME > \$500
E0601	RR	DMEPOS	Cont airway pressure device	Always requires Prior Authorization.
E0602	NU	DMEPOS	Manual breast pump	DME > \$500
E0602	RR	DMEPOS	Manual breast pump	DME > \$500
E0602	UE	DMEPOS	Manual breast pump	DME > \$500
E0605	NU	DMEPOS	Vaporizer room type	DME > \$500
E0605	RR	DMEPOS	Vaporizer room type	DME > \$500
E0605	UE	DMEPOS	Vaporizer room type	DME > \$500
E0606	RR	DMEPOS	Drainage board postural	DME > \$500
E0607	NU	DMEPOS	Blood glucose monitor home	DME > \$500
E0607	RR	DMEPOS	Blood glucose monitor home	DME > \$500
E0607	UE	DMEPOS	Blood glucose monitor home	DME > \$500
E0610	NU	DMEPOS	Pacemaker monitr audible/vis	DME > \$500
E0610	RR	DMEPOS	Pacemaker monitr audible/vis	DME > \$500
E0610	UE	DMEPOS	Pacemaker monitr audible/vis	DME > \$500
E0615	NU	DMEPOS	Pacemaker monitr digital/vis	DME > \$500
E0615	RR	DMEPOS	Pacemaker monitr digital/vis	DME > \$500
E0615	UE	DMEPOS	Pacemaker monitr digital/vis	DME > \$500
E0617	RR	DMEPOS	Automatic ext defibrillator	DME > \$500
E0618	RR	DMEPOS	Apnea monitor	DME > \$500
E0619	RR	DMEPOS	Apnea monitor w recorder	DME > \$500
E0620	RR	DMEPOS	Cap bld skin piercing laser	DME > \$500
E0621	NU	DMEPOS	Patient lift sling or seat	DME > \$500
E0621	RR	DMEPOS	Patient lift sling or seat	DME > \$500
E0621	UE	DMEPOS	Patient lift sling or seat	DME > \$500
E0627	NU	DMEPOS	Seat lift mech, electric any	DME > \$500
E0627	RR	DMEPOS	Seat lift mech, electric any	DME > \$500
E0627	UE	DMEPOS	Seat lift mech, electric any	DME > \$500
E0629	NU	DMEPOS	Seat lift mech, non-electric	DME > \$500
E0629	RR	DMEPOS	Seat lift mech, non-electric	DME > \$500
E0629	UE	DMEPOS	Seat lift mech, non-electric	DME > \$500
E0630	RR	DMEPOS	Patient lift hydraulic	DME > \$500
E0635	RR	DMEPOS	Patient lift electric	DME > \$500
E0636	RR	DMEPOS	Pt support & positioning sys	DME > \$500
E0639	RR	DMEPOS	Moveable patient lift system	DME > \$500
E0640	RR	DMEPOS	Fixed patient lift system	DME > \$500
E0650	NU	DMEPOS	Pneuma compresor non-segment	DME > \$500
E0650	RR	DMEPOS	Pneuma compresor non-segment	DME > \$500
E0650	UE	DMEPOS	Pneuma compresor non-segment	DME > \$500
E0651	NU	DMEPOS	Pneum compressor segmental	DME > \$500
E0651	RR	DMEPOS	Pneum compressor segmental	DME > \$500
E0651	UE	DMEPOS	Pneum compressor segmental	DME > \$500
E0652	NU	DMEPOS	Pneum compres w/cal pressure	DME > \$500
E0652	RR	DMEPOS	Pneum compres w/cal pressure	DME > \$500
E0652	UE	DMEPOS	Pneum compres w/cal pressure	DME > \$500
E0655	NU	DMEPOS	Pneumatic appliance half arm	DME > \$500
E0655	RR	DMEPOS	Pneumatic appliance half arm	DME > \$500
E0655	UE	DMEPOS	Pneumatic appliance half arm	DME > \$500
E0656	RR	DMEPOS	Segmental pneumatic trunk	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0657	RR	DMEPOS	Segmental pneumatic chest	DME > \$500
E0660	NU	DMEPOS	Pneumatic appliance full leg	DME > \$500
E0660	RR	DMEPOS	Pneumatic appliance full leg	DME > \$500
E0660	UE	DMEPOS	Pneumatic appliance full leg	DME > \$500
E0665	NU	DMEPOS	Pneumatic appliance full arm	DME > \$500
E0665	RR	DMEPOS	Pneumatic appliance full arm	DME > \$500
E0665	UE	DMEPOS	Pneumatic appliance full arm	DME > \$500
E0666	NU	DMEPOS	Pneumatic appliance half leg	DME > \$500
E0666	RR	DMEPOS	Pneumatic appliance half leg	DME > \$500
E0666	UE	DMEPOS	Pneumatic appliance half leg	DME > \$500
E0667	NU	DMEPOS	Seg pneumatic appl full leg	DME > \$500
E0667	RR	DMEPOS	Seg pneumatic appl full leg	DME > \$500
E0667	UE	DMEPOS	Seg pneumatic appl full leg	DME > \$500
E0668	NU	DMEPOS	Seg pneumatic appl full arm	DME > \$500
E0668	RR	DMEPOS	Seg pneumatic appl full arm	DME > \$500
E0668	UE	DMEPOS	Seg pneumatic appl full arm	DME > \$500
E0669	NU	DMEPOS	Seg pneumatic appli half leg	DME > \$500
E0669	RR	DMEPOS	Seg pneumatic appli half leg	DME > \$500
E0669	UE	DMEPOS	Seg pneumatic appli half leg	DME > \$500
E0670	NU	DMEPOS	Seg pneum int legs/trunk	DME > \$500
E0670	RR	DMEPOS	Seg pneum int legs/trunk	DME > \$500
E0670	UE	DMEPOS	Seg pneum int legs/trunk	DME > \$500
E0671	NU	DMEPOS	Pressure pneum appl full leg	DME > \$500
E0671	RR	DMEPOS	Pressure pneum appl full leg	DME > \$500
E0671	UE	DMEPOS	Pressure pneum appl full leg	DME > \$500
E0672	NU	DMEPOS	Pressure pneum appl full arm	DME > \$500
E0672	RR	DMEPOS	Pressure pneum appl full arm	DME > \$500
E0672	UE	DMEPOS	Pressure pneum appl full arm	DME > \$500
E0673	NU	DMEPOS	Pressure pneum appl half leg	DME > \$500
E0673	RR	DMEPOS	Pressure pneum appl half leg	DME > \$500
E0673	UE	DMEPOS	Pressure pneum appl half leg	DME > \$500
E0675	RR	DMEPOS	Pneumatic compression device	DME > \$500
E0691	NU	DMEPOS	Uvl pnl 2 sq ft or less	DME > \$500
E0691	RR	DMEPOS	Uvl pnl 2 sq ft or less	DME > \$500
E0691	UE	DMEPOS	Uvl pnl 2 sq ft or less	DME > \$500
E0692	NU	DMEPOS	Uvl sys panel 4 ft	DME > \$500
E0692	RR	DMEPOS	Uvl sys panel 4 ft	DME > \$500
E0692	UE	DMEPOS	Uvl sys panel 4 ft	DME > \$500
E0693	NU	DMEPOS	Uvl sys panel 6 ft	DME > \$500
E0693	RR	DMEPOS	Uvl sys panel 6 ft	DME > \$500
E0693	UE	DMEPOS	Uvl sys panel 6 ft	DME > \$500
E0694	NU	DMEPOS	Uvl md cabinet sys 6 ft	DME > \$500
E0694	RR	DMEPOS	Uvl md cabinet sys 6 ft	DME > \$500
E0694	UE	DMEPOS	Uvl md cabinet sys 6 ft	DME > \$500
E0705	NU	DMEPOS	Transfer device	DME > \$500
E0705	RR	DMEPOS	Transfer device	DME > \$500
E0705	UE	DMEPOS	Transfer device	DME > \$500
E0720	NU	DMEPOS	Tens two lead	DME > \$500
E0730	NU	DMEPOS	Tens four lead	DME > \$500
E0731	NU	DMEPOS	Conductive garment for tens/	DME > \$500
E0740	RR	DMEPOS	Non-implant pelv flr e-stim	DME > \$500
E0744	RR	DMEPOS	Neuromuscular stim for scoli	DME > \$500
E0745	RR	DMEPOS	Neuromuscular stim for shock	DME > \$500
E0747	NU	DMEPOS	Elec osteogen stim not spine	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0747	RR	DMEPOS	Elec osteogen stim not spine	DME > \$500
E0747	UE	DMEPOS	Elec osteogen stim not spine	DME > \$500
E0748	NU	DMEPOS	Elec osteogen stim spinal	DME > \$500
E0748	RR	DMEPOS	Elec osteogen stim spinal	DME > \$500
E0748	UE	DMEPOS	Elec osteogen stim spinal	DME > \$500
E0749	RR	DMEPOS	Elec osteogen stim implanted	DME > \$500
E0760	NU	DMEPOS	Osteogen ultrasound stim/tor	DME > \$500
E0760	RR	DMEPOS	Osteogen ultrasound stim/tor	DME > \$500
E0760	UE	DMEPOS	Osteogen ultrasound stim/tor	DME > \$500
E0762	RR	DMEPOS	Trans elec jt stim dev sys	DME > \$500
E0764	RR	DMEPOS	Functional neuromuscularstim	DME > \$500
E0765	NU	DMEPOS	Nerve stimulator for tx n&v	DME > \$500
E0765	RR	DMEPOS	Nerve stimulator for tx n&v	DME > \$500
E0765	UE	DMEPOS	Nerve stimulator for tx n&v	DME > \$500
E0776	NU	DMEPOS	IV pole	DME > \$500
E0776	RR	DMEPOS	IV pole	DME > \$500
E0776	UE	DMEPOS	IV pole	DME > \$500
E0779	RR	DMEPOS	Amb infusion pump mechanical	Always requires Prior Authorization.
E0780	NU	DMEPOS	Mech amb infusion pump <8hrs	Always requires Prior Authorization.
E0781	RR	DMEPOS	External ambulatory infus pu	Always requires Prior Authorization.
E0782	NU	DMEPOS	Non-programable infusion pump	Always requires Prior Authorization.
E0782	RR	DMEPOS	Non-programable infusion pump	Always requires Prior Authorization.
E0782	UE	DMEPOS	Non-programable infusion pump	Always requires Prior Authorization.
E0783	NU	DMEPOS	Programmable infusion pump	Always requires Prior Authorization.
E0783	RR	DMEPOS	Programmable infusion pump	Always requires Prior Authorization.
E0783	UE	DMEPOS	Programmable infusion pump	Always requires Prior Authorization.
E0784	RR	DMEPOS	Ext amb infusn pump insulin	Always requires Prior Authorization.
E0785	KF	DMEPOS	Replacement impl pump cathet	Always requires Prior Authorization.
E0786	NU	DMEPOS	Implantable pump replacement	Always requires Prior Authorization.
E0786	RR	DMEPOS	Implantable pump replacement	Always requires Prior Authorization.
E0786	UE	DMEPOS	Implantable pump replacement	Always requires Prior Authorization.
E0791	RR	DMEPOS	Parenteral infusion pump sta	Always requires Prior Authorization.
E0840	NU	DMEPOS	Tract frame attach headboard	DME > \$500
E0840	RR	DMEPOS	Tract frame attach headboard	DME > \$500
E0840	UE	DMEPOS	Tract frame attach headboard	DME > \$500
E0849	RR	DMEPOS	Cervical pneum trac equip	DME > \$500
E0850	NU	DMEPOS	Traction stand free standing	DME > \$500
E0850	RR	DMEPOS	Traction stand free standing	DME > \$500
E0850	UE	DMEPOS	Traction stand free standing	DME > \$500
E0855	RR	DMEPOS	Cervical traction equipment	DME > \$500
E0856	RR	DMEPOS	Cervic collar w air bladders	DME > \$500
E0860	NU	DMEPOS	Tract equip cervical tract	DME > \$500
E0860	RR	DMEPOS	Tract equip cervical tract	DME > \$500
E0860	UE	DMEPOS	Tract equip cervical tract	DME > \$500
E0870	NU	DMEPOS	Tract frame attach footboard	DME > \$500
E0870	RR	DMEPOS	Tract frame attach footboard	DME > \$500
E0870	UE	DMEPOS	Tract frame attach footboard	DME > \$500
E0880	NU	DMEPOS	Trac stand free stand extrem	DME > \$500
E0880	RR	DMEPOS	Trac stand free stand extrem	DME > \$500
E0880	UE	DMEPOS	Trac stand free stand extrem	DME > \$500
E0890	NU	DMEPOS	Traction frame attach pelvic	DME > \$500
E0890	RR	DMEPOS	Traction frame attach pelvic	DME > \$500
E0890	UE	DMEPOS	Traction frame attach pelvic	DME > \$500
E0900	NU	DMEPOS	Trac stand free stand pelvic	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0900	RR	DMEPOS	Trac stand free stand pelvic	DME > \$500
E0900	UE	DMEPOS	Trac stand free stand pelvic	DME > \$500
E0910	RR	DMEPOS	Trapeze bar attached to bed	DME > \$500
E0911	RR	DMEPOS	Hd trapeze bar attach to bed	DME > \$500
E0912	RR	DMEPOS	Hd trapeze bar free standing	DME > \$500
E0920	RR	DMEPOS	Fracture frame attached to b	DME > \$500
E0930	RR	DMEPOS	Fracture frame free standing	DME > \$500
E0935	RR	DMEPOS	Cont pas motion exercise dev	DME > \$500
E0940	RR	DMEPOS	Trapeze bar free standing	DME > \$500
E0941	RR	DMEPOS	Gravity assisted traction de	DME > \$500
E0942	NU	DMEPOS	Cervical head harness/halter	DME > \$500
E0942	RR	DMEPOS	Cervical head harness/halter	DME > \$500
E0942	UE	DMEPOS	Cervical head harness/halter	DME > \$500
E0944	NU	DMEPOS	Pelvic belt/harness/boot	DME > \$500
E0944	RR	DMEPOS	Pelvic belt/harness/boot	DME > \$500
E0944	UE	DMEPOS	Pelvic belt/harness/boot	DME > \$500
E0945	NU	DMEPOS	Belt/harness extremity	DME > \$500
E0945	RR	DMEPOS	Belt/harness extremity	DME > \$500
E0945	UE	DMEPOS	Belt/harness extremity	DME > \$500
E0946	RR	DMEPOS	Fracture frame dual w cross	DME > \$500
E0947	NU	DMEPOS	Fracture frame attachmnts pe	DME > \$500
E0947	RR	DMEPOS	Fracture frame attachmnts pe	DME > \$500
E0947	UE	DMEPOS	Fracture frame attachmnts pe	DME > \$500
E0948	NU	DMEPOS	Fracture frame attachmnts ce	DME > \$500
E0948	RR	DMEPOS	Fracture frame attachmnts ce	DME > \$500
E0948	UE	DMEPOS	Fracture frame attachmnts ce	DME > \$500
E0950	NU	DMEPOS	Tray	DME > \$500
E0950	RR	DMEPOS	Tray	DME > \$500
E0950	UE	DMEPOS	Tray	DME > \$500
E0951	NU	DMEPOS	Loop heel	DME > \$500
E0951	RR	DMEPOS	Loop heel	DME > \$500
E0951	UE	DMEPOS	Loop heel	DME > \$500
E0952	NU	DMEPOS	Toe loop/holder, each	DME > \$500
E0952	RR	DMEPOS	Toe loop/holder, each	DME > \$500
E0952	UE	DMEPOS	Toe loop/holder, each	DME > \$500
E0955	RR	DMEPOS	Cushioned headrest	DME > \$500
E0956	NU	DMEPOS	W/c lateral trunk/hip suppor	DME > \$500
E0956	RR	DMEPOS	W/c lateral trunk/hip suppor	DME > \$500
E0956	UE	DMEPOS	W/c lateral trunk/hip suppor	DME > \$500
E0957	NU	DMEPOS	W/c medial thigh support	DME > \$500
E0957	RR	DMEPOS	W/c medial thigh support	DME > \$500
E0957	UE	DMEPOS	W/c medial thigh support	DME > \$500
E0958	RR	DMEPOS	Whlchr att- conv 1 arm drive	DME > \$500
E0959	NU	DMEPOS	Amputee adapter	DME > \$500
E0959	RR	DMEPOS	Amputee adapter	DME > \$500
E0959	UE	DMEPOS	Amputee adapter	DME > \$500
E0960	NU	DMEPOS	W/c shoulder harness/straps	DME > \$500
E0960	RR	DMEPOS	W/c shoulder harness/straps	DME > \$500
E0960	UE	DMEPOS	W/c shoulder harness/straps	DME > \$500
E0961	NU	DMEPOS	Wheelchair brake extension	DME > \$500
E0961	RR	DMEPOS	Wheelchair brake extension	DME > \$500
E0961	UE	DMEPOS	Wheelchair brake extension	DME > \$500
E0966	NU	DMEPOS	Wheelchair head rest extensi	DME > \$500
E0966	RR	DMEPOS	Wheelchair head rest extensi	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E0966	UE	DMEPOS	Wheelchair head rest extensi	DME > \$500
E0967	NU	DMEPOS	Man wc rim/projection rep ea	DME > \$500
E0967	RR	DMEPOS	Man wc rim/projection rep ea	DME > \$500
E0967	UE	DMEPOS	Man wc rim/projection rep ea	DME > \$500
E0968	RR	DMEPOS	Wheelchair commode seat	DME > \$500
E0969	NU	DMEPOS	Wheelchair narrowing device	DME > \$500
E0969	RR	DMEPOS	Wheelchair narrowing device	DME > \$500
E0969	UE	DMEPOS	Wheelchair narrowing device	DME > \$500
E0971	NU	DMEPOS	Wheelchair anti-tipping devi	DME > \$500
E0971	RR	DMEPOS	Wheelchair anti-tipping devi	DME > \$500
E0971	UE	DMEPOS	Wheelchair anti-tipping devi	DME > \$500
E0973	NU	DMEPOS	W/ch access det adj armrest	DME > \$500
E0973	RR	DMEPOS	W/ch access det adj armrest	DME > \$500
E0973	UE	DMEPOS	W/ch access det adj armrest	DME > \$500
E0974	NU	DMEPOS	W/ch access anti-rollback	DME > \$500
E0974	RR	DMEPOS	W/ch access anti-rollback	DME > \$500
E0974	UE	DMEPOS	W/ch access anti-rollback	DME > \$500
E0978	NU	DMEPOS	W/c acc,saf belt pelv strap	DME > \$500
E0978	RR	DMEPOS	W/c acc,saf belt pelv strap	DME > \$500
E0978	UE	DMEPOS	W/c acc,saf belt pelv strap	DME > \$500
E0980	NU	DMEPOS	Wheelchair safety vest	DME > \$500
E0980	RR	DMEPOS	Wheelchair safety vest	DME > \$500
E0980	UE	DMEPOS	Wheelchair safety vest	DME > \$500
E0981	NU	DMEPOS	Seat upholstery, replacement	DME > \$500
E0981	RR	DMEPOS	Seat upholstery, replacement	DME > \$500
E0981	UE	DMEPOS	Seat upholstery, replacement	DME > \$500
E0982	NU	DMEPOS	Back upholstery, replacement	DME > \$500
E0982	RR	DMEPOS	Back upholstery, replacement	DME > \$500
E0982	UE	DMEPOS	Back upholstery, replacement	DME > \$500
E0983	RR	DMEPOS	Add pwr joystick	DME > \$500
E0984	RR	DMEPOS	Add pwr tiller	DME > \$500
E0985	RR	DMEPOS	W/c seat lift mechanism	DME > \$500
E0986	RR	DMEPOS	Man w/c push-rim powr system	DME > \$500
E0988	RR	DMEPOS	Lever-activated wheel drive	DME > \$500
E0990	NU	DMEPOS	Wheelchair elevating leg res	DME > \$500
E0990	RR	DMEPOS	Wheelchair elevating leg res	DME > \$500
E0990	UE	DMEPOS	Wheelchair elevating leg res	DME > \$500
E0992	NU	DMEPOS	Wheelchair solid seat insert	DME > \$500
E0992	RR	DMEPOS	Wheelchair solid seat insert	DME > \$500
E0992	UE	DMEPOS	Wheelchair solid seat insert	DME > \$500
E0994	NU	DMEPOS	Wheelchair arm rest	DME > \$500
E0994	RR	DMEPOS	Wheelchair arm rest	DME > \$500
E0994	UE	DMEPOS	Wheelchair arm rest	DME > \$500
E0995	NU	DMEPOS	Wc calf rest, pad replacemnt	DME > \$500
E0995	RR	DMEPOS	Wc calf rest, pad replacemnt	DME > \$500
E0995	UE	DMEPOS	Wc calf rest, pad replacemnt	DME > \$500
E1002	RR	DMEPOS	Pwr seat tilt	Always requires Prior Authorization.
E1003	RR	DMEPOS	Pwr seat recline	Always requires Prior Authorization.
E1004	RR	DMEPOS	Pwr seat recline mech	Always requires Prior Authorization.
E1005	RR	DMEPOS	Pwr seat recline pwr	Always requires Prior Authorization.
E1006	RR	DMEPOS	Pwr seat combo w/o shear	Always requires Prior Authorization.
E1007	RR	DMEPOS	Pwr seat combo w/shear	Always requires Prior Authorization.
E1008	RR	DMEPOS	Pwr seat combo pwr shear	Always requires Prior Authorization.
E1009	NU	DMEPOS	Add mech leg elevation	DME > \$500

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**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
E1009	RR	DMEPOS	Add mech leg elevation	DME > \$500
E1009	UE	DMEPOS	Add mech leg elevation	DME > \$500
E1010	RR	DMEPOS	Add pwr leg elevation	Always requires Prior Authorization.
E1011	NU	DMEPOS	Ped wc modify width adjustm	DME > \$500
E1011	RR	DMEPOS	Ped wc modify width adjustm	DME > \$500
E1011	UE	DMEPOS	Ped wc modify width adjustm	DME > \$500
E1012	RR	DMEPOS	Ctr mount pwr elev leg rest	Always requires Prior Authorization.
E1014	RR	DMEPOS	Reclining back add ped w/c	DME > \$500
E1015	NU	DMEPOS	Shock absorber for man w/c	DME > \$500
E1015	RR	DMEPOS	Shock absorber for man w/c	DME > \$500
E1015	UE	DMEPOS	Shock absorber for man w/c	DME > \$500
E1016	NU	DMEPOS	Shock absorber for power w/c	Always requires Prior Authorization.
E1016	RR	DMEPOS	Shock absorber for power w/c	Always requires Prior Authorization.
E1016	UE	DMEPOS	Shock absorber for power w/c	Always requires Prior Authorization.
E1017	NU	DMEPOS	Hd shck absbr for hd man wc	DME > \$500
E1017	RR	DMEPOS	Hd shck absbr for hd man wc	DME > \$500
E1017	UE	DMEPOS	Hd shck absbr for hd man wc	DME > \$500
E1018	NU	DMEPOS	Hd shck absrber for hd powwc	DME > \$500
E1018	RR	DMEPOS	Hd shck absrber for hd powwc	DME > \$500
E1018	UE	DMEPOS	Hd shck absrber for hd powwc	DME > \$500
E1020	RR	DMEPOS	Residual limb support system	DME > \$500
E1028	RR	DMEPOS	W/c manual swingaway	DME > \$500
E1029	RR	DMEPOS	W/c vent tray fixed	DME > \$500
E1030	RR	DMEPOS	W/c vent tray gimbaled	DME > \$500
E1031	RR	DMEPOS	Rollabout chair with casters	DME > \$500
E1035	RR	DMEPOS	Patient transfer system <300	DME > \$500
E1036	RR	DMEPOS	Patient transfer system >300	DME > \$500
E1037	RR	DMEPOS	Transport chair, ped size	DME > \$500
E1038	RR	DMEPOS	Transport chair pt wt<=300lb	DME > \$500
E1039	RR	DMEPOS	Transport chair pt wt >300lb	DME > \$500
E1050	RR	DMEPOS	Whelchr fxd full length arms	DME > \$500
E1060	RR	DMEPOS	Wheelchair detachable arms	DME > \$500
E1070	RR	DMEPOS	Wheelchair detachable foot r	DME > \$500
E1083	RR	DMEPOS	Hemi-wheelchair fixed arms	DME > \$500
E1084	RR	DMEPOS	Hemi-wheelchair detachable a	DME > \$500
E1087	RR	DMEPOS	Wheelchair lightwt fixed arm	DME > \$500
E1088	RR	DMEPOS	Wheelchair lightweight det a	DME > \$500
E1092	RR	DMEPOS	Wheelchair wide w/ leg rests	DME > \$500
E1093	RR	DMEPOS	Wheelchair wide w/ foot rest	DME > \$500
E1100	RR	DMEPOS	Whchr s-recl fxd arm leg res	DME > \$500
E1110	RR	DMEPOS	Wheelchair semi-recl detach	DME > \$500
E1150	RR	DMEPOS	Wheelchair standard w/ leg r	DME > \$500
E1160	RR	DMEPOS	Wheelchair fixed arms	DME > \$500
E1161	RR	DMEPOS	Manual adult wc w tiltinspac	DME > \$500
E1170	RR	DMEPOS	Whlchr ampu fxd arm leg rest	DME > \$500
E1171	RR	DMEPOS	Wheelchair amputee w/o leg r	DME > \$500
E1172	RR	DMEPOS	Wheelchair amputee detach ar	DME > \$500
E1180	RR	DMEPOS	Wheelchair amputee w/ foot r	DME > \$500
E1190	RR	DMEPOS	Wheelchair amputee w/ leg re	DME > \$500
E1195	RR	DMEPOS	Wheelchair amputee heavy dut	DME > \$500
E1200	RR	DMEPOS	Wheelchair amputee fixed arm	DME > \$500
E1221	RR	DMEPOS	Wheelchair spec size w foot	DME > \$500
E1222	RR	DMEPOS	Wheelchair spec size w/ leg	DME > \$500
E1223	RR	DMEPOS	Wheelchair spec size w foot	DME > \$500

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

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Code	Mod	Procedures & Services	Description	Rule Description
E1224	RR	DMEPOS	Wheelchair spec size w/ leg	DME > \$500
E1225	RR	DMEPOS	Manual semi-reclining back	DME > \$500
E1226	NU	DMEPOS	Manual fully reclining back	DME > \$500
E1226	RR	DMEPOS	Manual fully reclining back	DME > \$500
E1226	UE	DMEPOS	Manual fully reclining back	DME > \$500
E1227	NU	DMEPOS	Wheelchair spec sz spec ht a	Always requires Prior Authorization.
E1227	RR	DMEPOS	Wheelchair spec sz spec ht a	Always requires Prior Authorization.
E1227	UE	DMEPOS	Wheelchair spec sz spec ht a	Always requires Prior Authorization.
E1228	RR	DMEPOS	Wheelchair spec sz spec ht b	Always requires Prior Authorization.
E1230	NU	DMEPOS	Power operated vehicle	Always requires Prior Authorization.
E1230	RR	DMEPOS	Power operated vehicle	Always requires Prior Authorization.
E1230	UE	DMEPOS	Power operated vehicle	Always requires Prior Authorization.
E1231	NU	DMEPOS	Rigid ped w/c tilt-in-space	DME > \$500
E1231	RR	DMEPOS	Rigid ped w/c tilt-in-space	DME > \$500
E1231	UE	DMEPOS	Rigid ped w/c tilt-in-space	DME > \$500
E1232	RR	DMEPOS	Folding ped wc tilt-in-space	DME > \$500
E1233	RR	DMEPOS	Rig ped wc tltnspc w/o seat	DME > \$500
E1234	RR	DMEPOS	Fld ped wc tltnspc w/o seat	DME > \$500
E1235	RR	DMEPOS	Rigid ped wc adjustable	DME > \$500
E1236	RR	DMEPOS	Folding ped wc adjustable	DME > \$500
E1237	RR	DMEPOS	Rgd ped wc adjstabl w/o seat	DME > \$500
E1238	RR	DMEPOS	Fld ped wc adjstabl w/o seat	DME > \$500
E1240	RR	DMEPOS	Whchr litwt det arm leg rest	DME > \$500
E1270	RR	DMEPOS	Wheelchair lightweight leg r	DME > \$500
E1280	RR	DMEPOS	Whchr h-duty det arm leg res	DME > \$500
E1295	RR	DMEPOS	Wheelchair heavy duty fixed	DME > \$500
E1296	NU	DMEPOS	Wheelchair special seat heig	Always requires Prior Authorization.
E1296	RR	DMEPOS	Wheelchair special seat heig	Always requires Prior Authorization.
E1296	UE	DMEPOS	Wheelchair special seat heig	Always requires Prior Authorization.
E1297	NU	DMEPOS	Wheelchair special seat dept	Always requires Prior Authorization.
E1297	RR	DMEPOS	Wheelchair special seat dept	Always requires Prior Authorization.
E1297	UE	DMEPOS	Wheelchair special seat dept	Always requires Prior Authorization.
E1298	NU	DMEPOS	Wheelchair spec seat depth/w	Always requires Prior Authorization.
E1298	RR	DMEPOS	Wheelchair spec seat depth/w	Always requires Prior Authorization.
E1298	UE	DMEPOS	Wheelchair spec seat depth/w	Always requires Prior Authorization.
E1310	NU	DMEPOS	Whirlpool non-portable	DME > \$500
E1310	RR	DMEPOS	Whirlpool non-portable	DME > \$500
E1310	UE	DMEPOS	Whirlpool non-portable	DME > \$500
E1353		DMEPOS	Oxygen supplies regulator	DME > \$500
E1355		DMEPOS	Oxygen supplies stand/rack	DME > \$500
E1372	NU	DMEPOS	Oxy suppl heater for nebuliz	DME > \$500
E1372	RR	DMEPOS	Oxy suppl heater for nebuliz	DME > \$500
E1372	UE	DMEPOS	Oxy suppl heater for nebuliz	DME > \$500
E1390	RR	DMEPOS	Oxygen concentrator	Always requires Prior Authorization.
E1391	RR	DMEPOS	Oxygen concentrator, dual	Always requires Prior Authorization.
E1392	RR	DMEPOS	Portable oxygen concentrator	Always requires Prior Authorization.
E1405	RR	DMEPOS	O2/water vapor enrich w/heat	DME > \$500
E1406	RR	DMEPOS	O2/water vapor enrich w/o he	DME > \$500
E1700	RR	DMEPOS	Jaw motion rehab system	DME > \$500
E1701		DMEPOS	Repl cushions for jaw motion	DME > \$500
E1702		DMEPOS	Repl measr scales jaw motion	DME > \$500
E1800	RR	DMEPOS	Adjust elbow ext/flex device	DME > \$500
E1801	RR	DMEPOS	Sps elbow device	DME > \$500
E1802	RR	DMEPOS	Adjst forearm pro/sup device	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E1805	RR	DMEPOS	Adjust wrist ext/flex device	DME > \$500
E1806	RR	DMEPOS	Sps wrist device	DME > \$500
E1810	RR	DMEPOS	Adjust knee ext/flex device	DME > \$500
E1811	RR	DMEPOS	Sps knee device	DME > \$500
E1812	RR	DMEPOS	Knee ext/flex w act res ctrl	DME > \$500
E1815	RR	DMEPOS	Adjust ankle ext/flex device	DME > \$500
E1816	RR	DMEPOS	Sps ankle device	DME > \$500
E1818	RR	DMEPOS	Sps forearm device	DME > \$500
E1820	NU	DMEPOS	Soft interface material	DME > \$500
E1820	RR	DMEPOS	Soft interface material	DME > \$500
E1820	UE	DMEPOS	Soft interface material	DME > \$500
E1821	NU	DMEPOS	Replacement interface spsd	DME > \$500
E1821	RR	DMEPOS	Replacement interface spsd	DME > \$500
E1821	UE	DMEPOS	Replacement interface spsd	DME > \$500
E1825	RR	DMEPOS	Adjust finger ext/flex devc	DME > \$500
E1830	RR	DMEPOS	Adjust toe ext/flex device	DME > \$500
E1831	RR	DMEPOS	Static str toe dev ext/flex	DME > \$500
E1840	RR	DMEPOS	Adj shoulder ext/flex device	DME > \$500
E1841	RR	DMEPOS	Static str shldr dev rom adj	DME > \$500
E2000	RR	DMEPOS	Gastric suction pump hme mdl	DME > \$500
E2100	NU	DMEPOS	Bld glucose monitor w voice	DME > \$500
E2100	RR	DMEPOS	Bld glucose monitor w voice	DME > \$500
E2100	UE	DMEPOS	Bld glucose monitor w voice	DME > \$500
E2101	NU	DMEPOS	Bld glucose monitor w lance	DME > \$500
E2101	RR	DMEPOS	Bld glucose monitor w lance	DME > \$500
E2101	UE	DMEPOS	Bld glucose monitor w lance	DME > \$500
E2120	RR	DMEPOS	Pulse gen sys tx endolymp fl	DME > \$500
E2201	NU	DMEPOS	Man w/ch acc seat w>=20"<24"	DME > \$500
E2201	RR	DMEPOS	Man w/ch acc seat w>=20"<24"	DME > \$500
E2201	UE	DMEPOS	Man w/ch acc seat w>=20"<24"	DME > \$500
E2202	NU	DMEPOS	Seat width 24-27 in	DME > \$500
E2202	RR	DMEPOS	Seat width 24-27 in	DME > \$500
E2202	UE	DMEPOS	Seat width 24-27 in	DME > \$500
E2203	NU	DMEPOS	Frame depth less than 22 in	DME > \$500
E2203	RR	DMEPOS	Frame depth less than 22 in	DME > \$500
E2203	UE	DMEPOS	Frame depth less than 22 in	DME > \$500
E2204	NU	DMEPOS	Frame depth 22 to 25 in	DME > \$500
E2204	RR	DMEPOS	Frame depth 22 to 25 in	DME > \$500
E2204	UE	DMEPOS	Frame depth 22 to 25 in	DME > \$500
E2205	NU	DMEPOS	Manual wc accessory, handrim	DME > \$500
E2205	RR	DMEPOS	Manual wc accessory, handrim	DME > \$500
E2205	UE	DMEPOS	Manual wc accessory, handrim	DME > \$500
E2206	NU	DMEPOS	Man wc whl lock comp repl ea	DME > \$500
E2206	RR	DMEPOS	Man wc whl lock comp repl ea	DME > \$500
E2206	UE	DMEPOS	Man wc whl lock comp repl ea	DME > \$500
E2207	NU	DMEPOS	Crutch and cane holder	DME > \$500
E2207	RR	DMEPOS	Crutch and cane holder	DME > \$500
E2207	UE	DMEPOS	Crutch and cane holder	DME > \$500
E2208	NU	DMEPOS	Cylinder tank carrier	DME > \$500
E2208	RR	DMEPOS	Cylinder tank carrier	DME > \$500
E2208	UE	DMEPOS	Cylinder tank carrier	DME > \$500
E2209	NU	DMEPOS	Arm trough each	DME > \$500
E2209	RR	DMEPOS	Arm trough each	DME > \$500
E2209	UE	DMEPOS	Arm trough each	DME > \$500



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Code	Mod	Procedures & Services	Description	Rule Description
E2210	NU	DMEPOS	Wheelchair bearings	DME > \$500
E2210	RR	DMEPOS	Wheelchair bearings	DME > \$500
E2210	UE	DMEPOS	Wheelchair bearings	DME > \$500
E2211	NU	DMEPOS	Pneumatic propulsion tire	DME > \$500
E2211	RR	DMEPOS	Pneumatic propulsion tire	DME > \$500
E2211	UE	DMEPOS	Pneumatic propulsion tire	DME > \$500
E2212	NU	DMEPOS	Pneumatic prop tire tube	DME > \$500
E2212	RR	DMEPOS	Pneumatic prop tire tube	DME > \$500
E2212	UE	DMEPOS	Pneumatic prop tire tube	DME > \$500
E2213	NU	DMEPOS	Pneumatic prop tire insert	DME > \$500
E2213	RR	DMEPOS	Pneumatic prop tire insert	DME > \$500
E2213	UE	DMEPOS	Pneumatic prop tire insert	DME > \$500
E2214	NU	DMEPOS	Pneumatic caster tire each	DME > \$500
E2214	RR	DMEPOS	Pneumatic caster tire each	DME > \$500
E2214	UE	DMEPOS	Pneumatic caster tire each	DME > \$500
E2215	NU	DMEPOS	Pneumatic caster tire tube	DME > \$500
E2215	RR	DMEPOS	Pneumatic caster tire tube	DME > \$500
E2215	UE	DMEPOS	Pneumatic caster tire tube	DME > \$500
E2216	NU	DMEPOS	Foam filled propulsion tire	DME > \$500
E2216	RR	DMEPOS	Foam filled propulsion tire	DME > \$500
E2216	UE	DMEPOS	Foam filled propulsion tire	DME > \$500
E2217	NU	DMEPOS	Foam filled caster tire each	DME > \$500
E2217	RR	DMEPOS	Foam filled caster tire each	DME > \$500
E2217	UE	DMEPOS	Foam filled caster tire each	DME > \$500
E2218	NU	DMEPOS	Foam propulsion tire each	DME > \$500
E2218	RR	DMEPOS	Foam propulsion tire each	DME > \$500
E2218	UE	DMEPOS	Foam propulsion tire each	DME > \$500
E2219	NU	DMEPOS	Foam caster tire any size ea	DME > \$500
E2219	RR	DMEPOS	Foam caster tire any size ea	DME > \$500
E2219	UE	DMEPOS	Foam caster tire any size ea	DME > \$500
E2220	NU	DMEPOS	Solid propuls tire, repl, ea	DME > \$500
E2220	RR	DMEPOS	Solid propuls tire, repl, ea	DME > \$500
E2220	UE	DMEPOS	Solid propuls tire, repl, ea	DME > \$500
E2221	NU	DMEPOS	Solid caster tire repl, each	DME > \$500
E2221	RR	DMEPOS	Solid caster tire repl, each	DME > \$500
E2221	UE	DMEPOS	Solid caster tire repl, each	DME > \$500
E2222	NU	DMEPOS	Solid caster integ whl, repl	DME > \$500
E2222	RR	DMEPOS	Solid caster integ whl, repl	DME > \$500
E2222	UE	DMEPOS	Solid caster integ whl, repl	DME > \$500
E2224	NU	DMEPOS	Propulsion whl excl tire rep	DME > \$500
E2224	RR	DMEPOS	Propulsion whl excl tire rep	DME > \$500
E2224	UE	DMEPOS	Propulsion whl excl tire rep	DME > \$500
E2225	NU	DMEPOS	Caster wheel excludes tire	DME > \$500
E2225	RR	DMEPOS	Caster wheel excludes tire	DME > \$500
E2225	UE	DMEPOS	Caster wheel excludes tire	DME > \$500
E2226	NU	DMEPOS	Caster fork replacement only	DME > \$500
E2226	RR	DMEPOS	Caster fork replacement only	DME > \$500
E2226	UE	DMEPOS	Caster fork replacement only	DME > \$500
E2227	RR	DMEPOS	Gear reduction drive wheel	DME > \$500
E2228	RR	DMEPOS	Mwc acc, wheelchair brake	DME > \$500
E2231	NU	DMEPOS	Solid seat support base	DME > \$500
E2231	RR	DMEPOS	Solid seat support base	DME > \$500
E2231	UE	DMEPOS	Solid seat support base	DME > \$500
E2310	RR	DMEPOS	Electro connect btw control	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E2311	RR	DMEPOS	Electro connect btw 2 sys	DME > \$500
E2312	RR	DMEPOS	Mini-prop remote joystick	DME > \$500
E2313	RR	DMEPOS	Pwc harness, expand control	DME > \$500
E2321	RR	DMEPOS	Hand interface joystick	DME > \$500
E2322	RR	DMEPOS	Mult mech switches	DME > \$500
E2323	NU	DMEPOS	Special joystick handle	DME > \$500
E2323	RR	DMEPOS	Special joystick handle	DME > \$500
E2323	UE	DMEPOS	Special joystick handle	DME > \$500
E2324	NU	DMEPOS	Chin cup interface	DME > \$500
E2324	RR	DMEPOS	Chin cup interface	DME > \$500
E2324	UE	DMEPOS	Chin cup interface	DME > \$500
E2325	RR	DMEPOS	Sip and puff interface	DME > \$500
E2326	RR	DMEPOS	Breath tube kit	DME > \$500
E2327	RR	DMEPOS	Head control interface mech	DME > \$500
E2328	RR	DMEPOS	Head/extremity control inter	DME > \$500
E2329	RR	DMEPOS	Head control nonproportional	DME > \$500
E2330	RR	DMEPOS	Head control proximity switc	DME > \$500
E2340	NU	DMEPOS	W/c wdth 20-23 in seat frame	DME > \$500
E2340	RR	DMEPOS	W/c wdth 20-23 in seat frame	DME > \$500
E2340	UE	DMEPOS	W/c wdth 20-23 in seat frame	DME > \$500
E2341	NU	DMEPOS	W/c wdth 24-27 in seat frame	DME > \$500
E2341	RR	DMEPOS	W/c wdth 24-27 in seat frame	DME > \$500
E2341	UE	DMEPOS	W/c wdth 24-27 in seat frame	DME > \$500
E2342	NU	DMEPOS	W/c dpth 20-21 in seat frame	DME > \$500
E2342	RR	DMEPOS	W/c dpth 20-21 in seat frame	DME > \$500
E2342	UE	DMEPOS	W/c dpth 20-21 in seat frame	DME > \$500
E2343	NU	DMEPOS	W/c dpth 22-25 in seat frame	DME > \$500
E2343	RR	DMEPOS	W/c dpth 22-25 in seat frame	DME > \$500
E2343	UE	DMEPOS	W/c dpth 22-25 in seat frame	DME > \$500
E2351	NU	DMEPOS	Electronic sgd interface	DME > \$500
E2351	RR	DMEPOS	Electronic sgd interface	DME > \$500
E2351	UE	DMEPOS	Electronic sgd interface	DME > \$500
E2359	NU	DMEPOS	Gr34 sealed leadacid battery	DME > \$500
E2359	RR	DMEPOS	Gr34 sealed leadacid battery	DME > \$500
E2359	UE	DMEPOS	Gr34 sealed leadacid battery	DME > \$500
E2360	NU	DMEPOS	22nf nonsealed leadacid	DME > \$500
E2360	RR	DMEPOS	22nf nonsealed leadacid	DME > \$500
E2360	UE	DMEPOS	22nf nonsealed leadacid	DME > \$500
E2361	NU	DMEPOS	22nf sealed leadacid battery	DME > \$500
E2361	RR	DMEPOS	22nf sealed leadacid battery	DME > \$500
E2361	UE	DMEPOS	22nf sealed leadacid battery	DME > \$500
E2362	NU	DMEPOS	Gr24 nonsealed leadacid	DME > \$500
E2362	RR	DMEPOS	Gr24 nonsealed leadacid	DME > \$500
E2362	UE	DMEPOS	Gr24 nonsealed leadacid	DME > \$500
E2363	NU	DMEPOS	Gr24 sealed leadacid battery	DME > \$500
E2363	RR	DMEPOS	Gr24 sealed leadacid battery	DME > \$500
E2363	UE	DMEPOS	Gr24 sealed leadacid battery	DME > \$500
E2364	NU	DMEPOS	U1nonsealed leadacid battery	DME > \$500
E2364	RR	DMEPOS	U1nonsealed leadacid battery	DME > \$500
E2364	UE	DMEPOS	U1nonsealed leadacid battery	DME > \$500
E2365	NU	DMEPOS	U1 sealed leadacid battery	DME > \$500
E2365	RR	DMEPOS	U1 sealed leadacid battery	DME > \$500
E2365	UE	DMEPOS	U1 sealed leadacid battery	DME > \$500
E2366	NU	DMEPOS	Battery charger, single mode	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E2366	RR	DMEPOS	Battery charger, single mode	DME > \$500
E2366	UE	DMEPOS	Battery charger, single mode	DME > \$500
E2367	NU	DMEPOS	Battery charger, dual mode	DME > \$500
E2367	RR	DMEPOS	Battery charger, dual mode	DME > \$500
E2367	UE	DMEPOS	Battery charger, dual mode	DME > \$500
E2368	RR	DMEPOS	Pwr wc drivewheel motor repl	DME > \$500
E2369	RR	DMEPOS	Pwr wc drivewheel gear repl	DME > \$500
E2370	RR	DMEPOS	Pwr wc dr wh motor/gear comb	DME > \$500
E2371	NU	DMEPOS	Gr27 sealed leadacid battery	DME > \$500
E2371	RR	DMEPOS	Gr27 sealed leadacid battery	DME > \$500
E2371	UE	DMEPOS	Gr27 sealed leadacid battery	DME > \$500
E2372	NU	DMEPOS	Gr27 non-sealed leadacid	DME > \$500
E2372	RR	DMEPOS	Gr27 non-sealed leadacid	DME > \$500
E2372	UE	DMEPOS	Gr27 non-sealed leadacid	DME > \$500
E2373	RR	DMEPOS	Hand/chin ctrl spec joystick	DME > \$500
E2374	RR	DMEPOS	Hand/chin ctrl std joystick	DME > \$500
E2375	RR	DMEPOS	Non-expandable controller	DME > \$500
E2376	RR	DMEPOS	Expandable controller, repl	DME > \$500
E2377	RR	DMEPOS	Expandable controller, initl	DME > \$500
E2378	RR	DMEPOS	Pw actuator replacement	DME > \$500
E2381	NU	DMEPOS	Pneum drive wheel tire	DME > \$500
E2381	RR	DMEPOS	Pneum drive wheel tire	DME > \$500
E2381	UE	DMEPOS	Pneum drive wheel tire	DME > \$500
E2382	NU	DMEPOS	Tube, pneum wheel drive tire	DME > \$500
E2382	RR	DMEPOS	Tube, pneum wheel drive tire	DME > \$500
E2382	UE	DMEPOS	Tube, pneum wheel drive tire	DME > \$500
E2383	NU	DMEPOS	Insert, pneum wheel drive	DME > \$500
E2383	RR	DMEPOS	Insert, pneum wheel drive	DME > \$500
E2383	UE	DMEPOS	Insert, pneum wheel drive	DME > \$500
E2384	NU	DMEPOS	Pneumatic caster tire	DME > \$500
E2384	RR	DMEPOS	Pneumatic caster tire	DME > \$500
E2384	UE	DMEPOS	Pneumatic caster tire	DME > \$500
E2385	NU	DMEPOS	Tube, pneumatic caster tire	DME > \$500
E2385	RR	DMEPOS	Tube, pneumatic caster tire	DME > \$500
E2385	UE	DMEPOS	Tube, pneumatic caster tire	DME > \$500
E2386	NU	DMEPOS	Foam filled drive wheel tire	DME > \$500
E2386	RR	DMEPOS	Foam filled drive wheel tire	DME > \$500
E2386	UE	DMEPOS	Foam filled drive wheel tire	DME > \$500
E2387	NU	DMEPOS	Foam filled caster tire	DME > \$500
E2387	RR	DMEPOS	Foam filled caster tire	DME > \$500
E2387	UE	DMEPOS	Foam filled caster tire	DME > \$500
E2388	NU	DMEPOS	Foam drive wheel tire	DME > \$500
E2388	RR	DMEPOS	Foam drive wheel tire	DME > \$500
E2388	UE	DMEPOS	Foam drive wheel tire	DME > \$500
E2389	NU	DMEPOS	Foam caster tire	DME > \$500
E2389	RR	DMEPOS	Foam caster tire	DME > \$500
E2389	UE	DMEPOS	Foam caster tire	DME > \$500
E2390	NU	DMEPOS	Solid drive wheel tire	DME > \$500
E2390	RR	DMEPOS	Solid drive wheel tire	DME > \$500
E2390	UE	DMEPOS	Solid drive wheel tire	DME > \$500
E2391	NU	DMEPOS	Solid caster tire	DME > \$500
E2391	RR	DMEPOS	Solid caster tire	DME > \$500
E2391	UE	DMEPOS	Solid caster tire	DME > \$500
E2392	NU	DMEPOS	Solid caster tire, integrate	DME > \$500

## 2018 HealthTeam Advantage Prior Authorization Code List



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Code	Mod	Procedures & Services	Description	Rule Description
E2392	RR	DMEPOS	Solid caster tire, integrate	DME > \$500
E2392	UE	DMEPOS	Solid caster tire, integrate	DME > \$500
E2394	NU	DMEPOS	Drive wheel excludes tire	DME > \$500
E2394	RR	DMEPOS	Drive wheel excludes tire	DME > \$500
E2394	UE	DMEPOS	Drive wheel excludes tire	DME > \$500
E2395	NU	DMEPOS	Caster wheel excludes tire	DME > \$500
E2395	RR	DMEPOS	Caster wheel excludes tire	DME > \$500
E2395	UE	DMEPOS	Caster wheel excludes tire	DME > \$500
E2396	NU	DMEPOS	Caster fork	DME > \$500
E2396	RR	DMEPOS	Caster fork	DME > \$500
E2396	UE	DMEPOS	Caster fork	DME > \$500
E2397	NU	DMEPOS	Pwc acc, lith-based battery	DME > \$500
E2397	RR	DMEPOS	Pwc acc, lith-based battery	DME > \$500
E2397	UE	DMEPOS	Pwc acc, lith-based battery	DME > \$500
E2402	RR	DMEPOS	Neg press wound therapy pump	DME > \$500
E2500	NU	DMEPOS	Sgd digitized pre-rec <=8min	DME > \$500
E2500	RR	DMEPOS	Sgd digitized pre-rec <=8min	DME > \$500
E2500	UE	DMEPOS	Sgd digitized pre-rec <=8min	DME > \$500
E2502	NU	DMEPOS	Sgd prerec msg >8min <=20min	DME > \$500
E2502	RR	DMEPOS	Sgd prerec msg >8min <=20min	DME > \$500
E2502	UE	DMEPOS	Sgd prerec msg >8min <=20min	DME > \$500
E2504	NU	DMEPOS	Sgd prerec msg>20min <=40min	DME > \$500
E2504	RR	DMEPOS	Sgd prerec msg>20min <=40min	DME > \$500
E2504	UE	DMEPOS	Sgd prerec msg>20min <=40min	DME > \$500
E2506	NU	DMEPOS	Sgd prerec msg > 40 min	DME > \$500
E2506	RR	DMEPOS	Sgd prerec msg > 40 min	DME > \$500
E2506	UE	DMEPOS	Sgd prerec msg > 40 min	DME > \$500
E2508	NU	DMEPOS	Sgd spelling phys contact	DME > \$500
E2508	RR	DMEPOS	Sgd spelling phys contact	DME > \$500
E2508	UE	DMEPOS	Sgd spelling phys contact	DME > \$500
E2510	NU	DMEPOS	Sgd w multi methods msg/accs	DME > \$500
E2510	RR	DMEPOS	Sgd w multi methods msg/accs	DME > \$500
E2510	UE	DMEPOS	Sgd w multi methods msg/accs	DME > \$500
E2511	NU	DMEPOS	Sgd sftwre prgrm for pc/pda	DME > \$500
E2511	RR	DMEPOS	Sgd sftwre prgrm for pc/pda	DME > \$500
E2511	UE	DMEPOS	Sgd sftwre prgrm for pc/pda	DME > \$500
E2512	NU	DMEPOS	Sgd accessory, mounting sys	DME > \$500
E2512	RR	DMEPOS	Sgd accessory, mounting sys	DME > \$500
E2512	UE	DMEPOS	Sgd accessory, mounting sys	DME > \$500
E2601	NU	DMEPOS	Gen w/c cushion wdth < 22 in	DME > \$500
E2601	RR	DMEPOS	Gen w/c cushion wdth < 22 in	DME > \$500
E2601	UE	DMEPOS	Gen w/c cushion wdth < 22 in	DME > \$500
E2602	NU	DMEPOS	Gen w/c cushion wdth >=22 in	DME > \$500
E2602	RR	DMEPOS	Gen w/c cushion wdth >=22 in	DME > \$500
E2602	UE	DMEPOS	Gen w/c cushion wdth >=22 in	DME > \$500
E2603	NU	DMEPOS	Skin protect wc cus wd <22in	DME > \$500
E2603	RR	DMEPOS	Skin protect wc cus wd <22in	DME > \$500
E2603	UE	DMEPOS	Skin protect wc cus wd <22in	DME > \$500
E2604	NU	DMEPOS	Skin protect wc cus wd>=22in	DME > \$500
E2604	RR	DMEPOS	Skin protect wc cus wd>=22in	DME > \$500
E2604	UE	DMEPOS	Skin protect wc cus wd>=22in	DME > \$500
E2605	NU	DMEPOS	Position wc cush wdth <22 in	DME > \$500
E2605	RR	DMEPOS	Position wc cush wdth <22 in	DME > \$500
E2605	UE	DMEPOS	Position wc cush wdth <22 in	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E2606	NU	DMEPOS	Position wc cush wdth>=22 in	DME > \$500
E2606	RR	DMEPOS	Position wc cush wdth>=22 in	DME > \$500
E2606	UE	DMEPOS	Position wc cush wdth>=22 in	DME > \$500
E2607	NU	DMEPOS	Skin pro/pos wc cus wd <22in	DME > \$500
E2607	RR	DMEPOS	Skin pro/pos wc cus wd <22in	DME > \$500
E2607	UE	DMEPOS	Skin pro/pos wc cus wd <22in	DME > \$500
E2608	NU	DMEPOS	Skin pro/pos wc cus wd>=22in	DME > \$500
E2608	RR	DMEPOS	Skin pro/pos wc cus wd>=22in	DME > \$500
E2608	UE	DMEPOS	Skin pro/pos wc cus wd>=22in	DME > \$500
E2611	NU	DMEPOS	Gen use back cush wdth <22in	DME > \$500
E2611	RR	DMEPOS	Gen use back cush wdth <22in	DME > \$500
E2611	UE	DMEPOS	Gen use back cush wdth <22in	DME > \$500
E2612	NU	DMEPOS	Gen use back cush wdth>=22in	DME > \$500
E2612	RR	DMEPOS	Gen use back cush wdth>=22in	DME > \$500
E2612	UE	DMEPOS	Gen use back cush wdth>=22in	DME > \$500
E2613	NU	DMEPOS	Position back cush wd <22in	DME > \$500
E2613	RR	DMEPOS	Position back cush wd <22in	DME > \$500
E2613	UE	DMEPOS	Position back cush wd <22in	DME > \$500
E2614	NU	DMEPOS	Position back cush wd>=22in	DME > \$500
E2614	RR	DMEPOS	Position back cush wd>=22in	DME > \$500
E2614	UE	DMEPOS	Position back cush wd>=22in	DME > \$500
E2615	NU	DMEPOS	Pos back post/lat wdth <22in	DME > \$500
E2615	RR	DMEPOS	Pos back post/lat wdth <22in	DME > \$500
E2615	UE	DMEPOS	Pos back post/lat wdth <22in	DME > \$500
E2616	NU	DMEPOS	Pos back post/lat wdth>=22in	DME > \$500
E2616	RR	DMEPOS	Pos back post/lat wdth>=22in	DME > \$500
E2616	UE	DMEPOS	Pos back post/lat wdth>=22in	DME > \$500
E2619	NU	DMEPOS	Replace cover w/c seat cush	DME > \$500
E2619	RR	DMEPOS	Replace cover w/c seat cush	DME > \$500
E2619	UE	DMEPOS	Replace cover w/c seat cush	DME > \$500
E2620	NU	DMEPOS	Wc planar back cush wd <22in	DME > \$500
E2620	RR	DMEPOS	Wc planar back cush wd <22in	DME > \$500
E2620	UE	DMEPOS	Wc planar back cush wd <22in	DME > \$500
E2621	NU	DMEPOS	Wc planar back cush wd>=22in	DME > \$500
E2621	RR	DMEPOS	Wc planar back cush wd>=22in	DME > \$500
E2621	UE	DMEPOS	Wc planar back cush wd>=22in	DME > \$500
E2622	NU	DMEPOS	Adj skin pro w/c cus wd<22in	DME > \$500
E2622	RR	DMEPOS	Adj skin pro w/c cus wd<22in	DME > \$500
E2622	UE	DMEPOS	Adj skin pro w/c cus wd<22in	DME > \$500
E2623	NU	DMEPOS	Adj skin pro wc cus wd>=22in	DME > \$500
E2623	RR	DMEPOS	Adj skin pro wc cus wd>=22in	DME > \$500
E2623	UE	DMEPOS	Adj skin pro wc cus wd>=22in	DME > \$500
E2624	NU	DMEPOS	Adj skin pro/pos cus<22in	DME > \$500
E2624	RR	DMEPOS	Adj skin pro/pos cus<22in	DME > \$500
E2624	UE	DMEPOS	Adj skin pro/pos cus<22in	DME > \$500
E2625	NU	DMEPOS	Adj skin pro/pos wc cus>=22	DME > \$500
E2625	RR	DMEPOS	Adj skin pro/pos wc cus>=22	DME > \$500
E2625	UE	DMEPOS	Adj skin pro/pos wc cus>=22	DME > \$500
E2626	NU	DMEPOS	Seo mobile arm sup att to wc	DME > \$500
E2626	RR	DMEPOS	Seo mobile arm sup att to wc	DME > \$500
E2626	UE	DMEPOS	Seo mobile arm sup att to wc	DME > \$500
E2627	NU	DMEPOS	Arm supp att to wc rancho ty	DME > \$500
E2627	RR	DMEPOS	Arm supp att to wc rancho ty	DME > \$500
E2627	UE	DMEPOS	Arm supp att to wc rancho ty	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
E2628	NU	DMEPOS	Mobile arm supports reclinin	DME > \$500
E2628	RR	DMEPOS	Mobile arm supports reclinin	DME > \$500
E2628	UE	DMEPOS	Mobile arm supports reclinin	DME > \$500
E2629	NU	DMEPOS	Friction dampening arm supp	DME > \$500
E2629	RR	DMEPOS	Friction dampening arm supp	DME > \$500
E2629	UE	DMEPOS	Friction dampening arm supp	DME > \$500
E2630	NU	DMEPOS	Monosuspension arm/hand supp	DME > \$500
E2630	RR	DMEPOS	Monosuspension arm/hand supp	DME > \$500
E2630	UE	DMEPOS	Monosuspension arm/hand supp	DME > \$500
E2631	NU	DMEPOS	Elevat proximal arm support	DME > \$500
E2631	RR	DMEPOS	Elevat proximal arm support	DME > \$500
E2631	UE	DMEPOS	Elevat proximal arm support	DME > \$500
E2632	NU	DMEPOS	Offset/lat rocker arm w/ela	DME > \$500
E2632	RR	DMEPOS	Offset/lat rocker arm w/ela	DME > \$500
E2632	UE	DMEPOS	Offset/lat rocker arm w/ela	DME > \$500
E2633	NU	DMEPOS	Mobile arm support supinator	DME > \$500
E2633	RR	DMEPOS	Mobile arm support supinator	DME > \$500
E2633	UE	DMEPOS	Mobile arm support supinator	DME > \$500
G0151		Home Health Care Services	Hhcp-serv of PT,ea 15 min	
G0152		Home Health Care Services	Hhcp-serv of OT,ea 15 min	
G0153		Home Health Care Services	Hhcp-svs of S/L path,ea 15mn	
G0154		Home Health Care Services	Hhcp-svs of RN,ea 15 min	
G0155		Home Health Care Services	Hhcp-svs of CSW,ea 15 min	
G0156		Home Health Care Services	Hhcp-svs of aide,ea 15 min	
G0157		Home Health Care Services	Hhc PT assistant ea 15	
G0158		Home Health Care Services	Hhc OT assistant ea 15	
G0159		Home Health Care Services	Hhc PT maint ea 15 min	
G0161		Home Health Care - Non-nutritional	Hhc S/L path ea 15 min	
G0163		Home Health Care Services	Hhc LPN/RN obs/asses ea 15	
G0164		Home Health Care Services	Hhc lis nurse train ea 15	
G0173		Therapeutic Radiology Services	Linear acc stereo radsur com	
G0219		PET	PET img wholbod melano nonco	
G0235		Radiology	PET not otherwise specified	
G0237		Home Health Care - Non-nutritional	Therapeutic procd strg endur	
G0251		Therapeutic Radiology Services	Linear acc based stero radio	
G0252		Radiology	PET imaging initial dx	
G0277		Hyperbaric Therapy	Hbot, full body chamber, 30m	
G0278		Angiograms	Iliac art angio,cardiac cath	
G0288		Angiograms	Recon, cta for surg plan	
G0297		Radiology	Ldct for lung ca screen	
G0299		Home Health Care Services	Hhs/hospice of RN ea 15 min	
G0300		Home Health Care Services	Hhs/hospice of LPN ea 15 min	
G0339		Therapeutic Radiology Services	Robot lin-radsurg com, first	
G0340		Therapeutic Radiology Services	Robt lin-radsurg fractx 2-5	
G0341		Transplant Procedures	Percutaneous islet celltrans	Only Inpatient
G0342		Transplant Procedures	Laparoscopy islet cell trans	Only Inpatient
G0343		Transplant Procedures	Laparotomy islet cell transp	Only Inpatient
G0412		Orthopedic Procedures	Open tx iliac spine uni/bil	Only Inpatient
G0414		Orthopedic Procedures	Pelvic ring fx treat int fix	Only Inpatient
G0415		Orthopedic Procedures	Open tx post pelvic fxcture	Only Inpatient
G0454		Home Health Care - Non-nutritional	MD document visit by npp	
G6002		Radiation Oncology	Stereoscopic x-ray guidance	
G6003		Radiation Oncology	Radiation treatment delivery	
G6004		Radiation Oncology	Radiation treatment delivery	

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Code	Mod	Procedures & Services	Description	Rule Description
G6005		Radiation Oncology	Radiation treatment delivery	
G6006		Radiation Oncology	Radiation treatment delivery	
G6007		Radiation Oncology	Radiation treatment delivery	
G6008		Radiation Oncology	Radiation treatment delivery	
G6009		Radiation Oncology	Radiation treatment delivery	
G6010		Radiation Oncology	Radiation treatment delivery	
G6011		Radiation Oncology	Radiation treatment delivery	
G6012		Radiation Oncology	Radiation treatment delivery	
G6013		Radiation Oncology	Radiation treatment delivery	
G6014		Radiation Oncology	Radiation treatment delivery	
G6015		Therapeutic Radiology Services	Radiation tx delivery imrt	
G6016		Therapeutic Radiology Services	Delivery comp imrt	
G6017		Therapeutic Radiology Services	Intrafraction track motion	
J3590		Unclassified Biologics/Drugs	Unclassified biologics	Always requires Prior Authorization.
K0001	RR	DMEPOS	Standard wheelchair	DME > \$500
K0002	RR	DMEPOS	Stnd hemi (low seat) whlchr	DME > \$500
K0003	RR	DMEPOS	Lightweight wheelchair	DME > \$500
K0004	RR	DMEPOS	High strength ltwt whlchr	DME > \$500
K0005	NU	DMEPOS	Ultralightweight wheelchair	Always requires Prior Authorization.
K0005	RR	DMEPOS	Ultralightweight wheelchair	Always requires Prior Authorization.
K0005	UE	DMEPOS	Ultralightweight wheelchair	Always requires Prior Authorization.
K0006	RR	DMEPOS	Heavy duty wheelchair	Always requires Prior Authorization.
K0007	RR	DMEPOS	Extra heavy duty wheelchair	Always requires Prior Authorization.
K0009	RR	DMEPOS	Other manual wheelchair/base	DME > \$500
K0010	RR	DMEPOS	Stnd wt frame power whlchr	Always requires Prior Authorization.
K0011	RR	DMEPOS	Stnd wt pwr whlchr w control	Always requires Prior Authorization.
K0012	RR	DMEPOS	Ltwt portbl power whlchr	Always requires Prior Authorization.
K0015	RR	DMEPOS	Detach non-adj ht armrst rep	DME > \$500
K0017	NU	DMEPOS	Detach adjust armrest base	DME > \$500
K0017	RR	DMEPOS	Detach adjust armrest base	DME > \$500
K0017	UE	DMEPOS	Detach adjust armrest base	DME > \$500
K0018	NU	DMEPOS	Detach adjust armrst upper	DME > \$500
K0018	RR	DMEPOS	Detach adjust armrst upper	DME > \$500
K0018	UE	DMEPOS	Detach adjust armrst upper	DME > \$500
K0019	NU	DMEPOS	Arm pad repl, each	DME > \$500
K0019	RR	DMEPOS	Arm pad repl, each	DME > \$500
K0019	UE	DMEPOS	Arm pad repl, each	DME > \$500
K0020	NU	DMEPOS	Fixed adjust armrest pair	DME > \$500
K0020	RR	DMEPOS	Fixed adjust armrest pair	DME > \$500
K0020	UE	DMEPOS	Fixed adjust armrest pair	DME > \$500
K0037	NU	DMEPOS	Hi mount flip-up ftrest repl	DME > \$500
K0037	RR	DMEPOS	Hi mount flip-up ftrest repl	DME > \$500
K0037	UE	DMEPOS	Hi mount flip-up ftrest repl	DME > \$500
K0038	NU	DMEPOS	Leg strap each	DME > \$500
K0038	RR	DMEPOS	Leg strap each	DME > \$500
K0038	UE	DMEPOS	Leg strap each	DME > \$500
K0039	NU	DMEPOS	Leg strap h style each	DME > \$500
K0039	RR	DMEPOS	Leg strap h style each	DME > \$500
K0039	UE	DMEPOS	Leg strap h style each	DME > \$500
K0040	NU	DMEPOS	Adjustable angle footplate	DME > \$500
K0040	RR	DMEPOS	Adjustable angle footplate	DME > \$500
K0040	UE	DMEPOS	Adjustable angle footplate	DME > \$500
K0041	NU	DMEPOS	Large size footplate each	DME > \$500
K0041	RR	DMEPOS	Large size footplate each	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
K0041	UE	DMEPOS	Large size footplate each	DME > \$500
K0042	NU	DMEPOS	Standard size ftplate rep ea	DME > \$500
K0042	RR	DMEPOS	Standard size ftplate rep ea	DME > \$500
K0042	UE	DMEPOS	Standard size ftplate rep ea	DME > \$500
K0043	NU	DMEPOS	Ftrst lowr exten tube rep ea	DME > \$500
K0043	RR	DMEPOS	Ftrst lowr exten tube rep ea	DME > \$500
K0043	UE	DMEPOS	Ftrst lowr exten tube rep ea	DME > \$500
K0044	NU	DMEPOS	Ftrst upr hanger brac rep ea	DME > \$500
K0044	RR	DMEPOS	Ftrst upr hanger brac rep ea	DME > \$500
K0044	UE	DMEPOS	Ftrst upr hanger brac rep ea	DME > \$500
K0045	NU	DMEPOS	Ftrst compl assembly repl ea	DME > \$500
K0045	RR	DMEPOS	Ftrst compl assembly repl ea	DME > \$500
K0045	UE	DMEPOS	Ftrst compl assembly repl ea	DME > \$500
K0046	NU	DMEPOS	Elev lgrst lwr exten repl ea	DME > \$500
K0046	RR	DMEPOS	Elev lgrst lwr exten repl ea	DME > \$500
K0046	UE	DMEPOS	Elev lgrst lwr exten repl ea	DME > \$500
K0047	NU	DMEPOS	Elev legrst upr hangr rep ea	DME > \$500
K0047	RR	DMEPOS	Elev legrst upr hangr rep ea	DME > \$500
K0047	UE	DMEPOS	Elev legrst upr hangr rep ea	DME > \$500
K0050	NU	DMEPOS	Ratchet assembly replacement	DME > \$500
K0050	RR	DMEPOS	Ratchet assembly replacement	DME > \$500
K0050	UE	DMEPOS	Ratchet assembly replacement	DME > \$500
K0051	NU	DMEPOS	Cam rel asm ft/legrst rep ea	DME > \$500
K0051	RR	DMEPOS	Cam rel asm ft/legrst rep ea	DME > \$500
K0051	UE	DMEPOS	Cam rel asm ft/legrst rep ea	DME > \$500
K0052	NU	DMEPOS	Swingaway detach ftrest repl	DME > \$500
K0052	RR	DMEPOS	Swingaway detach ftrest repl	DME > \$500
K0052	UE	DMEPOS	Swingaway detach ftrest repl	DME > \$500
K0053	NU	DMEPOS	Elevate footrest articulate	DME > \$500
K0053	RR	DMEPOS	Elevate footrest articulate	DME > \$500
K0053	UE	DMEPOS	Elevate footrest articulate	DME > \$500
K0056	NU	DMEPOS	Seat ht <17 or >=21 ltwt wc	DME > \$500
K0056	RR	DMEPOS	Seat ht <17 or >=21 ltwt wc	DME > \$500
K0056	UE	DMEPOS	Seat ht <17 or >=21 ltwt wc	DME > \$500
K0065	NU	DMEPOS	Spoke protectors	DME > \$500
K0065	RR	DMEPOS	Spoke protectors	DME > \$500
K0065	UE	DMEPOS	Spoke protectors	DME > \$500
K0069	NU	DMEPOS	Rr whl compl sol tire rep ea	DME > \$500
K0069	RR	DMEPOS	Rr whl compl sol tire rep ea	DME > \$500
K0069	UE	DMEPOS	Rr whl compl sol tire rep ea	DME > \$500
K0070	RR	DMEPOS	Rr whl compl pne tire rep ea	DME > \$500
K0071	NU	DMEPOS	Fr cstr comp pne tire rep ea	DME > \$500
K0071	RR	DMEPOS	Fr cstr comp pne tire rep ea	DME > \$500
K0071	UE	DMEPOS	Fr cstr comp pne tire rep ea	DME > \$500
K0072	NU	DMEPOS	Fr cstr semi-pne tire rep ea	DME > \$500
K0072	RR	DMEPOS	Fr cstr semi-pne tire rep ea	DME > \$500
K0072	UE	DMEPOS	Fr cstr semi-pne tire rep ea	DME > \$500
K0073	NU	DMEPOS	Caster pin lock each	DME > \$500
K0073	RR	DMEPOS	Caster pin lock each	DME > \$500
K0073	UE	DMEPOS	Caster pin lock each	DME > \$500
K0077	NU	DMEPOS	Fr cstr asmb sol tire rep ea	DME > \$500
K0077	RR	DMEPOS	Fr cstr asmb sol tire rep ea	DME > \$500
K0077	UE	DMEPOS	Fr cstr asmb sol tire rep ea	DME > \$500
K0098	NU	DMEPOS	Drive belt for pwc, repl	DME > \$500



## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
K0098	RR	DMEPOS	Drive belt for pwc, repl	DME > \$500
K0098	UE	DMEPOS	Drive belt for pwc, repl	DME > \$500
K0105	NU	DMEPOS	IV hanger	DME > \$500
K0105	RR	DMEPOS	IV hanger	DME > \$500
K0105	UE	DMEPOS	IV hanger	DME > \$500
K0195	RR	DMEPOS	Elevating whlchair leg rests	DME > \$500
K0455	RR	DMEPOS	Pump uninterrupted infusion	Always requires Prior Authorization.
K0552		DMEPOS	Sup/ext non-ins inf pump syr	DME > \$500
K0553		DMEPOS	Ther cgm supply allowance	DME > \$500
K0554	NU	DMEPOS	Ther cgm receiver/monitor	DME > \$500
K0554	RR	DMEPOS	Ther cgm receiver/monitor	DME > \$500
K0554	UE	DMEPOS	Ther cgm receiver/monitor	DME > \$500
K0601	NU	DMEPOS	Repl batt silver oxide 1.5 v	DME > \$500
K0602	NU	DMEPOS	Repl batt silver oxide 3 v	DME > \$500
K0603	NU	DMEPOS	Repl batt alkaline 1.5 v	DME > \$500
K0604	NU	DMEPOS	Repl batt lithium 3.6 v	DME > \$500
K0605	NU	DMEPOS	Repl batt lithium 4.5 v	DME > \$500
K0606	RR	DMEPOS	Aed garment w elec analysis	DME > \$500
K0607	RR	DMEPOS	Repl batt for aed	DME > \$500
K0608	NU	DMEPOS	Repl garment for aed	DME > \$500
K0608	RR	DMEPOS	Repl garment for aed	DME > \$500
K0608	UE	DMEPOS	Repl garment for aed	DME > \$500
K0609	KF	DMEPOS	Repl electrode for aed	DME > \$500
K0609		DMEPOS	Repl electrode for aed	DME > \$500
K0672		DMEPOS	Removable soft interface le	DME > \$500
K0730	RR	DMEPOS	Ctrl dose inh drug deliv sys	DME > \$500
K0733	NU	DMEPOS	12-24hr sealed lead acid	DME > \$500
K0733	RR	DMEPOS	12-24hr sealed lead acid	DME > \$500
K0733	UE	DMEPOS	12-24hr sealed lead acid	DME > \$500
K0738	RR	DMEPOS	Portable gas oxygen system	Always requires Prior Authorization.
K0800	NU	DMEPOS	Pov group 1 std up to 300lbs	Always requires Prior Authorization.
K0800	RR	DMEPOS	Pov group 1 std up to 300lbs	Always requires Prior Authorization.
K0800	UE	DMEPOS	Pov group 1 std up to 300lbs	Always requires Prior Authorization.
K0801	NU	DMEPOS	Pov group 1 hd 301-450 lbs	Always requires Prior Authorization.
K0801	RR	DMEPOS	Pov group 1 hd 301-450 lbs	Always requires Prior Authorization.
K0801	UE	DMEPOS	Pov group 1 hd 301-450 lbs	Always requires Prior Authorization.
K0802	NU	DMEPOS	Pov group 1 vhd 451-600 lbs	Always requires Prior Authorization.
K0802	RR	DMEPOS	Pov group 1 vhd 451-600 lbs	Always requires Prior Authorization.
K0802	UE	DMEPOS	Pov group 1 vhd 451-600 lbs	Always requires Prior Authorization.
K0806	NU	DMEPOS	Pov group 2 std up to 300lbs	Always requires Prior Authorization.
K0806	RR	DMEPOS	Pov group 2 std up to 300lbs	Always requires Prior Authorization.
K0806	UE	DMEPOS	Pov group 2 std up to 300lbs	Always requires Prior Authorization.
K0807	NU	DMEPOS	Pov group 2 hd 301-450 lbs	Always requires Prior Authorization.
K0807	RR	DMEPOS	Pov group 2 hd 301-450 lbs	Always requires Prior Authorization.
K0807	UE	DMEPOS	Pov group 2 hd 301-450 lbs	Always requires Prior Authorization.
K0808	NU	DMEPOS	Pov group 2 vhd 451-600 lbs	Always requires Prior Authorization.
K0808	RR	DMEPOS	Pov group 2 vhd 451-600 lbs	Always requires Prior Authorization.
K0808	UE	DMEPOS	Pov group 2 vhd 451-600 lbs	Always requires Prior Authorization.
K0813	RR	DMEPOS	Pwc gp 1 std port seat/back	Always requires Prior Authorization.
K0814	RR	DMEPOS	Pwc gp 1 std port cap chair	Always requires Prior Authorization.
K0815	RR	DMEPOS	Pwc gp 1 std seat/back	Always requires Prior Authorization.
K0816	RR	DMEPOS	Pwc gp 1 std cap chair	Always requires Prior Authorization.
K0820	RR	DMEPOS	Pwc gp 2 std port seat/back	Always requires Prior Authorization.
K0821	RR	DMEPOS	Pwc gp 2 std port cap chair	Always requires Prior Authorization.

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**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
K0822	RR	DMEPOS	Pwc gp 2 std seat/back	Always requires Prior Authorization.
K0823	RR	DMEPOS	Pwc gp 2 std cap chair	Always requires Prior Authorization.
K0824	RR	DMEPOS	Pwc gp 2 hd seat/back	Always requires Prior Authorization.
K0825	RR	DMEPOS	Pwc gp 2 hd cap chair	Always requires Prior Authorization.
K0826	RR	DMEPOS	Pwc gp 2 vhd seat/back	Always requires Prior Authorization.
K0827	RR	DMEPOS	Pwc gp vhd cap chair	Always requires Prior Authorization.
K0828	RR	DMEPOS	Pwc gp 2 xtra hd seat/back	Always requires Prior Authorization.
K0829	RR	DMEPOS	Pwc gp 2 xtra hd cap chair	Always requires Prior Authorization.
K0835	RR	DMEPOS	Pwc gp2 std sing pow opt s/b	Always requires Prior Authorization.
K0836	RR	DMEPOS	Pwc gp2 std sing pow opt cap	Always requires Prior Authorization.
K0837	RR	DMEPOS	Pwc gp 2 hd sing pow opt s/b	Always requires Prior Authorization.
K0838	RR	DMEPOS	Pwc gp 2 hd sing pow opt cap	Always requires Prior Authorization.
K0839	RR	DMEPOS	Pwc gp2 vhd sing pow opt s/b	Always requires Prior Authorization.
K0840	RR	DMEPOS	Pwc gp2 xhd sing pow opt s/b	Always requires Prior Authorization.
K0841	RR	DMEPOS	Pwc gp2 std mult pow opt s/b	Always requires Prior Authorization.
K0842	RR	DMEPOS	Pwc gp2 std mult pow opt cap	Always requires Prior Authorization.
K0843	RR	DMEPOS	Pwc gp2 hd mult pow opt s/b	Always requires Prior Authorization.
K0848	RR	DMEPOS	Pwc gp 3 std seat/back	Always requires Prior Authorization.
K0849	RR	DMEPOS	Pwc gp 3 std cap chair	Always requires Prior Authorization.
K0850	RR	DMEPOS	Pwc gp 3 hd seat/back	Always requires Prior Authorization.
K0851	RR	DMEPOS	Pwc gp 3 hd cap chair	Always requires Prior Authorization.
K0852	RR	DMEPOS	Pwc gp 3 vhd seat/back	Always requires Prior Authorization.
K0853	RR	DMEPOS	Pwc gp 3 vhd cap chair	Always requires Prior Authorization.
K0854	RR	DMEPOS	Pwc gp 3 xhd seat/back	Always requires Prior Authorization.
K0855	RR	DMEPOS	Pwc gp 3 xhd cap chair	Always requires Prior Authorization.
K0856	RR	DMEPOS	Pwc gp3 std sing pow opt s/b	Always requires Prior Authorization.
K0857	RR	DMEPOS	Pwc gp3 std sing pow opt cap	Always requires Prior Authorization.
K0858	RR	DMEPOS	Pwc gp3 hd sing pow opt s/b	Always requires Prior Authorization.
K0859	RR	DMEPOS	Pwc gp3 hd sing pow opt cap	Always requires Prior Authorization.
K0860	RR	DMEPOS	Pwc gp3 vhd sing pow opt s/b	Always requires Prior Authorization.
K0861	RR	DMEPOS	Pwc gp3 std mult pow opt s/b	Always requires Prior Authorization.
K0862	RR	DMEPOS	Pwc gp3 hd mult pow opt s/b	Always requires Prior Authorization.
K0863	RR	DMEPOS	Pwc gp3 vhd mult pow opt s/b	Always requires Prior Authorization.
K0864	RR	DMEPOS	Pwc gp3 xhd mult pow opt s/b	Always requires Prior Authorization.
L0112		DMEPOS	Cranial cervical orthosis	Always requires Prior Authorization.
L0113		DMEPOS	Cranial cervical torticollis	Always requires Prior Authorization.
L0120		DMEPOS	Cerv flex n/adj foam pre ots	Always requires Prior Authorization.
L0130		DMEPOS	Flex thermoplastic collar mo	Always requires Prior Authorization.
L0140		DMEPOS	Cervical semi-rigid adjustab	DME > \$500
L0150		DMEPOS	Cerv semi-rig adj molded chn	DME > \$500
L0160		DMEPOS	Cerv sr wire occ/man pre ots	DME > \$500
L0170		DMEPOS	Cervical collar molded to pt	DME > \$500
L0172		DMEPOS	Cerv col sr foam 2pc pre ots	DME > \$500
L0174		DMEPOS	Cerv sr 2pc thor ext pre ots	DME > \$500
L0180		DMEPOS	Cer post col occ/man sup adj	DME > \$500
L0190		DMEPOS	Cerv collar supp adj cerv ba	DME > \$500
L0200		DMEPOS	Cerv col supp adj bar & thor	DME > \$500
L0220		DMEPOS	Thor rib belt custom fabrica	Always requires Prior Authorization.
L0450		DMEPOS	Tlso flex trunk/thor pre ots	Always requires Prior Authorization.
L0452		DMEPOS	Tlso flex custom fab thoraci	Always requires Prior Authorization.
L0454		DMEPOS	Tlso trnk sj-t9 pre cst	Always requires Prior Authorization.
L0455		DMEPOS	Tlso flex trnk sj-t9 pre ots	Always requires Prior Authorization.
L0456		DMEPOS	Tlso flex trnk sj-ss pre cst	Always requires Prior Authorization.
L0457		DMEPOS	Tlso flex trnk sj-ss pre ots	Always requires Prior Authorization.

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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

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Code	Mod	Procedures & Services	Description	Rule Description
L0458		DMEPOS	Tlso 2mod symphis-xipho pre	Always requires Prior Authorization.
L0460		DMEPOS	Tlso 2 shl symphys-stern cst	Always requires Prior Authorization.
L0462		DMEPOS	Tlso 3mod sacro-scap pre	Always requires Prior Authorization.
L0464		DMEPOS	Tlso 4mod sacro-scap pre	Always requires Prior Authorization.
L0466		DMEPOS	Tlso r fram soft ant pre cst	Always requires Prior Authorization.
L0467		DMEPOS	Tlso r fram soft pre ots	Always requires Prior Authorization.
L0468		DMEPOS	Tlso rig fram pelvic pre cst	Always requires Prior Authorization.
L0469		DMEPOS	Tlso rig fram pelvic pre ots	Always requires Prior Authorization.
L0470		DMEPOS	Tlso rigid frame pre subclav	Always requires Prior Authorization.
L0472		DMEPOS	Tlso rigid frame hyperex pre	Always requires Prior Authorization.
L0480		DMEPOS	Tlso rigid plastic custom fa	Always requires Prior Authorization.
L0482		DMEPOS	Tlso rigid lined custom fab	Always requires Prior Authorization.
L0484		DMEPOS	Tlso rigid plastic cust fab	Always requires Prior Authorization.
L0486		DMEPOS	Tlso rigidlined cust fab two	Always requires Prior Authorization.
L0488		DMEPOS	Tlso rigid lined pre one pie	Always requires Prior Authorization.
L0490		DMEPOS	Tlso rigid plastic pre one	Always requires Prior Authorization.
L0491		DMEPOS	Tlso 2 piece rigid shell	Always requires Prior Authorization.
L0492		DMEPOS	Tlso 3 piece rigid shell	Always requires Prior Authorization.
L0621		DMEPOS	Sio flex pelvic/sacr pre ots	Always requires Prior Authorization.
L0622		DMEPOS	Sio flex pelvisacral custom	Always requires Prior Authorization.
L0623		DMEPOS	Sio rig pnl pelv/sac pre ots	Always requires Prior Authorization.
L0624		DMEPOS	Sio panel custom	Always requires Prior Authorization.
L0625		DMEPOS	Lo flex l1-below l5 pre ots	Always requires Prior Authorization.
L0626		DMEPOS	Lo sag rig pnl stays pre cst	Always requires Prior Authorization.
L0627		DMEPOS	Lo sag ri an/pos pnl pre cst	Always requires Prior Authorization.
L0628		DMEPOS	Lso flex no ri stays pre ots	Always requires Prior Authorization.
L0629		DMEPOS	Lso flex w/rigid stays cust	Always requires Prior Authorization.
L0630		DMEPOS	Lso r post pnl sj-t9 pre cst	Always requires Prior Authorization.
L0631		DMEPOS	Lso sag r an/pos pnl pre cst	Always requires Prior Authorization.
L0632		DMEPOS	Lso sag rigid frame cust	Always requires Prior Authorization.
L0633		DMEPOS	Lso sc r pos/lat pnl pre cst	Always requires Prior Authorization.
L0634		DMEPOS	Lso flexion control custom	Always requires Prior Authorization.
L0635		DMEPOS	Lso sagit rigid panel prefab	Always requires Prior Authorization.
L0636		DMEPOS	Lso sagittal rigid panel cus	Always requires Prior Authorization.
L0637		DMEPOS	Lso sc r ant/pos pnl pre cst	Always requires Prior Authorization.
L0638		DMEPOS	Lso sag-coronal panel custom	Always requires Prior Authorization.
L0639		DMEPOS	Lso s/c shell/panel prefab	Always requires Prior Authorization.
L0640		DMEPOS	Lso s/c shell/panel custom	Always requires Prior Authorization.
L0641		DMEPOS	Lo rig pos pnl l1-l5 pre ots	Always requires Prior Authorization.
L0642		DMEPOS	Lo sag ri an/pos pnl pre ots	Always requires Prior Authorization.
L0643		DMEPOS	Lso sag ctr rigi pos pre ots	Always requires Prior Authorization.
L0648		DMEPOS	Lso sag r an/pos pnl pre ots	Always requires Prior Authorization.
L0649		DMEPOS	Lso sc r pos/lat pnl pre ots	Always requires Prior Authorization.
L0650		DMEPOS	Lso sc r ant/pos pnl pre ots	Always requires Prior Authorization.
L0651		DMEPOS	Lso sag-co shell pnl pre ots	Always requires Prior Authorization.
L0700		DMEPOS	Ctlso a-p-l control molded	Always requires Prior Authorization.
L0710		DMEPOS	Ctlso a-p-l control w/ inter	Always requires Prior Authorization.
L0810		DMEPOS	Halo cervical into jckt vest	Always requires Prior Authorization.
L0820		DMEPOS	Halo cervical into body jack	Always requires Prior Authorization.
L0830		DMEPOS	Halo cerv into milwaukee typ	Always requires Prior Authorization.
L0859		DMEPOS	Mri compatible system	Always requires Prior Authorization.
L0861		DMEPOS	Halo repl liner/interface	Always requires Prior Authorization.
L0970		DMEPOS	Tlso corset front	Always requires Prior Authorization.
L0972		DMEPOS	Lso corset front	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

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Code	Mod	Procedures & Services	Description	Rule Description
L0974		DMEPOS	Tlso full corset	Always requires Prior Authorization.
L0976		DMEPOS	Lso full corset	Always requires Prior Authorization.
L0978		DMEPOS	Axillary crutch extension	Always requires Prior Authorization.
L0980		DMEPOS	Peroneal straps pair pre ots	Always requires Prior Authorization.
L0982		DMEPOS	Stocking sup grips 4 pre ots	Always requires Prior Authorization.
L0984		DMEPOS	Protect body sock ea pre ots	Always requires Prior Authorization.
L1000		DMEPOS	Ct Iso milwaukee initial model	Always requires Prior Authorization.
L1001		DMEPOS	Ct Iso infant immobilizer	Always requires Prior Authorization.
L1005		DMEPOS	Tension based scoliosis orth	Always requires Prior Authorization.
L1010		DMEPOS	Ct Iso axilla sling	Always requires Prior Authorization.
L1020		DMEPOS	Kyphosis pad	Always requires Prior Authorization.
L1025		DMEPOS	Kyphosis pad floating	Always requires Prior Authorization.
L1030		DMEPOS	Lumbar bolster pad	Always requires Prior Authorization.
L1040		DMEPOS	Lumbar or lumbar rib pad	Always requires Prior Authorization.
L1050		DMEPOS	Sternal pad	Always requires Prior Authorization.
L1060		DMEPOS	Thoracic pad	Always requires Prior Authorization.
L1070		DMEPOS	Trapezius sling	Always requires Prior Authorization.
L1080		DMEPOS	Outrigger	Always requires Prior Authorization.
L1085		DMEPOS	Outrigger bil w/ vert extens	Always requires Prior Authorization.
L1090		DMEPOS	Lumbar sling	Always requires Prior Authorization.
L1100		DMEPOS	Ring flange plastic/leather	Always requires Prior Authorization.
L1110		DMEPOS	Ring flange plas/leather mol	Always requires Prior Authorization.
L1120		DMEPOS	Covers for upright each	Always requires Prior Authorization.
L1200		DMEPOS	Furnsh initial orthosis only	Always requires Prior Authorization.
L1210		DMEPOS	Lateral thoracic extension	Always requires Prior Authorization.
L1220		DMEPOS	Anterior thoracic extension	Always requires Prior Authorization.
L1230		DMEPOS	Milwaukee type superstructur	Always requires Prior Authorization.
L1240		DMEPOS	Lumbar derotation pad	Always requires Prior Authorization.
L1250		DMEPOS	Anterior asis pad	Always requires Prior Authorization.
L1260		DMEPOS	Anterior thoracic derotation	Always requires Prior Authorization.
L1270		DMEPOS	Abdominal pad	Always requires Prior Authorization.
L1280		DMEPOS	Rib gusset (elastic) each	Always requires Prior Authorization.
L1290		DMEPOS	Lateral trochanteric pad	Always requires Prior Authorization.
L1300		DMEPOS	Body jacket mold to patient	Always requires Prior Authorization.
L1310		DMEPOS	Post-operative body jacket	Always requires Prior Authorization.
L1600		DMEPOS	Ho flex frejka w/cov pre cst	Always requires Prior Authorization.
L1610		DMEPOS	Ho frejka cov only pre cst	Always requires Prior Authorization.
L1620		DMEPOS	Ho flex pavlik harns pre cst	Always requires Prior Authorization.
L1630		DMEPOS	Abduct control hip semi-flex	Always requires Prior Authorization.
L1640		DMEPOS	Pelv band/spread bar thigh c	Always requires Prior Authorization.
L1650		DMEPOS	Ho abduction hip adjustable	Always requires Prior Authorization.
L1652		DMEPOS	Ho bi thighcuffs w sprdr bar	Always requires Prior Authorization.
L1660		DMEPOS	Ho abduction static plastic	Always requires Prior Authorization.
L1680		DMEPOS	Pelvic & hip control thigh c	Always requires Prior Authorization.
L1685		DMEPOS	Post-op hip abduct custom fa	Always requires Prior Authorization.
L1686		DMEPOS	Ho post-op hip abduction	Always requires Prior Authorization.
L1690		DMEPOS	Combination bilateral ho	Always requires Prior Authorization.
L1700		DMEPOS	Leg perthes orth toronto typ	Always requires Prior Authorization.
L1710		DMEPOS	Legg perthes orth newington	Always requires Prior Authorization.
L1720		DMEPOS	Legg perthes orthosis trilat	Always requires Prior Authorization.
L1730		DMEPOS	Legg perthes orth scottish r	Always requires Prior Authorization.
L1755		DMEPOS	Legg perthes patten bottom t	Always requires Prior Authorization.
L1810		DMEPOS	Ko elastic with joints	Always requires Prior Authorization.
L1812		DMEPOS	Ko elastic w/joints pre ots	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L1820		DMEPOS	Ko elas w/ condyle pads & jo	Always requires Prior Authorization.
L1830		DMEPOS	Ko immob canvas long pre ots	Always requires Prior Authorization.
L1831		DMEPOS	Knee orth pos locking joint	Always requires Prior Authorization.
L1832		DMEPOS	Ko adj jnt pos r sup pre cst	Always requires Prior Authorization.
L1833		DMEPOS	Ko adj jnt pos r sup pre ots	Always requires Prior Authorization.
L1834		DMEPOS	Ko w/0 joint rigid molded to	Always requires Prior Authorization.
L1836		DMEPOS	Ko rigid w/o joints pre ots	Always requires Prior Authorization.
L1840		DMEPOS	Ko derot ant cruciate custom	Always requires Prior Authorization.
L1843		DMEPOS	Ko single upright pre cst	Always requires Prior Authorization.
L1844		DMEPOS	Ko w/adj jt rot cntrl molded	Always requires Prior Authorization.
L1845		DMEPOS	Ko double upright pre cst	Always requires Prior Authorization.
L1846		DMEPOS	Ko w adj flex/ext rotat mold	Always requires Prior Authorization.
L1847		DMEPOS	Ko dbl upright w/air pre cst	Always requires Prior Authorization.
L1848		DMEPOS	Ko dbl upright w/air pre ots	Always requires Prior Authorization.
L1850		DMEPOS	Ko swedish type pre ots	Always requires Prior Authorization.
L1851		DMEPOS	Ko single upright prefab ots	Always requires Prior Authorization.
L1852		DMEPOS	Ko double upright prefab ots	Always requires Prior Authorization.
L1860		DMEPOS	Ko supracondylar socket mold	Always requires Prior Authorization.
L1900		DMEPOS	Afo sprng wir drsflx calf bd	Always requires Prior Authorization.
L1902		DMEPOS	Afo ankle gauntlet pre ots	Always requires Prior Authorization.
L1904		DMEPOS	Afo molded ankle gauntlet	Always requires Prior Authorization.
L1906		DMEPOS	Afo multilig ank sup pre ots	Always requires Prior Authorization.
L1907		DMEPOS	Afo supramalleolar custom	Always requires Prior Authorization.
L1910		DMEPOS	Afo sing bar clasp attach sh	Always requires Prior Authorization.
L1920		DMEPOS	Afo sing upright w/ adjust s	Always requires Prior Authorization.
L1930		DMEPOS	Afo plastic	DME > \$500
L1932		DMEPOS	Afo rig ant tib prefab tcf/=	DME > \$500
L1940		DMEPOS	Afo molded to patient plasti	DME > \$500
L1945		DMEPOS	Afo molded plas rig ant tib	DME > \$500
L1950		DMEPOS	Afo spiral molded to pt plas	DME > \$500
L1951		DMEPOS	Afo spiral prefabricated	DME > \$500
L1960		DMEPOS	Afo pos solid ank plastic mo	DME > \$500
L1970		DMEPOS	Afo plastic molded w/ankle j	DME > \$500
L1971		DMEPOS	Afo w/ankle joint, prefab	DME > \$500
L1980		DMEPOS	Afo sing solid stirrup calf	DME > \$500
L1990		DMEPOS	Afo doub solid stirrup calf	DME > \$500
L2000		DMEPOS	Kafo sing fre stirr thi/calf	Always requires Prior Authorization.
L2005		DMEPOS	Kafo sng/dbl mechanical act	Always requires Prior Authorization.
L2010		DMEPOS	Kafo sng solid stirrup w/o j	Always requires Prior Authorization.
L2020		DMEPOS	Kafo dbl solid stirrup band/	Always requires Prior Authorization.
L2030		DMEPOS	Kafo dbl solid stirrup w/o j	Always requires Prior Authorization.
L2034		DMEPOS	Kafo pla sin up w/wo k/a cus	Always requires Prior Authorization.
L2035		DMEPOS	Kafo plastic pediatric size	Always requires Prior Authorization.
L2036		DMEPOS	Kafo plas doub free knee mol	Always requires Prior Authorization.
L2037		DMEPOS	Kafo plas sing free knee mol	Always requires Prior Authorization.
L2038		DMEPOS	Kafo w/o joint multi-axis an	Always requires Prior Authorization.
L2040		DMEPOS	Hkafo torsion bil rot straps	Always requires Prior Authorization.
L2050		DMEPOS	Hkafo torsion cable hip pelv	Always requires Prior Authorization.
L2060		DMEPOS	Hkafo torsion ball bearing j	Always requires Prior Authorization.
L2070		DMEPOS	Hkafo torsion unilat rot str	Always requires Prior Authorization.
L2080		DMEPOS	Hkafo unilat torsion cable	Always requires Prior Authorization.
L2090		DMEPOS	Hkafo unilat torsion ball br	Always requires Prior Authorization.
L2106		DMEPOS	Afo tib fx cast plaster mold	Always requires Prior Authorization.
L2108		DMEPOS	Afo tib fx cast molded to pt	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L2112		DMEPOS	Afo tibial fracture soft	Always requires Prior Authorization.
L2114		DMEPOS	Afo tib fx semi-rigid	Always requires Prior Authorization.
L2116		DMEPOS	Afo tibial fracture rigid	Always requires Prior Authorization.
L2126		DMEPOS	Kafo fem fx cast thermoplas	Always requires Prior Authorization.
L2128		DMEPOS	Kafo fem fx cast molded to p	Always requires Prior Authorization.
L2132		DMEPOS	Kafo femoral fx cast soft	Always requires Prior Authorization.
L2134		DMEPOS	Kafo fem fx cast semi-rigid	Always requires Prior Authorization.
L2136		DMEPOS	Kafo femoral fx cast rigid	Always requires Prior Authorization.
L2180		DMEPOS	Plas shoe insert w ank joint	Always requires Prior Authorization.
L2182		DMEPOS	Drop lock knee	Always requires Prior Authorization.
L2184		DMEPOS	Limited motion knee joint	Always requires Prior Authorization.
L2186		DMEPOS	Adj motion knee jnt lerman t	Always requires Prior Authorization.
L2188		DMEPOS	Quadrilateral brim	Always requires Prior Authorization.
L2190		DMEPOS	Waist belt	Always requires Prior Authorization.
L2192		DMEPOS	Pelvic band & belt thigh fla	Always requires Prior Authorization.
L2200		DMEPOS	Limited ankle motion ea jnt	Always requires Prior Authorization.
L2210		DMEPOS	Dorsiflexion assist each joi	Always requires Prior Authorization.
L2220		DMEPOS	Dorsi & plantar flex ass/res	Always requires Prior Authorization.
L2230		DMEPOS	Split flat caliper stirr & p	Always requires Prior Authorization.
L2232		DMEPOS	Rocker bottom, contact afo	Always requires Prior Authorization.
L2240		DMEPOS	Round caliper and plate atta	Always requires Prior Authorization.
L2250		DMEPOS	Foot plate molded stirrup at	Always requires Prior Authorization.
L2260		DMEPOS	Reinforced solid stirrup	Always requires Prior Authorization.
L2265		DMEPOS	Long tongue stirrup	Always requires Prior Authorization.
L2270		DMEPOS	Varus/valgus strap padded/li	Always requires Prior Authorization.
L2275		DMEPOS	Plastic mod low ext pad/line	Always requires Prior Authorization.
L2280		DMEPOS	Molded inner boot	Always requires Prior Authorization.
L2300		DMEPOS	Abduction bar jointed adjust	Always requires Prior Authorization.
L2310		DMEPOS	Abduction bar-straight	Always requires Prior Authorization.
L2320		DMEPOS	Non-molded lacer	Always requires Prior Authorization.
L2330		DMEPOS	Lacer molded to patient mode	Always requires Prior Authorization.
L2335		DMEPOS	Anterior swing band	Always requires Prior Authorization.
L2340		DMEPOS	Pre-tibial shell molded to p	Always requires Prior Authorization.
L2350		DMEPOS	Prosthetic type socket molde	Always requires Prior Authorization.
L2360		DMEPOS	Extended steel shank	Always requires Prior Authorization.
L2370		DMEPOS	Patten bottom	Always requires Prior Authorization.
L2375		DMEPOS	Torsion ank & half solid sti	Always requires Prior Authorization.
L2380		DMEPOS	Torsion straight knee joint	Always requires Prior Authorization.
L2385		DMEPOS	Straight knee joint heavy du	Always requires Prior Authorization.
L2387		DMEPOS	Add le poly knee custom kafo	Always requires Prior Authorization.
L2390		DMEPOS	Offset knee joint each	Always requires Prior Authorization.
L2395		DMEPOS	Offset knee joint heavy duty	Always requires Prior Authorization.
L2397		DMEPOS	Suspension sleeve lower ext	Always requires Prior Authorization.
L2405		DMEPOS	Knee joint drop lock ea jnt	Always requires Prior Authorization.
L2415		DMEPOS	Knee joint cam lock each joi	Always requires Prior Authorization.
L2425		DMEPOS	Knee disc/dial lock/adj flex	Always requires Prior Authorization.
L2430		DMEPOS	Knee jnt ratchet lock ea jnt	Always requires Prior Authorization.
L2492		DMEPOS	Knee lift loop drop lock rin	Always requires Prior Authorization.
L2500		DMEPOS	Thi/glut/ischia wgt bearing	Always requires Prior Authorization.
L2510		DMEPOS	Th/wght bear quad-lat brim m	Always requires Prior Authorization.
L2520		DMEPOS	Th/wght bear quad-lat brim c	Always requires Prior Authorization.
L2525		DMEPOS	Th/wght bear nar m-l brim mo	Always requires Prior Authorization.
L2526		DMEPOS	Th/wght bear nar m-l brim cu	Always requires Prior Authorization.
L2530		DMEPOS	Thigh/wght bear lacer non-mo	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L2540		DMEPOS	Thigh/wght bear lacer molded	Always requires Prior Authorization.
L2550		DMEPOS	Thigh/wght bear high roll cu	Always requires Prior Authorization.
L2570		DMEPOS	Hip clevis type 2 posit jnt	Always requires Prior Authorization.
L2580		DMEPOS	Pelvic control pelvic sling	Always requires Prior Authorization.
L2600		DMEPOS	Hip clevis/thrust bearing fr	Always requires Prior Authorization.
L2610		DMEPOS	Hip clevis/thrust bearing lo	Always requires Prior Authorization.
L2620		DMEPOS	Pelvic control hip heavy dut	Always requires Prior Authorization.
L2622		DMEPOS	Hip joint adjustable flexion	Always requires Prior Authorization.
L2624		DMEPOS	Hip adj flex ext abduct cont	Always requires Prior Authorization.
L2627		DMEPOS	Plastic mold recipro hip & c	Always requires Prior Authorization.
L2628		DMEPOS	Metal frame recipro hip & ca	Always requires Prior Authorization.
L2630		DMEPOS	Pelvic control band & belt u	Always requires Prior Authorization.
L2640		DMEPOS	Pelvic control band & belt b	Always requires Prior Authorization.
L2650		DMEPOS	Pelv & thor control gluteal	Always requires Prior Authorization.
L2660		DMEPOS	Thoracic control thoracic ba	Always requires Prior Authorization.
L2670		DMEPOS	Thorac cont paraspinal uprig	Always requires Prior Authorization.
L2680		DMEPOS	Thorac cont lat support upri	Always requires Prior Authorization.
L2750		DMEPOS	Plating chrome/nickel pr bar	Always requires Prior Authorization.
L2755		DMEPOS	Carbon graphite lamination	Always requires Prior Authorization.
L2760		DMEPOS	Extension per extension per	Always requires Prior Authorization.
L2768		DMEPOS	Ortho sidebar disconnect	Always requires Prior Authorization.
L2780		DMEPOS	Non-corrosive finish	Always requires Prior Authorization.
L2785		DMEPOS	Drop lock retainer each	Always requires Prior Authorization.
L2795		DMEPOS	Knee control full kneecap	Always requires Prior Authorization.
L2800		DMEPOS	Knee cap medial or lateral p	Always requires Prior Authorization.
L2810		DMEPOS	Knee control condylar pad	Always requires Prior Authorization.
L2820		DMEPOS	Soft interface below knee se	Always requires Prior Authorization.
L2830		DMEPOS	Soft interface above knee se	Always requires Prior Authorization.
L2840		DMEPOS	Tibial length sock fx or equ	Always requires Prior Authorization.
L2850		DMEPOS	Femoral lgth sock fx or equa	Always requires Prior Authorization.
L3000		DMEPOS	Ft insert ucb berkeley shell	Always requires Prior Authorization.
L3001		DMEPOS	Foot insert remov molded spe	Always requires Prior Authorization.
L3002		DMEPOS	Foot insert plastazote or eq	Always requires Prior Authorization.
L3003		DMEPOS	Foot insert silicone gel eac	Always requires Prior Authorization.
L3010		DMEPOS	Foot longitudinal arch suppo	Always requires Prior Authorization.
L3020		DMEPOS	Foot longitud/metatarsal sup	Always requires Prior Authorization.
L3030		DMEPOS	Foot arch support remov prem	Always requires Prior Authorization.
L3031		DMEPOS	Foot lamin/prepreg composite	Always requires Prior Authorization.
L3040		DMEPOS	Ft arch suprt premold longit	Always requires Prior Authorization.
L3050		DMEPOS	Foot arch supp premold metat	Always requires Prior Authorization.
L3060		DMEPOS	Foot arch supp longitud/meta	Always requires Prior Authorization.
L3070		DMEPOS	Arch suprt att to sho longit	Always requires Prior Authorization.
L3080		DMEPOS	Arch supp att to shoe metata	Always requires Prior Authorization.
L3090		DMEPOS	Arch supp att to shoe long/m	Always requires Prior Authorization.
L3100		DMEPOS	Hallus-valgus nt dyn pre ots	Always requires Prior Authorization.
L3140		DMEPOS	Abduction rotation bar shoe	Always requires Prior Authorization.
L3150		DMEPOS	Abduct rotation bar w/o shoe	Always requires Prior Authorization.
L3170		DMEPOS	Foot plas heel stabi pre ots	Always requires Prior Authorization.
L3224		DMEPOS	Woman's shoe oxford brace	Always requires Prior Authorization.
L3225		DMEPOS	Man's shoe oxford brace	Always requires Prior Authorization.
L3300		DMEPOS	Sho lift taper to metatarsal	Always requires Prior Authorization.
L3310		DMEPOS	Shoe lift elev heel/sole neo	Always requires Prior Authorization.
L3330		DMEPOS	Lifts elevation metal extens	Always requires Prior Authorization.
L3332		DMEPOS	Shoe lifts tapered to one-ha	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L3334		DMEPOS	Shoe lifts elevation heel /i	Always requires Prior Authorization.
L3340		DMEPOS	Shoe wedge sach	Always requires Prior Authorization.
L3350		DMEPOS	Shoe heel wedge	Always requires Prior Authorization.
L3360		DMEPOS	Shoe sole wedge outside sole	Always requires Prior Authorization.
L3370		DMEPOS	Shoe sole wedge between sole	Always requires Prior Authorization.
L3380		DMEPOS	Shoe clubfoot wedge	Always requires Prior Authorization.
L3390		DMEPOS	Shoe outflare wedge	Always requires Prior Authorization.
L3400		DMEPOS	Shoe metatarsal bar wedge ro	Always requires Prior Authorization.
L3410		DMEPOS	Shoe metatarsal bar between	Always requires Prior Authorization.
L3420		DMEPOS	Full sole/heel wedge btween	Always requires Prior Authorization.
L3430		DMEPOS	Sho heel count plast reinfor	Always requires Prior Authorization.
L3440		DMEPOS	Heel leather reinforced	Always requires Prior Authorization.
L3450		DMEPOS	Shoe heel sach cushion type	Always requires Prior Authorization.
L3455		DMEPOS	Shoe heel new leather standa	Always requires Prior Authorization.
L3460		DMEPOS	Shoe heel new rubber standar	Always requires Prior Authorization.
L3465		DMEPOS	Shoe heel thomas with wedge	Always requires Prior Authorization.
L3470		DMEPOS	Shoe heel thomas extend to b	Always requires Prior Authorization.
L3480		DMEPOS	Shoe heel pad & depress for	Always requires Prior Authorization.
L3500		DMEPOS	Ortho shoe add leather insol	Always requires Prior Authorization.
L3510		DMEPOS	Orthopedic shoe add rub insl	Always requires Prior Authorization.
L3520		DMEPOS	O shoe add felt w leath insl	Always requires Prior Authorization.
L3530		DMEPOS	Ortho shoe add half sole	Always requires Prior Authorization.
L3540		DMEPOS	Ortho shoe add full sole	Always requires Prior Authorization.
L3550		DMEPOS	O shoe add standard toe tap	Always requires Prior Authorization.
L3560		DMEPOS	O shoe add horseshoe toe tap	Always requires Prior Authorization.
L3570		DMEPOS	O shoe add instep extension	Always requires Prior Authorization.
L3580		DMEPOS	O shoe add instep velcro clo	Always requires Prior Authorization.
L3590		DMEPOS	O shoe convert to sof counte	Always requires Prior Authorization.
L3595		DMEPOS	Ortho shoe add march bar	Always requires Prior Authorization.
L3600		DMEPOS	Trans shoe calip plate exist	Always requires Prior Authorization.
L3610		DMEPOS	Trans shoe caliper plate new	Always requires Prior Authorization.
L3620		DMEPOS	Trans shoe solid stirrup exi	Always requires Prior Authorization.
L3630		DMEPOS	Trans shoe solid stirrup new	Always requires Prior Authorization.
L3640		DMEPOS	Shoe dennis browne splint bo	Always requires Prior Authorization.
L3650		DMEPOS	So 8 abd restraint pre ots	Always requires Prior Authorization.
L3660		DMEPOS	So 8 ab rstr can/web pre ots	Always requires Prior Authorization.
L3670		DMEPOS	So acro/clav can web pre ots	Always requires Prior Authorization.
L3671		DMEPOS	So cap design w/o jnts cf	Always requires Prior Authorization.
L3674		DMEPOS	So airplane w/wo joint cf	Always requires Prior Authorization.
L3675		DMEPOS	So vest canvas/web pre ots	Always requires Prior Authorization.
L3702		DMEPOS	Eo w/o joints cf	Always requires Prior Authorization.
L3710		DMEPOS	Eo elas w/metal jnts pre ots	Always requires Prior Authorization.
L3720		DMEPOS	Forearm/arm cuffs free motio	Always requires Prior Authorization.
L3730		DMEPOS	Forearm/arm cuffs ext/flex a	Always requires Prior Authorization.
L3740		DMEPOS	Cuffs adj lock w/ active con	Always requires Prior Authorization.
L3760		DMEPOS	Eo adj jt prefab custom fit	Always requires Prior Authorization.
L3762		DMEPOS	Eo rigid w/o joints pre ots	Always requires Prior Authorization.
L3763		DMEPOS	Ewho rigid w/o jnts cf	Always requires Prior Authorization.
L3764		DMEPOS	Ewho w/joint(s) cf	Always requires Prior Authorization.
L3765		DMEPOS	Ewhfo rigid w/o jnts cf	Always requires Prior Authorization.
L3766		DMEPOS	Ewhfo w/joint(s) cf	Always requires Prior Authorization.
L3806		DMEPOS	Whfo w/joint(s) custom fab	Always requires Prior Authorization.
L3807		DMEPOS	Whfo w/o joints pre cst	Always requires Prior Authorization.
L3808		DMEPOS	Whfo, rigid w/o joints	Always requires Prior Authorization.



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Code	Mod	Procedures & Services	Description	Rule Description
L3809		DMEPOS	Whfo w/o joints pre ots	Always requires Prior Authorization.
L3900		DMEPOS	Hinge extension/flex wrist/f	Always requires Prior Authorization.
L3901		DMEPOS	Hinge ext/flex wrist finger	Always requires Prior Authorization.
L3904		DMEPOS	Whfo electric custom fitted	Always requires Prior Authorization.
L3905		DMEPOS	Who w/nontorsion jnt(s) cf	Always requires Prior Authorization.
L3906		DMEPOS	Who w/o joints cf	Always requires Prior Authorization.
L3908		DMEPOS	Who cock-up nonmolde pre ots	Always requires Prior Authorization.
L3912		DMEPOS	Hfo flexion glove pre ots	Always requires Prior Authorization.
L3913		DMEPOS	Hfo w/o joints cf	Always requires Prior Authorization.
L3915		DMEPOS	Who nontorsion jnts pre cst	Always requires Prior Authorization.
L3916		DMEPOS	Who nontorsion jnts pre ots	Always requires Prior Authorization.
L3917		DMEPOS	Metacarp fx orthosis pre cst	Always requires Prior Authorization.
L3918		DMEPOS	Metacarp fx orthosis pre ots	Always requires Prior Authorization.
L3919		DMEPOS	Ho w/o joints cf	Always requires Prior Authorization.
L3921		DMEPOS	Hfo w/joint(s) cf	Always requires Prior Authorization.
L3923		DMEPOS	Hfo without joints pre cst	Always requires Prior Authorization.
L3924		DMEPOS	Hfo without joints pre ots	Always requires Prior Authorization.
L3925		DMEPOS	Fo pip dip jnt/sprng pre ots	Always requires Prior Authorization.
L3927		DMEPOS	Fo pip dip no jt spr pre ots	Always requires Prior Authorization.
L3929		DMEPOS	Hfo nontorsion jnts pre cst	Always requires Prior Authorization.
L3930		DMEPOS	Hfo nontorsion jnts pre ots	Always requires Prior Authorization.
L3931		DMEPOS	Whfo nontorsion joint prefab	Always requires Prior Authorization.
L3933		DMEPOS	Fo w/o joints cf	Always requires Prior Authorization.
L3935		DMEPOS	Fo nontorsion joint cf	Always requires Prior Authorization.
L3956		DMEPOS	Add joint upper ext orthosis	Always requires Prior Authorization.
L3960		DMEPOS	Sewho airplan desig abdu pos	Always requires Prior Authorization.
L3961		DMEPOS	Sewho cap design w/o jnts cf	Always requires Prior Authorization.
L3962		DMEPOS	Sewho erbs palsey design abd	Always requires Prior Authorization.
L3967		DMEPOS	Sewho airplane w/o jnts cf	Always requires Prior Authorization.
L3971		DMEPOS	Sewho cap design w/jnt(s) cf	Always requires Prior Authorization.
L3973		DMEPOS	Sewho airplane w/jnt(s) cf	Always requires Prior Authorization.
L3975		DMEPOS	Sewhfo cap design w/o jnt cf	Always requires Prior Authorization.
L3976		DMEPOS	Sewhfo airplane w/o jnts cf	Always requires Prior Authorization.
L3977		DMEPOS	Sewhfo cap desgn w/jnt(s) cf	Always requires Prior Authorization.
L3978		DMEPOS	Sewhfo airplane w/jnt(s) cf	Always requires Prior Authorization.
L3980		DMEPOS	Up ext fx orthos humeral nos	Always requires Prior Authorization.
L3981		DMEPOS	Ue fx orth shoul cap forearm	Always requires Prior Authorization.
L3982		DMEPOS	Upper ext fx orthosis rad/ul	Always requires Prior Authorization.
L3984		DMEPOS	Upper ext fx orthosis wrist	Always requires Prior Authorization.
L3995		DMEPOS	Sock fracture or equal each	Always requires Prior Authorization.
L4000		DMEPOS	Repl girdle milwaukee orth	Always requires Prior Authorization.
L4002		DMEPOS	Replace strap, any orthosis	Always requires Prior Authorization.
L4010		DMEPOS	Replace trilateral socket br	Always requires Prior Authorization.
L4020		DMEPOS	Replace quadlat socket brim	Always requires Prior Authorization.
L4030		DMEPOS	Replace socket brim cust fit	Always requires Prior Authorization.
L4040		DMEPOS	Replace molded thigh lacer	Always requires Prior Authorization.
L4045		DMEPOS	Replace non-molded thigh lac	Always requires Prior Authorization.
L4050		DMEPOS	Replace molded calf lacer	Always requires Prior Authorization.
L4055		DMEPOS	Replace non-molded calf lace	Always requires Prior Authorization.
L4060		DMEPOS	Replace high roll cuff	Always requires Prior Authorization.
L4070		DMEPOS	Replace prox & dist upright	Always requires Prior Authorization.
L4080		DMEPOS	Repl met band kafo-afo prox	Always requires Prior Authorization.
L4090		DMEPOS	Repl met band kafo-afo calf/	Always requires Prior Authorization.
L4100		DMEPOS	Repl leath cuff kafo prox th	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L4110		DMEPOS	Repl leath cuff kafo-afocal	Always requires Prior Authorization.
L4130		DMEPOS	Replace pretibial shell	Always requires Prior Authorization.
L4350		DMEPOS	Ankle control ortho pre ots	Always requires Prior Authorization.
L4360		DMEPOS	Pneumat walking boot pre cst	Always requires Prior Authorization.
L4361		DMEPOS	Pneuma/vac walk boot pre ots	Always requires Prior Authorization.
L4370		DMEPOS	Pneum full leg splnt pre ots	Always requires Prior Authorization.
L4386		DMEPOS	Non-pneum walk boot pre cst	Always requires Prior Authorization.
L4387		DMEPOS	Non-pneum walk boot pre ots	Always requires Prior Authorization.
L4392		DMEPOS	Replace afo soft interface	Always requires Prior Authorization.
L4394		DMEPOS	Replace foot drop spint	Always requires Prior Authorization.
L4396		DMEPOS	Static or dynami afo pre cst	Always requires Prior Authorization.
L4397		DMEPOS	Static or dynami afo pre ots	Always requires Prior Authorization.
L4398		DMEPOS	Foot drop splint pre ots	Always requires Prior Authorization.
L4631		DMEPOS	Afo, walk boot type, cus fab	Always requires Prior Authorization.
L5000		DMEPOS	Sho insert w arch toe filler	Always requires Prior Authorization.
L5010		DMEPOS	Mold socket ank hgt w/ toe f	Always requires Prior Authorization.
L5020		DMEPOS	Tibial tubercle hgt w/ toe f	Always requires Prior Authorization.
L5050		DMEPOS	Ank symes mold sckt sach ft	Always requires Prior Authorization.
L5060		DMEPOS	Symes met fr leath socket ar	Always requires Prior Authorization.
L5100		DMEPOS	Molded socket shin sach foot	Always requires Prior Authorization.
L5105		DMEPOS	Plast socket jts/thgh lacer	Always requires Prior Authorization.
L5150		DMEPOS	Mold sckt ext knee shin sach	Always requires Prior Authorization.
L5160		DMEPOS	Mold socket bent knee shin s	Always requires Prior Authorization.
L5200		DMEPOS	Kne sing axis fric shin sach	Always requires Prior Authorization.
L5210		DMEPOS	No knee/ankle joints w/ ft b	Always requires Prior Authorization.
L5220		DMEPOS	No knee joint with artic ali	Always requires Prior Authorization.
L5230		DMEPOS	Fem focal defc constant fri	Always requires Prior Authorization.
L5250		DMEPOS	Hip canad sing axi cons fric	Always requires Prior Authorization.
L5270		DMEPOS	Tilt table locking hip sing	Always requires Prior Authorization.
L5280		DMEPOS	Hemipelvect canad sing axis	Always requires Prior Authorization.
L5301		DMEPOS	Bk mold socket sach ft endo	Always requires Prior Authorization.
L5312		DMEPOS	Knee disart, sach ft, endo	Always requires Prior Authorization.
L5321		DMEPOS	Ak open end sach	Always requires Prior Authorization.
L5331		DMEPOS	Hip disart canadian sach ft	Always requires Prior Authorization.
L5341		DMEPOS	Hemipelvectomy canadian sach	Always requires Prior Authorization.
L5400		DMEPOS	Postop dress & 1 cast chg bk	Always requires Prior Authorization.
L5410		DMEPOS	Postop dsq bk ea add cast ch	Always requires Prior Authorization.
L5420		DMEPOS	Postop dsq & 1 cast chg ak/d	Always requires Prior Authorization.
L5430		DMEPOS	Postop dsq ak ea add cast ch	Always requires Prior Authorization.
L5450		DMEPOS	Postop app non-wgt bear dsq	Always requires Prior Authorization.
L5460		DMEPOS	Postop app non-wgt bear dsq	Always requires Prior Authorization.
L5500		DMEPOS	Init bk ptb plaster direct	Always requires Prior Authorization.
L5505		DMEPOS	Init ak ischal plstr direct	Always requires Prior Authorization.
L5510		DMEPOS	Prep bk ptb plaster molded	Always requires Prior Authorization.
L5520		DMEPOS	Perp bk ptb thermopls direct	Always requires Prior Authorization.
L5530		DMEPOS	Prep bk ptb thermopls molded	Always requires Prior Authorization.
L5535		DMEPOS	Prep bk ptb open end socket	Always requires Prior Authorization.
L5540		DMEPOS	Prep bk ptb laminated socket	Always requires Prior Authorization.
L5560		DMEPOS	Prep ak ischial plast molded	Always requires Prior Authorization.
L5570		DMEPOS	Prep ak ischial direct form	Always requires Prior Authorization.
L5580		DMEPOS	Prep ak ischial thermo mold	Always requires Prior Authorization.
L5585		DMEPOS	Prep ak ischial open end	Always requires Prior Authorization.
L5590		DMEPOS	Prep ak ischial laminated	Always requires Prior Authorization.
L5595		DMEPOS	Hip disartic sach thermopls	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

**J3590** Always requires Prior Authorization.

**J-Codes** J-codes (except J3590) only require Prior Authorization in Home Health setting.

**Only Inpatient** HCPCS Codes That Are Paid Only as Inpatient Procedures per Medicare.

**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
L5600		DMEPOS	Hip disart sach laminat mold	Always requires Prior Authorization.
L5610		DMEPOS	Above knee hydracadence	Always requires Prior Authorization.
L5611		DMEPOS	Ak 4 bar link w/fric swing	Always requires Prior Authorization.
L5613		DMEPOS	Ak 4 bar ling w/hydraul swig	Always requires Prior Authorization.
L5614		DMEPOS	4-bar link above knee w/swng	Always requires Prior Authorization.
L5616		DMEPOS	Ak univ multiplex sys frict	Always requires Prior Authorization.
L5617		DMEPOS	Ak/bk self-aligning unit ea	Always requires Prior Authorization.
L5618		DMEPOS	Test socket symes	Always requires Prior Authorization.
L5620		DMEPOS	Test socket below knee	Always requires Prior Authorization.
L5622		DMEPOS	Test socket knee disarticula	Always requires Prior Authorization.
L5624		DMEPOS	Test socket above knee	Always requires Prior Authorization.
L5626		DMEPOS	Test socket hip disarticulat	Always requires Prior Authorization.
L5628		DMEPOS	Test socket hemipelvectomy	Always requires Prior Authorization.
L5629		DMEPOS	Below knee acrylic socket	Always requires Prior Authorization.
L5630		DMEPOS	Syme typ expandabl wall sckt	Always requires Prior Authorization.
L5631		DMEPOS	Ak/knee disartic acrylic soc	Always requires Prior Authorization.
L5632		DMEPOS	Symes type ptb brim design s	Always requires Prior Authorization.
L5634		DMEPOS	Symes type poster opening so	Always requires Prior Authorization.
L5636		DMEPOS	Symes type medial opening so	Always requires Prior Authorization.
L5637		DMEPOS	Below knee total contact	Always requires Prior Authorization.
L5638		DMEPOS	Below knee leather socket	Always requires Prior Authorization.
L5639		DMEPOS	Below knee wood socket	Always requires Prior Authorization.
L5640		DMEPOS	Knee disarticulat leather so	Always requires Prior Authorization.
L5642		DMEPOS	Above knee leather socket	Always requires Prior Authorization.
L5643		DMEPOS	Hip flex inner socket ext fr	Always requires Prior Authorization.
L5644		DMEPOS	Above knee wood socket	Always requires Prior Authorization.
L5645		DMEPOS	Bk flex inner socket ext fra	Always requires Prior Authorization.
L5646		DMEPOS	Below knee cushion socket	Always requires Prior Authorization.
L5647		DMEPOS	Below knee suction socket	Always requires Prior Authorization.
L5648		DMEPOS	Above knee cushion socket	Always requires Prior Authorization.
L5649		DMEPOS	Isch containmt/narrow m-l so	Always requires Prior Authorization.
L5650		DMEPOS	Tot contact ak/knee disart s	Always requires Prior Authorization.
L5651		DMEPOS	Ak flex inner socket ext fra	Always requires Prior Authorization.
L5652		DMEPOS	Suction susp ak/knee disart	Always requires Prior Authorization.
L5653		DMEPOS	Knee disart expand wall sock	Always requires Prior Authorization.
L5654		DMEPOS	Socket insert symes	Always requires Prior Authorization.
L5655		DMEPOS	Socket insert below knee	Always requires Prior Authorization.
L5656		DMEPOS	Socket insert knee articulat	Always requires Prior Authorization.
L5658		DMEPOS	Socket insert above knee	Always requires Prior Authorization.
L5661		DMEPOS	Multi-durometer symes	Always requires Prior Authorization.
L5665		DMEPOS	Multi-durometer below knee	Always requires Prior Authorization.
L5666		DMEPOS	Below knee cuff suspension	Always requires Prior Authorization.
L5668		DMEPOS	Bk molded distal cushion	Always requires Prior Authorization.
L5670		DMEPOS	Bk molded supracondylar susp	Always requires Prior Authorization.
L5671		DMEPOS	Bk/ak locking mechanism	Always requires Prior Authorization.
L5672		DMEPOS	Bk removable medial brim sus	Always requires Prior Authorization.
L5673		DMEPOS	Socket insert w lock mech	Always requires Prior Authorization.
L5676		DMEPOS	Bk knee joints single axis p	Always requires Prior Authorization.
L5677		DMEPOS	Bk knee joints polycentric p	Always requires Prior Authorization.
L5678		DMEPOS	Bk joint covers pair	Always requires Prior Authorization.
L5679		DMEPOS	Socket insert w/o lock mech	Always requires Prior Authorization.
L5680		DMEPOS	Bk thigh lacer non-molded	Always requires Prior Authorization.
L5681		DMEPOS	Intl custm cong/latyp insert	Always requires Prior Authorization.
L5682		DMEPOS	Bk thigh lacer glut/ischia m	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

**J3590** Always requires Prior Authorization.

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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
L5683		DMEPOS	Initial custom socket insert	Always requires Prior Authorization.
L5684		DMEPOS	Bk fork strap	Always requires Prior Authorization.
L5685		DMEPOS	Below knee sus/seal sleeve	Always requires Prior Authorization.
L5686		DMEPOS	Bk back check	Always requires Prior Authorization.
L5688		DMEPOS	Bk waist belt webbing	Always requires Prior Authorization.
L5690		DMEPOS	Bk waist belt padded and lin	Always requires Prior Authorization.
L5692		DMEPOS	Ak pelvic control belt light	Always requires Prior Authorization.
L5694		DMEPOS	Ak pelvic control belt pad/l	Always requires Prior Authorization.
L5695		DMEPOS	Ak sleeve susp neoprene/equa	Always requires Prior Authorization.
L5696		DMEPOS	Ak/knee disartic pelvic join	Always requires Prior Authorization.
L5697		DMEPOS	Ak/knee disartic pelvic band	Always requires Prior Authorization.
L5698		DMEPOS	Ak/knee disartic silesian ba	Always requires Prior Authorization.
L5699		DMEPOS	Shoulder harness	Always requires Prior Authorization.
L5700		DMEPOS	Replace socket below knee	Always requires Prior Authorization.
L5701		DMEPOS	Replace socket above knee	Always requires Prior Authorization.
L5702		DMEPOS	Replace socket hip	Always requires Prior Authorization.
L5703		DMEPOS	Symes ankle w/o (sach) foot	Always requires Prior Authorization.
L5704		DMEPOS	Custom shape cover bk	Always requires Prior Authorization.
L5705		DMEPOS	Custom shape cover ak	Always requires Prior Authorization.
L5706		DMEPOS	Custom shape cvr knee disart	Always requires Prior Authorization.
L5707		DMEPOS	Custom shape cvr hip disart	Always requires Prior Authorization.
L5710		DMEPOS	Kne-shin exo sng axi mnl loc	Always requires Prior Authorization.
L5711		DMEPOS	Knee-shin exo mnl lock ultra	Always requires Prior Authorization.
L5712		DMEPOS	Knee-shin exo frict swg & st	Always requires Prior Authorization.
L5714		DMEPOS	Knee-shin exo variable frict	Always requires Prior Authorization.
L5716		DMEPOS	Knee-shin exo mech stance ph	Always requires Prior Authorization.
L5718		DMEPOS	Knee-shin exo frct swg & sta	Always requires Prior Authorization.
L5722		DMEPOS	Knee-shin pneum swg frct exo	Always requires Prior Authorization.
L5724		DMEPOS	Knee-shin exo fluid swing ph	Always requires Prior Authorization.
L5726		DMEPOS	Knee-shin ext jnts fld swg e	Always requires Prior Authorization.
L5728		DMEPOS	Knee-shin fluid swg & stance	Always requires Prior Authorization.
L5780		DMEPOS	Knee-shin pneum/hydra pneum	Always requires Prior Authorization.
L5781		DMEPOS	Lower limb pros vacuum pump	Always requires Prior Authorization.
L5782		DMEPOS	Hd low limb pros vacuum pump	Always requires Prior Authorization.
L5785		DMEPOS	Exoskeletal bk ultralt mater	Always requires Prior Authorization.
L5790		DMEPOS	Exoskeletal ak ultra-light m	Always requires Prior Authorization.
L5795		DMEPOS	Exoskel hip ultra-light mate	Always requires Prior Authorization.
L5810		DMEPOS	Endoskel knee-shin mnl lock	Always requires Prior Authorization.
L5811		DMEPOS	Endo knee-shin mnl lck ultra	Always requires Prior Authorization.
L5812		DMEPOS	Endo knee-shin frct swg & st	Always requires Prior Authorization.
L5814		DMEPOS	Endo knee-shin hydra swg ph	Always requires Prior Authorization.
L5816		DMEPOS	Endo knee-shin polyc mch sta	Always requires Prior Authorization.
L5818		DMEPOS	Endo knee-shin frct swg & st	Always requires Prior Authorization.
L5822		DMEPOS	Endo knee-shin pneum swg frc	Always requires Prior Authorization.
L5824		DMEPOS	Endo knee-shin fluid swing p	Always requires Prior Authorization.
L5826		DMEPOS	Miniature knee joint	Always requires Prior Authorization.
L5828		DMEPOS	Endo knee-shin fluid swg/sta	Always requires Prior Authorization.
L5830		DMEPOS	Endo knee-shin pneum/swg pha	Always requires Prior Authorization.
L5840		DMEPOS	Multi-axial knee/shin system	Always requires Prior Authorization.
L5845		DMEPOS	Knee-shin sys stance flexion	Always requires Prior Authorization.
L5848		DMEPOS	Knee-shin sys hydraul stance	Always requires Prior Authorization.
L5850		DMEPOS	Endo ak/hip knee extens assi	Always requires Prior Authorization.
L5855		DMEPOS	Mech hip extension assist	Always requires Prior Authorization.
L5856		DMEPOS	Elec knee-shin swing/stance	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



### Key Rule Description

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**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
L5857		DMEPOS	Elec knee-shin swing only	Always requires Prior Authorization.
L5858		DMEPOS	Stance phase only	Always requires Prior Authorization.
L5859		DMEPOS	Knee-shin pro flex/ext cont	Always requires Prior Authorization.
L5910		DMEPOS	Endo below knee alignable sy	Always requires Prior Authorization.
L5920		DMEPOS	Endo ak/hip alignable system	Always requires Prior Authorization.
L5925		DMEPOS	Above knee manual lock	Always requires Prior Authorization.
L5930		DMEPOS	High activity knee frame	Always requires Prior Authorization.
L5940		DMEPOS	Endo bk ultra-light material	Always requires Prior Authorization.
L5950		DMEPOS	Endo ak ultra-light material	Always requires Prior Authorization.
L5960		DMEPOS	Endo hip ultra-light materia	Always requires Prior Authorization.
L5961		DMEPOS	Endo poly hip, pneu/hyd/rot	Always requires Prior Authorization.
L5962		DMEPOS	Below knee flex cover system	Always requires Prior Authorization.
L5964		DMEPOS	Above knee flex cover system	Always requires Prior Authorization.
L5966		DMEPOS	Hip flexible cover system	Always requires Prior Authorization.
L5968		DMEPOS	Multiaxial ankle w dorsiflex	Always requires Prior Authorization.
L5970		DMEPOS	Foot external keel sach foot	Always requires Prior Authorization.
L5971		DMEPOS	Sach foot, replacement	Always requires Prior Authorization.
L5972		DMEPOS	Flexible keel foot	Always requires Prior Authorization.
L5973		DMEPOS	Ank-foot sys dors-plant flex	Always requires Prior Authorization.
L5974		DMEPOS	Foot single axis ankle/foot	Always requires Prior Authorization.
L5975		DMEPOS	Combo ankle/foot prosthesis	Always requires Prior Authorization.
L5976		DMEPOS	Energy storing foot	Always requires Prior Authorization.
L5978		DMEPOS	Ft prosth multiaxial ankl/ft	Always requires Prior Authorization.
L5979		DMEPOS	Multi-axial ankle/ft prosth	Always requires Prior Authorization.
L5980		DMEPOS	Flex foot system	Always requires Prior Authorization.
L5981		DMEPOS	Flex-walk sys low ext prosth	Always requires Prior Authorization.
L5982		DMEPOS	Exoskeletal axial rotation u	Always requires Prior Authorization.
L5984		DMEPOS	Endoskeletal axial rotation	Always requires Prior Authorization.
L5985		DMEPOS	Lwr ext dynamic prosth pylon	Always requires Prior Authorization.
L5986		DMEPOS	Multi-axial rotation unit	Always requires Prior Authorization.
L5987		DMEPOS	Shank ft w vert load pylon	Always requires Prior Authorization.
L5988		DMEPOS	Vertical shock reducing pylo	Always requires Prior Authorization.
L5990		DMEPOS	User adjustable heel height	Always requires Prior Authorization.
L6000		DMEPOS	Part hand thumb rem	Always requires Prior Authorization.
L6010		DMEPOS	Part hand little/ring	Always requires Prior Authorization.
L6020		DMEPOS	Part hand no fingers	Always requires Prior Authorization.
L6026		DMEPOS	Part hand myo exclu term dev	Always requires Prior Authorization.
L6050		DMEPOS	Wrst mld sck flx hng tri pad	Always requires Prior Authorization.
L6055		DMEPOS	Wrst mold sock w/exp interfa	Always requires Prior Authorization.
L6100		DMEPOS	Elb mold sock flex hinge pad	Always requires Prior Authorization.
L6110		DMEPOS	Elbow mold sock suspension t	Always requires Prior Authorization.
L6120		DMEPOS	Elbow mold doub splnt soc ste	Always requires Prior Authorization.
L6130		DMEPOS	Elbow stump activated lock h	Always requires Prior Authorization.
L6200		DMEPOS	Elbow mold outsid lock hinge	Always requires Prior Authorization.
L6205		DMEPOS	Elbow molded w/ expand inter	Always requires Prior Authorization.
L6250		DMEPOS	Elbow inter loc elbow forarm	Always requires Prior Authorization.
L6300		DMEPOS	Shlder disart int lock elbow	Always requires Prior Authorization.
L6310		DMEPOS	Shoulder passive restor comp	Always requires Prior Authorization.
L6320		DMEPOS	Shoulder passive restor cap	Always requires Prior Authorization.
L6350		DMEPOS	Thoracic intern lock elbow	Always requires Prior Authorization.
L6360		DMEPOS	Thoracic passive restor comp	Always requires Prior Authorization.
L6370		DMEPOS	Thoracic passive restor cap	Always requires Prior Authorization.
L6380		DMEPOS	Postop dsg cast chg wrst/elb	Always requires Prior Authorization.
L6382		DMEPOS	Postop dsg cast chg elb dis/	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

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Code	Mod	Procedures & Services	Description	Rule Description
L6384		DMEPOS	Postop dsg cast chg shlder/t	Always requires Prior Authorization.
L6386		DMEPOS	Postop ea cast chg & realign	Always requires Prior Authorization.
L6388		DMEPOS	Postop applicat rigid dsg on	Always requires Prior Authorization.
L6400		DMEPOS	Below elbow prosth tiss shap	Always requires Prior Authorization.
L6450		DMEPOS	Elb disart prosth tiss shap	Always requires Prior Authorization.
L6500		DMEPOS	Above elbow prosth tiss shap	Always requires Prior Authorization.
L6550		DMEPOS	Shldr disar prosth tiss shap	Always requires Prior Authorization.
L6570		DMEPOS	Scap thorac prosth tiss shap	Always requires Prior Authorization.
L6580		DMEPOS	Wrist/elbow bowden cable mol	Always requires Prior Authorization.
L6582		DMEPOS	Wrist/elbow bowden cbl dir f	Always requires Prior Authorization.
L6584		DMEPOS	Elbow fair lead cable molded	Always requires Prior Authorization.
L6586		DMEPOS	Elbow fair lead cable dir fo	Always requires Prior Authorization.
L6588		DMEPOS	Shdr fair lead cable molded	Always requires Prior Authorization.
L6590		DMEPOS	Shdr fair lead cable direct	Always requires Prior Authorization.
L6600		DMEPOS	Polycentric hinge pair	Always requires Prior Authorization.
L6605		DMEPOS	Single pivot hinge pair	Always requires Prior Authorization.
L6610		DMEPOS	Flexible metal hinge pair	Always requires Prior Authorization.
L6611		DMEPOS	Additional switch, ext power	Always requires Prior Authorization.
L6615		DMEPOS	Disconnect locking wrist uni	Always requires Prior Authorization.
L6616		DMEPOS	Disconnect insert locking wr	Always requires Prior Authorization.
L6620		DMEPOS	Flexion/extension wrist unit	Always requires Prior Authorization.
L6621		DMEPOS	Flex/ext wrist w/wo friction	Always requires Prior Authorization.
L6623		DMEPOS	Spring-ass rot wrst w/ latch	Always requires Prior Authorization.
L6624		DMEPOS	Flex/ext/rotation wrist unit	Always requires Prior Authorization.
L6625		DMEPOS	Rotation wrst w/ cable lock	Always requires Prior Authorization.
L6628		DMEPOS	Quick disconn hook adapter o	Always requires Prior Authorization.
L6629		DMEPOS	Lamination collar w/ couplin	Always requires Prior Authorization.
L6630		DMEPOS	Stainless steel any wrist	Always requires Prior Authorization.
L6632		DMEPOS	Latex suspension sleeve each	Always requires Prior Authorization.
L6635		DMEPOS	Lift assist for elbow	Always requires Prior Authorization.
L6637		DMEPOS	Nudge control elbow lock	Always requires Prior Authorization.
L6638		DMEPOS	Elec lock on manual pw elbow	Always requires Prior Authorization.
L6640		DMEPOS	Shoulder abduction joint pai	Always requires Prior Authorization.
L6641		DMEPOS	Excursion amplifier pulley t	Always requires Prior Authorization.
L6642		DMEPOS	Excursion amplifier lever ty	Always requires Prior Authorization.
L6645		DMEPOS	Shoulder flexion-abduction j	Always requires Prior Authorization.
L6646		DMEPOS	Multipo locking shoulder jnt	Always requires Prior Authorization.
L6647		DMEPOS	Shoulder lock actuator	Always requires Prior Authorization.
L6648		DMEPOS	Ext pwrd shlder lock/unlock	Always requires Prior Authorization.
L6650		DMEPOS	Shoulder universal joint	Always requires Prior Authorization.
L6655		DMEPOS	Standard control cable extra	Always requires Prior Authorization.
L6660		DMEPOS	Heavy duty control cable	Always requires Prior Authorization.
L6665		DMEPOS	Teflon or equal cable lining	Always requires Prior Authorization.
L6670		DMEPOS	Hook to hand cable adapter	Always requires Prior Authorization.
L6672		DMEPOS	Harness chest/shlder saddle	Always requires Prior Authorization.
L6675		DMEPOS	Harness figure of 8 sing con	Always requires Prior Authorization.
L6676		DMEPOS	Harness figure of 8 dual con	Always requires Prior Authorization.
L6677		DMEPOS	Ue triple control harness	Always requires Prior Authorization.
L6680		DMEPOS	Test sock wrist disart/bel e	Always requires Prior Authorization.
L6682		DMEPOS	Test sock elbw disart/above	Always requires Prior Authorization.
L6684		DMEPOS	Test socket shldr disart/tho	Always requires Prior Authorization.
L6686		DMEPOS	Suction socket	Always requires Prior Authorization.
L6687		DMEPOS	Frame typ socket bel elbow/w	Always requires Prior Authorization.
L6688		DMEPOS	Frame typ sock above elb/dis	Always requires Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L6689		DMEPOS	Frame typ socket shoulder di	Always requires Prior Authorization.
L6690		DMEPOS	Frame typ sock interscap-tho	Always requires Prior Authorization.
L6691		DMEPOS	Removable insert each	Always requires Prior Authorization.
L6692		DMEPOS	Silicone gel insert or equal	Always requires Prior Authorization.
L6693		DMEPOS	Lockingelbow forearm cntrbal	Always requires Prior Authorization.
L6694		DMEPOS	Elbow socket ins use w/lock	Always requires Prior Authorization.
L6695		DMEPOS	Elbow socket ins use w/o lck	Always requires Prior Authorization.
L6696		DMEPOS	Cus elbo skt in for con/atyp	Always requires Prior Authorization.
L6697		DMEPOS	Cus elbo skt in not con/atyp	Always requires Prior Authorization.
L6698		DMEPOS	Below/above elbow lock mech	Always requires Prior Authorization.
L6703		DMEPOS	Term dev, passive hand mitt	Always requires Prior Authorization.
L6704		DMEPOS	Term dev, sport/rec/work att	Always requires Prior Authorization.
L6706		DMEPOS	Term dev mech hook vol open	Always requires Prior Authorization.
L6707		DMEPOS	Term dev mech hook vol close	Always requires Prior Authorization.
L6708		DMEPOS	Term dev mech hand vol open	Always requires Prior Authorization.
L6709		DMEPOS	Term dev mech hand vol close	Always requires Prior Authorization.
L6711		DMEPOS	Ped term dev, hook, vol open	Always requires Prior Authorization.
L6712		DMEPOS	Ped term dev, hook, vol clos	Always requires Prior Authorization.
L6713		DMEPOS	Ped term dev, hand, vol open	Always requires Prior Authorization.
L6714		DMEPOS	Ped term dev, hand, vol clos	Always requires Prior Authorization.
L6715		DMEPOS	Term device, multi art digit	Always requires Prior Authorization.
L6721		DMEPOS	Hook/hand, hvy dty, vol open	Always requires Prior Authorization.
L6722		DMEPOS	Hook/hand, hvy dty, vol clos	Always requires Prior Authorization.
L6805		DMEPOS	Term dev modifier wrist unit	Always requires Prior Authorization.
L6810		DMEPOS	Term dev precision pinch dev	Always requires Prior Authorization.
L6880		DMEPOS	Elec hand ind art digits	Always requires Prior Authorization.
L6881		DMEPOS	Term dev auto grasp feature	Always requires Prior Authorization.
L6882		DMEPOS	Microprocessor control uplmb	Always requires Prior Authorization.
L6883		DMEPOS	Replc sockt below e/w disa	Always requires Prior Authorization.
L6884		DMEPOS	Replc sockt above elbow disa	Always requires Prior Authorization.
L6885		DMEPOS	Replc sockt shldr dis/interc	Always requires Prior Authorization.
L6890		DMEPOS	Prefab glove for term device	Always requires Prior Authorization.
L6895		DMEPOS	Custom glove for term device	Always requires Prior Authorization.
L6900		DMEPOS	Hand restorat thumb/1 finger	Always requires Prior Authorization.
L6905		DMEPOS	Hand restoration multiple fi	Always requires Prior Authorization.
L6910		DMEPOS	Hand restoration no fingers	Always requires Prior Authorization.
L6915		DMEPOS	Hand restoration replacmnt g	Always requires Prior Authorization.
L6920		DMEPOS	Wrist disartic switch ctrl	Always requires Prior Authorization.
L6925		DMEPOS	Wrist disart myoelectronic c	Always requires Prior Authorization.
L6930		DMEPOS	Below elbow switch control	Always requires Prior Authorization.
L6935		DMEPOS	Below elbow myoelectronic ct	Always requires Prior Authorization.
L6940		DMEPOS	Elbow disarticulation switch	Always requires Prior Authorization.
L6945		DMEPOS	Elbow disart myoelectronic c	Always requires Prior Authorization.
L6950		DMEPOS	Above elbow switch control	Always requires Prior Authorization.
L6955		DMEPOS	Above elbow myoelectronic ct	Always requires Prior Authorization.
L6960		DMEPOS	Shldr disartic switch contro	Always requires Prior Authorization.
L6965		DMEPOS	Shldr disartic myoelectronic	Always requires Prior Authorization.
L6970		DMEPOS	Interscapular-thor switch ct	Always requires Prior Authorization.
L6975		DMEPOS	Interscap-thor myoelectronic	Always requires Prior Authorization.
L7007		DMEPOS	Adult electric hand	Always requires Prior Authorization.
L7008		DMEPOS	Pediatric electric hand	Always requires Prior Authorization.
L7009		DMEPOS	Adult electric hook	Always requires Prior Authorization.
L7040		DMEPOS	Prehensile actuator	Always requires Prior Authorization.
L7045		DMEPOS	Pediatric electric hook	Always requires Prior Authorization.

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

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**Only Inpatient** HCPCS Codes That Are Paid Only as Inpatient Procedures per Medicare.

**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
L7170		DMEPOS	Electronic elbow hosmer swit	Always requires Prior Authorization.
L7180		DMEPOS	Electronic elbow sequential	Always requires Prior Authorization.
L7181		DMEPOS	Electronic elbo simultaneous	Always requires Prior Authorization.
L7185		DMEPOS	Electron elbow adolescent sw	Always requires Prior Authorization.
L7186		DMEPOS	Electron elbow child switch	Always requires Prior Authorization.
L7190		DMEPOS	Elbow adolescent myoelectron	Always requires Prior Authorization.
L7191		DMEPOS	Elbow child myoelectronic ct	Always requires Prior Authorization.
L7259		DMEPOS	Electronic wrist rotator any	Always requires Prior Authorization.
L7360		DMEPOS	Six volt bat otto bock/eq ea	Always requires Prior Authorization.
L7362		DMEPOS	Battery chrgr six volt otto	Always requires Prior Authorization.
L7364		DMEPOS	Twelve volt battery utah/equ	Always requires Prior Authorization.
L7366		DMEPOS	Battery chrgr 12 volt utah/e	Always requires Prior Authorization.
L7367		DMEPOS	Replacemnt lithium ionbatter	Always requires Prior Authorization.
L7368		DMEPOS	Lithium ion battery charger	Always requires Prior Authorization.
L7400		DMEPOS	Add ue prost be/wd, utl lite	Always requires Prior Authorization.
L7401		DMEPOS	Add ue prost a/e utl lite mat	Always requires Prior Authorization.
L7402		DMEPOS	Add ue prost s/d utl lite mat	Always requires Prior Authorization.
L7403		DMEPOS	Add ue prost b/e acrylic	Always requires Prior Authorization.
L7404		DMEPOS	Add ue prost a/e acrylic	Always requires Prior Authorization.
L7405		DMEPOS	Add ue prost s/d acrylic	Always requires Prior Authorization.
L8000		DMEPOS	Mastectomy bra	DME > \$500
L8001		DMEPOS	Breast prosthesis bra & form	DME > \$500
L8002		DMEPOS	Brst prsth bra & bilat form	DME > \$500
L8015		DMEPOS	Ext breastprosthesis garment	DME > \$500
L8020		DMEPOS	Mastectomy form	DME > \$500
L8030		DMEPOS	Breast prosthes w/o adhesive	DME > \$500
L8031		DMEPOS	Breast prosthesis w adhesive	DME > \$500
L8032		DMEPOS	Reusable nipple prosthesis	DME > \$500
L8035		DMEPOS	Custom breast prosthesis	DME > \$500
L8040	KM	DMEPOS	Nasal prosthesis	Always requires Prior Authorization.
L8040	KN	DMEPOS	Nasal prosthesis	Always requires Prior Authorization.
L8040		DMEPOS	Nasal prosthesis	Always requires Prior Authorization.
L8041	KM	DMEPOS	Midfacial prosthesis	Always requires Prior Authorization.
L8041	KN	DMEPOS	Midfacial prosthesis	Always requires Prior Authorization.
L8041		DMEPOS	Midfacial prosthesis	Always requires Prior Authorization.
L8042	KM	DMEPOS	Orbital prosthesis	Always requires Prior Authorization.
L8042	KN	DMEPOS	Orbital prosthesis	Always requires Prior Authorization.
L8042		DMEPOS	Orbital prosthesis	Always requires Prior Authorization.
L8043	KM	DMEPOS	Upper facial prosthesis	Always requires Prior Authorization.
L8043	KN	DMEPOS	Upper facial prosthesis	Always requires Prior Authorization.
L8043		DMEPOS	Upper facial prosthesis	Always requires Prior Authorization.
L8044	KM	DMEPOS	Hemi-facial prosthesis	Always requires Prior Authorization.
L8044	KN	DMEPOS	Hemi-facial prosthesis	Always requires Prior Authorization.
L8044		DMEPOS	Hemi-facial prosthesis	Always requires Prior Authorization.
L8045	KM	DMEPOS	Auricular prosthesis	Always requires Prior Authorization.
L8045	KN	DMEPOS	Auricular prosthesis	Always requires Prior Authorization.
L8045		DMEPOS	Auricular prosthesis	Always requires Prior Authorization.
L8046	KM	DMEPOS	Partial facial prosthesis	Always requires Prior Authorization.
L8046	KN	DMEPOS	Partial facial prosthesis	Always requires Prior Authorization.
L8046		DMEPOS	Partial facial prosthesis	Always requires Prior Authorization.
L8047	KM	DMEPOS	Nasal septal prosthesis	Always requires Prior Authorization.
L8047	KN	DMEPOS	Nasal septal prosthesis	Always requires Prior Authorization.
L8047		DMEPOS	Nasal septal prosthesis	Always requires Prior Authorization.
L8300		DMEPOS	Truss single w/ standard pad	Always requires Prior Authorization.



## 2018 HealthTeam Advantage Prior Authorization Code List



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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

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Code	Mod	Procedures & Services	Description	Rule Description
L8310		DMEPOS	Truss double w/ standard pad	Always requires Prior Authorization.
L8320		DMEPOS	Truss addition to std pad wa	Always requires Prior Authorization.
L8330		DMEPOS	Truss add to std pad scrotal	Always requires Prior Authorization.
L8400		DMEPOS	Sheath below knee	Always requires Prior Authorization.
L8410		DMEPOS	Sheath above knee	Always requires Prior Authorization.
L8415		DMEPOS	Sheath upper limb	Always requires Prior Authorization.
L8417		DMEPOS	Pros sheath/sock w gel cushn	Always requires Prior Authorization.
L8420		DMEPOS	Prosthetic sock multi ply bk	Always requires Prior Authorization.
L8430		DMEPOS	Prosthetic sock multi ply ak	Always requires Prior Authorization.
L8435		DMEPOS	Pros sock multi ply upper lm	Always requires Prior Authorization.
L8440		DMEPOS	Shrinker below knee	Always requires Prior Authorization.
L8460		DMEPOS	Shrinker above knee	Always requires Prior Authorization.
L8465		DMEPOS	Shrinker upper limb	Always requires Prior Authorization.
L8470		DMEPOS	Pros sock single ply bk	Always requires Prior Authorization.
L8480		DMEPOS	Pros sock single ply ak	Always requires Prior Authorization.
L8485		DMEPOS	Pros sock single ply upper l	Always requires Prior Authorization.
L8500		DMEPOS	Artificial larynx	Always requires Prior Authorization.
L8501		DMEPOS	Tracheostomy speaking valve	Always requires Prior Authorization.
L8507		DMEPOS	Trach-esoph voice pros pt in	Always requires Prior Authorization.
L8509		DMEPOS	Trach-esoph voice pros md in	Always requires Prior Authorization.
L8510		DMEPOS	Voice amplifier	Always requires Prior Authorization.
L8511		DMEPOS	Indwelling trach insert	Always requires Prior Authorization.
L8512		DMEPOS	Gel cap for trach voice pros	Always requires Prior Authorization.
L8513		DMEPOS	Trach pros cleaning device	Always requires Prior Authorization.
L8514		DMEPOS	Repl trach puncture dilator	Always requires Prior Authorization.
L8515		DMEPOS	Gel cap app device for trach	Always requires Prior Authorization.
L8600		DMEPOS	Implant breast silicone/eq	Always requires Prior Authorization.
L8603		DMEPOS	Collagen imp urinary 2.5 ml	Always requires Prior Authorization.
L8605		DMEPOS	Inj bulking agent anal canal	Always requires Prior Authorization.
L8606		DMEPOS	Synthetic implnt urinary 1ml	Always requires Prior Authorization.
L8607		DMEPOS	Inj vocal cord bulking agent	Always requires Prior Authorization.
L8609		DMEPOS	Artificial cornea	Always requires Prior Authorization.
L8610		DMEPOS	Ocular implant	Always requires Prior Authorization.
L8612		DMEPOS	Aqueous shunt prosthesis	Always requires Prior Authorization.
L8613		DMEPOS	Ossicular implant	Always requires Prior Authorization.
L8614		Auditory Implants	Cochlear device	Always requires Prior Authorization.
L8615		Auditory Implants	Coch implant headset replace	Always requires Prior Authorization.
L8616		Auditory Implants	Coch implant microphone repl	Always requires Prior Authorization.
L8617		Auditory Implants	Coch implant trans coil repl	Always requires Prior Authorization.
L8618		Auditory Implants	Coch implant tran cable repl	Always requires Prior Authorization.
L8619		Auditory Implants	Coch imp ext proc/contr rplc	Always requires Prior Authorization.
L8621		DMEPOS	Repl zinc air battery	Always requires Prior Authorization.
L8622		DMEPOS	Repl alkaline battery	Always requires Prior Authorization.
L8623		DMEPOS	Lith ion batt cid,non-earlvl	Always requires Prior Authorization.
L8624		DMEPOS	Lith ion batt cid, ear level	Always requires Prior Authorization.
L8627		Auditory Implants	Cid ext speech process repl	Always requires Prior Authorization.
L8628		Auditory Implants	Cid ext controller repl	Always requires Prior Authorization.
L8629		DMEPOS	Cid transmit coil and cable	Always requires Prior Authorization.
L8630		DMEPOS	Metacarpophalangeal implant	Always requires Prior Authorization.
L8631		DMEPOS	Mcp joint repl 2 pc or more	Always requires Prior Authorization.
L8641		DMEPOS	Metatarsal joint implant	Always requires Prior Authorization.
L8642		DMEPOS	Hallux implant	Always requires Prior Authorization.
L8658		DMEPOS	Interphalangeal joint spacer	Always requires Prior Authorization.
L8659		DMEPOS	Interphalangeal joint repl	Always requires Prior Authorization.

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**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

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Code	Mod	Procedures & Services	Description	Rule Description
L8670		DMEPOS	Vascular graft, synthetic	Always requires Prior Authorization.
L8679		DMEPOS	Imp neurosti pls gn any type	Always requires Prior Authorization.
L8681		DMEPOS	Pt prgrm for implt neurostim	Always requires Prior Authorization.
L8682		DMEPOS	Implt neurostim radiofq rec	Always requires Prior Authorization.
L8683		DMEPOS	Radiofq trsmtr for implt neu	Always requires Prior Authorization.
L8684		DMEPOS	Radiofq trsmtr implt sclr neu	Always requires Prior Authorization.
L8689		DMEPOS	External recharg sys intern	Always requires Prior Authorization.
L8690		Auditory Implants	Aud osseo dev, int/ext comp	Always requires Prior Authorization.
L8691		Auditory Implants	Aoi snd proc repl excl actua	Always requires Prior Authorization.
L8693		Auditory Implants	Aud osseo dev, abutment	Always requires Prior Authorization.
L8695		DMEPOS	External recharg sys extern	Always requires Prior Authorization.
L8696		DMEPOS	Ext antenna phren nerve stim	Always requires Prior Authorization.
Q0081		Home Health Care - Non-nutritional	Infusion ther other than che	
Q0478		DMEPOS	Power adapter, combo vad	DME > \$500
Q0479		DMEPOS	Power module combo vad, rep	DME > \$500
Q0480		DMEPOS	Driver pneumatic vad, rep	DME > \$500
Q0481		DMEPOS	Microprcsr cu elec vad, rep	DME > \$500
Q0482		DMEPOS	Microprcsr cu combo vad, rep	DME > \$500
Q0483		DMEPOS	Monitor elec vad, rep	DME > \$500
Q0484		DMEPOS	Monitor elec or comb vad rep	DME > \$500
Q0485		DMEPOS	Monitor cable elec vad, rep	DME > \$500
Q0486		DMEPOS	Mon cable elec/pneum vad rep	DME > \$500
Q0487		DMEPOS	Leads any type vad, rep only	DME > \$500
Q0489		DMEPOS	Pwr pck base combo vad, rep	DME > \$500
Q0490		DMEPOS	Emr pwr source elec vad, rep	DME > \$500
Q0491		DMEPOS	Emr pwr source combo vad rep	DME > \$500
Q0492		DMEPOS	Emr pwr cbl elec vad, rep	DME > \$500
Q0493		DMEPOS	Emr pwr cbl combo vad, rep	DME > \$500
Q0494		DMEPOS	Emr hd pmp elec/combo, rep	DME > \$500
Q0495		DMEPOS	Charger elec/combo vad, rep	DME > \$500
Q0496		DMEPOS	Battery elec/combo vad, rep	DME > \$500
Q0497		DMEPOS	Bat clps elec/comb vad, rep	DME > \$500
Q0498		DMEPOS	Holster elec/combo vad, rep	DME > \$500
Q0499		DMEPOS	Belt/vest elec/combo vad rep	DME > \$500
Q0500		DMEPOS	Filters elec/combo vad, rep	DME > \$500
Q0501		DMEPOS	Shwr cov elec/combo vad, rep	DME > \$500
Q0502		DMEPOS	Mobility cart pneum vad, rep	DME > \$500
Q0503		DMEPOS	Battery pneum vad replacemnt	DME > \$500
Q0504		DMEPOS	Pwr adpt pneum vad, rep veh	DME > \$500
Q0506		DMEPOS	Lith-ion batt elec/pneum vad	DME > \$500
Q0513		Home Health Care - Non-nutritional	Disp fee inhal drugs/30 days	
Q2026		Cosmetic & Reconstructive	Radiesse injection	
Q2050		Chemotherapy Injectable Drugs	Doxorubicin inj 10mg	
Q2052		Chemotherapy Injectable Drugs	IVIG demo, services/supplies	
Q3001		Chemotherapy Injectable Drugs	Brachytherapy radioelements	
Q4001		DMEPOS	Cast sup body cast plaster	DME > \$500
Q4002		DMEPOS	Cast sup body cast fiberglas	DME > \$500
Q4003		DMEPOS	Cast sup shoulder cast plstr	DME > \$500
Q4004		DMEPOS	Cast sup shoulder cast fbrgl	DME > \$500
Q4005		DMEPOS	Cast sup long arm adult plst	DME > \$500
Q4006		DMEPOS	Cast sup long arm adult fbrg	DME > \$500
Q4007		DMEPOS	Cast sup long arm ped plaster	DME > \$500
Q4008		DMEPOS	Cast sup long arm ped fbrgls	DME > \$500
Q4009		DMEPOS	Cast sup sht arm adult plstr	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
Q4010		DMEPOS	Cast sup sht arm adult fbrgl	DME > \$500
Q4011		DMEPOS	Cast sup sht arm ped plaster	DME > \$500
Q4012		DMEPOS	Cast sup sht arm ped fbrglas	DME > \$500
Q4013		DMEPOS	Cast sup gauntlet plaster	DME > \$500
Q4014		DMEPOS	Cast sup gauntlet fiberglass	DME > \$500
Q4015		DMEPOS	Cast sup gauntlet ped plster	DME > \$500
Q4016		DMEPOS	Cast sup gauntlet ped fbrgls	DME > \$500
Q4017		DMEPOS	Cast sup lng arm splint plst	DME > \$500
Q4018		DMEPOS	Cast sup lng arm splint fbrg	DME > \$500
Q4019		DMEPOS	Cast sup lng arm splnt ped p	DME > \$500
Q4020		DMEPOS	Cast sup lng arm splnt ped f	DME > \$500
Q4021		DMEPOS	Cast sup sht arm splint plst	DME > \$500
Q4022		DMEPOS	Cast sup sht arm splint fbrg	DME > \$500
Q4023		DMEPOS	Cast sup sht arm splnt ped p	DME > \$500
Q4024		DMEPOS	Cast sup sht arm splnt ped f	DME > \$500
Q4025		DMEPOS	Cast sup hip spica plaster	DME > \$500
Q4026		DMEPOS	Cast sup hip spica fiberglas	DME > \$500
Q4027		DMEPOS	Cast sup hip spica ped plstr	DME > \$500
Q4028		DMEPOS	Cast sup hip spica ped fbrgl	DME > \$500
Q4029		DMEPOS	Cast sup long leg plaster	DME > \$500
Q4030		DMEPOS	Cast sup long leg fiberglass	DME > \$500
Q4031		DMEPOS	Cast sup lng leg ped plaster	DME > \$500
Q4032		DMEPOS	Cast sup lng leg ped fbrgls	DME > \$500
Q4033		DMEPOS	Cast sup lng leg cylinder pl	DME > \$500
Q4034		DMEPOS	Cast sup lng leg cylinder fb	DME > \$500
Q4035		DMEPOS	Cast sup lng leg cylndr ped p	DME > \$500
Q4036		DMEPOS	Cast sup lng leg cylndr ped f	DME > \$500
Q4037		DMEPOS	Cast sup shrt leg plaster	DME > \$500
Q4038		DMEPOS	Cast sup shrt leg fiberglass	DME > \$500
Q4039		DMEPOS	Cast sup shrt leg ped plster	DME > \$500
Q4040		DMEPOS	Cast sup shrt leg ped fbrgls	DME > \$500
Q4041		DMEPOS	Cast sup lng leg splnt plstr	DME > \$500
Q4042		DMEPOS	Cast sup lng leg splnt fbrgl	DME > \$500
Q4043		DMEPOS	Cast sup lng leg splnt ped p	DME > \$500
Q4044		DMEPOS	Cast sup lng leg splnt ped f	DME > \$500
Q4045		DMEPOS	Cast sup sht leg splnt plstr	DME > \$500
Q4046		DMEPOS	Cast sup sht leg splnt fbrgl	DME > \$500
Q4047		DMEPOS	Cast sup sht leg splnt ped p	DME > \$500
Q4048		DMEPOS	Cast sup sht leg splnt ped f	DME > \$500
Q4049		DMEPOS	Finger splint, static	DME > \$500
Q9969		Chemotherapy Injectable Drugs	Non-heu tc-99m add-on/dose	
T1000		Home Health Care Services	Private duty/independent nsg	
V2020		DMEPOS	Vision svcs frames purchases	DME > \$500
V2100		DMEPOS	Lens spher single plano 4.00	DME > \$500
V2101		DMEPOS	Single visn sphere 4.12-7.00	DME > \$500
V2102		DMEPOS	Singl visn sphere 7.12-20.00	DME > \$500
V2103		DMEPOS	Spherocylindr 4.00d/12-2.00d	DME > \$500
V2104		DMEPOS	Spherocylindr 4.00d/2.12-4d	DME > \$500
V2105		DMEPOS	Spherocylinder 4.00d/4.25-6d	DME > \$500
V2106		DMEPOS	Spherocylinder 4.00d/>6.00d	DME > \$500
V2107		DMEPOS	Spherocylinder 4.25d/12-2d	DME > \$500
V2108		DMEPOS	Spherocylinder 4.25d/2.12-4d	DME > \$500
V2109		DMEPOS	Spherocylinder 4.25d/4.25-6d	DME > \$500
V2110		DMEPOS	Spherocylinder 4.25d/over 6d	DME > \$500

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Code	Mod	Procedures & Services	Description	Rule Description
V2111		DMEPOS	Spherocylindr 7.25d/.25-2.25	DME > \$500
V2112		DMEPOS	Spherocylindr 7.25d/2.25-4d	DME > \$500
V2113		DMEPOS	Spherocylindr 7.25d/4.25-6d	DME > \$500
V2114		DMEPOS	Spherocylinder over 12.00d	DME > \$500
V2115		DMEPOS	Lens lenticular bifocal	DME > \$500
V2118		DMEPOS	Lens aniseikonic single	DME > \$500
V2121		DMEPOS	Lenticular lens, single	DME > \$500
V2200		DMEPOS	Lens spher bifoc plano 4.00d	DME > \$500
V2201		DMEPOS	Lens sphere bifocal 4.12-7.0	DME > \$500
V2202		DMEPOS	Lens sphere bifocal 7.12-20.	DME > \$500
V2203		DMEPOS	Lens sphcyl bifocal 4.00d/.1	DME > \$500
V2204		DMEPOS	Lens sphcy bifocal 4.00d/2.1	DME > \$500
V2205		DMEPOS	Lens sphcy bifocal 4.00d/4.2	DME > \$500
V2206		DMEPOS	Lens sphcy bifocal 4.00d/ove	DME > \$500
V2207		DMEPOS	Lens sphcy bifocal 4.25-7d/.	DME > \$500
V2208		DMEPOS	Lens sphcy bifocal 4.25-7/2.	DME > \$500
V2209		DMEPOS	Lens sphcy bifocal 4.25-7/4.	DME > \$500
V2210		DMEPOS	Lens sphcy bifocal 4.25-7/ov	DME > \$500
V2211		DMEPOS	Lens sphcy bifo 7.25-12/.25-	DME > \$500
V2212		DMEPOS	Lens sphcyl bifo 7.25-12/2.2	DME > \$500
V2213		DMEPOS	Lens sphcyl bifo 7.25-12/4.2	DME > \$500
V2214		DMEPOS	Lens sphcyl bifocal over 12.	DME > \$500
V2215		DMEPOS	Lens lenticular bifocal	DME > \$500
V2218		DMEPOS	Lens aniseikonic bifocal	DME > \$500
V2219		DMEPOS	Lens bifocal seg width over	DME > \$500
V2220		DMEPOS	Lens bifocal add over 3.25d	DME > \$500
V2221		DMEPOS	Lenticular lens, bifocal	DME > \$500
V2300		DMEPOS	Lens sphere trifocal 4.00d	DME > \$500
V2301		DMEPOS	Lens sphere trifocal 4.12-7.	DME > \$500
V2302		DMEPOS	Lens sphere trifocal 7.12-20	DME > \$500
V2303		DMEPOS	Lens sphcy trifocal 4.0/.12-	DME > \$500
V2304		DMEPOS	Lens sphcy trifocal 4.0/2.25	DME > \$500
V2305		DMEPOS	Lens sphcy trifocal 4.0/4.25	DME > \$500
V2306		DMEPOS	Lens sphcyl trifocal 4.00/>6	DME > \$500
V2307		DMEPOS	Lens sphcy trifocal 4.25-7/.	DME > \$500
V2308		DMEPOS	Lens sphc trifocal 4.25-7/2.	DME > \$500
V2309		DMEPOS	Lens sphc trifocal 4.25-7/4.	DME > \$500
V2310		DMEPOS	Lens sphc trifocal 4.25-7/>6	DME > \$500
V2311		DMEPOS	Lens sphc trifo 7.25-12/.25-	DME > \$500
V2312		DMEPOS	Lens sphc trifo 7.25-12/2.25	DME > \$500
V2313		DMEPOS	Lens sphc trifo 7.25-12/4.25	DME > \$500
V2314		DMEPOS	Lens sphcyl trifocal over 12	DME > \$500
V2315		DMEPOS	Lens lenticular trifocal	DME > \$500
V2318		DMEPOS	Lens aniseikonic trifocal	DME > \$500
V2319		DMEPOS	Lens trifocal seg width > 28	DME > \$500
V2320		DMEPOS	Lens trifocal add over 3.25d	DME > \$500
V2321		DMEPOS	Lenticular lens, trifocal	DME > \$500
V2410		DMEPOS	Lens variab asphericity sing	DME > \$500
V2430		DMEPOS	Lens variable asphericity bi	DME > \$500
V2500		DMEPOS	Contact lens pmma spherical	DME > \$500
V2501		DMEPOS	Cntct lens pmma-toric/prism	DME > \$500
V2502		DMEPOS	Contact lens pmma bifocal	DME > \$500
V2503		DMEPOS	Cntct lens pmma color vision	DME > \$500
V2510		DMEPOS	Cntct gas permeable sphericl	DME > \$500

## 2018 HealthTeam Advantage Prior Authorization Code List



**Key Rule Description**

**J3590** Always requires Prior Authorization.

**J-Codes** J-codes (except J3590) only require Prior Authorization in Home Health setting.

**Only Inpatient** HCPCS Codes That Are Paid Only as Inpatient Procedures per Medicare.

**DME > \$500** Prior Authorization required for DMEPOS with a retail purchase cost or a cumulative rental cost over \$500, unless otherwise noted.

**Note:** All Inpatient, Observation, Skilled Nursing Facility, and Home Health Services require Prior Authorization.

**Turnaround times by request type: Retroactive = 30 days (may submit up to 30 days after DOS), Standard = 14 days, Expedited = 72 hours, Concurrent = 24 hours.**

Code	Mod	Procedures & Services	Description	Rule Description
V2511		DMEPOS	Cntct toric prism ballast	DME > \$500
V2512		DMEPOS	Cntct lens gas permbl bifocl	DME > \$500
V2513		DMEPOS	Contact lens extended wear	DME > \$500
V2520		DMEPOS	Contact lens hydrophilic	DME > \$500
V2521		DMEPOS	Cntct lens hydrophilic toric	DME > \$500
V2522		DMEPOS	Cntct lens hydrophil bifocl	DME > \$500
V2523		DMEPOS	Cntct lens hydrophil extend	DME > \$500
V2530		DMEPOS	Contact lens gas impermeable	DME > \$500
V2531		DMEPOS	Contact lens gas permeable	DME > \$500
V2623		DMEPOS	Plastic eye prosth custom	DME > \$500
V2624		DMEPOS	Polishing artificial eye	DME > \$500
V2625		DMEPOS	Enlargemnt of eye prosthesis	DME > \$500
V2626		DMEPOS	Reduction of eye prosthesis	DME > \$500
V2627		DMEPOS	Scleral cover shell	DME > \$500
V2628		DMEPOS	Fabrication & fitting	DME > \$500
V2630		DMEPOS	Anter chamber intraocul lens	DME > \$500
V2631		DMEPOS	Iris support intraoclr lens	DME > \$500
V2632		DMEPOS	Post chmbr intraocular lens	DME > \$500
V2700		DMEPOS	Balance lens	DME > \$500
V2710		DMEPOS	Glass/plastic slab off prism	DME > \$500
V2715		DMEPOS	Prism lens/es	DME > \$500
V2718		DMEPOS	Fresnell prism press-on lens	DME > \$500
V2730		DMEPOS	Special base curve	DME > \$500
V2744		DMEPOS	Tint photochromatic lens/es	DME > \$500
V2745		DMEPOS	Tint, any color/solid/grad	DME > \$500
V2750		DMEPOS	Anti-reflective coating	DME > \$500
V2755		DMEPOS	Uv lens/es	DME > \$500
V2760		DMEPOS	Scratch resistant coating	DME > \$500
V2762		DMEPOS	Polarization, any lens	DME > \$500
V2770		DMEPOS	Occluder lens/es	DME > \$500
V2780		DMEPOS	Oversize lens/es	DME > \$500
V2782		DMEPOS	Lens, 1.54-1.65 p/1.60-1.79g	DME > \$500
V2783		DMEPOS	Lens, >= 1.66 p/>=1.80 g	DME > \$500
V2784		DMEPOS	Lens polycarb or equal	DME > \$500
V2786		DMEPOS	Occupational multifocal lens	DME > \$500
#END#				