

Trillium Medicaid, Health Net Commercial, Wellcare By Health Net Medicare, and Wellcare By Trillium Advantage Medicare Prior Authorization

Date: 5/1/2024

Trillium Community Health Plan (Trillium), Health Net Health Plan of Oregon, Inc. (Health Net), Wellcare By Trillium Advantage (Wellcare), and Wellcare By Health Net (Wellcare) require prior authorization (PA) as a condition of payment for many services. This Notice contains information regarding such prior authorization requirements and is applicable to all commercial, Medicaid, and Medicare products offered.

We are committed to delivering cost effective quality care to our members. This effort requires us to ensure that our members receive only treatment that is medically necessary according to current standards of practice. Prior authorization is a process initiated by the physician in which we verify the medical necessity of a treatment in advance using independent objective medical criteria and/or in network utilization, where applicable.

It is the ordering/prescribing provider's responsibility to determine which specific codes require prior authorization.

Please verify eligibility and benefits prior to rendering services for all members. Payment, regardless of authorization, is contingent on the member's eligibility at the time service is rendered. **NON-PAR PROVIDERS & FACILITIES REQUIRE AUTHORIZATION FOR ALL HMO SERVICES EXCEPT WHERE INDICATED.**

For the complete CPT/HCPCS code listing, please see the Online Prior Authorization Tool on our websites at:

- Wellcare By Trillium Advantage: [Medicare Pre-Authorization Check](#)
- Wellcare By Health Net: [Medicare Pre-Authorization Check](#)
- Health Net: [Commercial Pre-Authorization Check](#)
- Trillium Community Health Plan: [Medicaid Pre-Authorization Check](#)

Please view the following table for prior authorization requirements effective Jan. 1, 2024.

CMS New Codes Effective 1/1/2024

<u>CPT/HCPC Code</u>	<u>Description</u>	<u>Wellcare By Health Net</u>	<u>Wellcare By Trillium Advantage</u>	<u>Trillium Medicaid</u>	<u>Health Net Commercial</u>
A4287	DISP COLLAND STOR BAG FOR BRST MK ANY SZ ANY TYP EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A4457	ENEMA TUBE W/WO ADAPTER ANY TYPE REPLAC ONLY EA	Not covered	Not covered	No PA required for all	No PA required
A4468	EXSUFFLATION BELT INCL ALL SUPL AND ACCESSORIES	Not covered	Not covered	No PA required for all	No PA required
A4540	DISTAL TRANSCUT ELECTRICAL NERVE STIMULATOR	Not covered	Not covered	No PA required for all	No PA required
A4541	MONTHLY SUPPLIES FOR USE OF DEVC CODED AT E0733	No PA required for all	PA required for non-par	No PA required for all	No PA required
A4542	SUPPLIES AND ACCESS FOR EXT UPPER LIMB TREMOR STIM	No PA required for all	PA required for non-par	No PA required for all	No PA required
A6520	GRADIENT COMPR GMT GLOVE PADDED FOR NT USE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6521	GRADIENT COMPR GMT GLV PADDED FOR NT USE CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6522	GRADIENT COMPR GMT ARM PADDED FOR NT USE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6523	GRADIENT COMPR GMT ARM PADDED FOR NT USE CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6524	GRAD COMPR GMT LWR LEG AND FT PADDED FOR NT USE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6525	GRAD COMPR GMT LW LEG AND FT PAD FOR NT USE CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6526	GRAD COMPR GMT FULL LEG AND FOOT PAD FOR NT USE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6527	GRAD COMPR GMT FULL LEG AND FT PAD NT USE CUSTM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6528	GRADIENT COMPRESS GRMNT BRA FOR NIGHTTIME USE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6529	GRADIENT COMPRESS GRMT BRA FOR NIGHT USE CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6552	GRADIENT COMP STOCKING BELOW KNEE 30-40 MM HG EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6553	GRADIENT CMP STOCKNG BLW KNEE 30-40MM HG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6554	GRADIENT COMP STOCKING BLW KNEE 40 MM HG OR< EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6555	GRADIENT COMPR STCK BLW KNEE 40MM HG OR< CSTM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6556	GRADIENT COMPR STOCK THIGH LEN 18-30MMHG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6557	GRADIENT COMPR STOCK THIGH LEN 30-40MMHG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6558	GRADIENT COMPR STCK THIGH LEN 40MMHG OR< CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered

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A6559	GRAD CMP STCK FULL LEN/CHAP STY 18-30MMHG CST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6560	GRAD CMP STCK FULL LEN/CHAP STY 30-40MMHG CST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6561	GRAD CMP STCK FULL LEN/CHAP ST 40MMHG OR< CST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6562	GRADIENT COMPR STOCK WAIST LEN 18-30MMHG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6563	GRADIENT COMPR STOCK WAIST LEN 30-40MMHG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6564	GRADIENT COMPR STCK WAIST LEN 40MMHG OR< CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6565	GRADIENT COMPRESSION GAUNTLET CUSTOM EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6566	GRADIENT COMPRESSION GARMENT NECK/HEAD EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6567	GRADIENT COMPRESSION GARMENT NECK/HEAD CUSTOM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6568	GRADIENT COMPRESSION GARMENT TORSO AND SHOULDER EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6569	GRADIENT COMPRESSION GMT TORSO/SHOULDER CUSTM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6570	GRADIENT COMPRESSION GARMENT GENITAL REGION EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6571	GRADIENT COMPRESSION GMT GENITAL REGION CUSTM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6572	GRADIENT COMPRESSION GARMENT TOE CAPS EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6573	GRADIENT COMPRESSION GARMENT TOE CAPS CUSTOM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6574	GRADIENT CPRSN ARM SLEEVE AND GLOVE COMB CUSTOM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6575	GRADIENT COMPRESSION ARM SLEEVE AND GLOVE COMB EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6576	GRADIENT COMP ARM SLEEVE CUSTOM MED WEIGHT EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6577	GRADIENT COMP ARM SLEEVE CUSTOM HEAVY WEIGHT EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6578	GRADIENT COMPRESSION ARM SLEEVE EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6579	GRADIENT COMPRESSION GLOVE CUSTOM MED WEIGHT EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6580	GRADIENT COMPRESSION GLOVE CUSTOM HVY WEIGHT EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6581	GRADIENT COMPRESSION GLOVE EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6582	GRADIENT COMPRESSION GAUNTLET EACH	No PA required for all	PA required for non-par	No PA required for all	Not Covered

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A6583	GRADIENT CMP WRAP ADJ STRP BLW KNEE 30-50MMHG EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6584	GRADIENT COMPRESSION WRAP ADJUSTABLE STRAPS NOS	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6585	GRADIENT PRESSURE WRAP ADJ STRAPS ABOVE KNEE EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6586	GRADIENT PRESSURE WRAP ADJUST STRAPS FULL LEG EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6587	GRADIENT PRESSURE WRAP ADJUSTABLE STRAPS FOOT EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6588	GRADIENT PRESSURE WRAP ADJUSTABLE STRAPS ARM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6589	GRADIENT PRESSURE WRAP ADJUSTABLE STRAPS BRA EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6593	ACCESSORY FOR GRAD CPRSN GMT/WRAP ADJ STRAPS NOS	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6594	GRAD CMP BDG SUP BNDG LINER LW EXT ANY SZ/LEN EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6595	GRAD CMP BDG SUP BNDG LINER UP EXT ANY SZ/LEN EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6596	GRAD CMP BDG SUP CNFRM GAUZ P/LINEAR YD ANY W EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6597	GRAD COMPR BDG ROLL ELAS LNG STR LIN YD ANY W EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6598	GRAD COMPR BDG ROLL ELAS MD STR P/LIN YD ANY W E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6599	GRAD COMP BDG ROLL INELAS SHT STR P/ YRD ANY W E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6600	GRAD COMP BDG SUPL HIGH DENS FM SHT P/250SQ CM E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6601	GRAD COMP BDG SUPL HIGH DENS FM PAD ANY SZ/SH EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6602	GRAD COMP BDG SUP HI DNS FM ROLL BDG P/Y ANY W E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6603	GRAD COMP BDG SUP LW DENS CH FM SHT P/250SQ CM E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6604	GRAD COMP BDG SUP LW DNS FLT FM SH P/250SQ CM EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6605	GRADIENT CMP BDG SUPL PAD FOAM P/YD ANY WIDTH EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6606	GRAD COMP BDG SUPL PAD TEXTILE P/YD ANY WIDTH EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6607	GRAD COMP BDG SUPL TUB PRO ABS LAY P/YD ANY W EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6608	GRAD COMP BDG SUP TUB PRO ABS PD LY P/YD ANY W E	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A6609	GRADIENT COMPRESSION BANDAGING SUPPLY NOS	No PA required for all	PA required for non-par	No PA required for all	Not Covered

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A6610	GRADIENT COMPR STOCK BLW KNEE 18-30MM HG CUST EA	No PA required for all	PA required for non-par	No PA required for all	Not Covered
A7023	MECH ALLERGEN PARTCL BAR/INH FILT CRM NASL TOPIC	Not covered	Not covered	No PA required for all	No PA required
A9608	FLOTUFOLASTAT F18 DIAGNOSTIC 1 MCI	No PA required for all	PA required for non-par	No PA required for all	No PA required
A9609	FLUDEOXYGLUCOSE F18 UP TO 15 MCI	No PA required for all	PA required for non-par	No PA required for all	No PA required
C1600	CATHETER TRANSLUM INTRAVASC LES PREP DEV BLAD SH	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7556	BRONCH RIFL W/BALAND TRNSEN EBUS DX/TX LES FL W/PF	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7557	CATH PL CA CAG W/INJ CAG SAND I LT HC W/INJ LT VNT	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7558	CATH PL CA FOR CAG IP INJ FOR CA IMAG SAND I RAND L HC	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7560	ERCP W/RM FB/ST BIL/PDAND ENDO CAN PAP W/VIS PC/CBD	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7561	DEBR BONE 1ST 20 SQ CM>W/MAN PREPAND INS DD DV DEEP	No PA required for all	PA required for non-par	No PA required for all	No PA required
C7903	GRP PSY DX EV/TX MH/SUBST USE DISOR REM HOSP STF	No PA required for all	PA required for non-par	No PA required for all	No PA required
C9793	3D PREDICT MOD GEN PPLN CRD PRC DATA CT AG W/RPT	No PA required for all	PA required for non-par	No PA required for all	No PA required
C9794	THERAP RAD SIM-AID FLD SET CMPLX ACQ PETAND CT RDPH	No PA required for all	PA required for non-par	No PA required for all	No PA required
C9795	STEREOTACT BDY RAD THR TX FRC 1< LES PE-BAS NO<5	PA required for all	PA required for all	PA required for all	PA required for all
E0492	POWER SRCAND CTRL ELEC ORAL DVC NEUMUSC ELC STM TNG	Not covered	Not covered	PA required for all	PA required for all
E0493	ORAL DVC NM ELC STIM TONGUE MUSC PWR SAND C ELC 90D	Not covered	Not covered	PA required for all	PA required for all
E0530	ELEC POSITIONAL OSA TX W/SENSOR ALL COMP ACC ANY	PA required for all	PA required for all	PA required for all	PA required for all
E0678	NONPNEUMATIC SEQUENTIAL COMPRES GARMENT FULL LEG	PA required for all	PA required for all	PA required for all	PA required for all
E0679	NONPNEUMATIC SEQUENTIAL COMPRES GARMENT HALF LEG	PA required for all	PA required for all	PA required for all	PA required for all
E0680	NONPNEUMATIC COMPRES CONTROL W/SEQ CALIBR GRAD P	PA required for all	PA required for all	PA required for all	PA required for all
E0681	NONPNEUMATIC COMPRESS CONTROL WO CALIBRAT GRAD P	PA required for all	PA required for all	PA required for all	PA required for all
E0682	NONPNEUMATIC SEQUENTIAL COMPRES GARMENT FULL ARM	PA required for all	PA required for all	PA required for all	PA required for all
E0732	CRANIAL ELECTROTHERAPY STIMULATION SYST ANY TYPE	PA required for all	PA required for all	PA required for all	PA required for all
E0733	TRANSCUTN ELEC NRV STIM ELEC STIM TRIGEMINAL NRV	PA required for all	PA required for all	PA required for all	PA required for all

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E0734	EXTERNAL UPPER LIMB TREMOR STIM PERIPH NRV WRIST	PA required for all	PA required for all	PA required for all	PA required for all
E0735	NONINVASIVE VAGUS NERVE STIMULATOR	PA required for all	PA required for all	PA required for all	PA required for all
E1301	WHIRLPOOL TUB WALK-IN PORTABLE	PA required for all	PA required for all	PA required for all	PA required for all
E2001	SUCT PUMP HOME PORT/STN ELEC ANY W/EXT URINE MGT	No PA required for all	PA required for non-par	No PA required for all	No PA required
E3000	SPEECH VOL MODULAT SYS ANY TYPE INC ALL COMPAND ACC	PA required for all	PA required for all	PA required for all	PA required for all
G0011	INDV COUNS PREP PHYS PR HIV INC HIV RSK 15-30MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0013	INDIV COUNS PREP STAFF PRV HIV INC HIV RISK REDC	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0017	PSYCHOTH CRISIS FURNISH APP SITE SRV FIRST 60MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0018	PSYCHOTH CRISIS FURN IN APP SITE SRV ADDL 30 MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0019	COMMUNITY HEALTH INTEGRATION SERV 60 MIN PER MTH	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0022	COMMUNITY HLTH INTEG SERV EA ADD 30 MIN PER MNTH	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0023	PRINCIPAL ILLNESS NAVIG SERV 60MIN CALENDAR MNTH	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0024	PRINCIPAL ILLNESS NAVIG SRV ADD 30MIN PER CAL MO	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0136	ADMIN STD EVID-BAS SOCIAL DET HLTH RISK 5-15 MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0137	INTENSIVE OP SERV WEEK BUND MIN 9 SERV OVER 7DAY	PA required for all	PA required for all	PA required for all	PA required for all
G0140	PRINCIPAL ILLNESS NAVIGATION-PEER SUP 60 MIN/MON	No PA required for all	PA required for non-par	No PA required for all	No PA required
G0146	PRINC ILLNESS NAV-PEER SUP ADD 30MIN PER CAL MON	No PA required for all	PA required for non-par	No PA required for all	No PA required
L3161	FOOT ADDUCTUS POSITIONING DEVICE ADJUSTABLE	No PA required for all	PA required for non-par	No PA required for all	No PA required
L5615	ADD ENDOSKEL KNEE-SHIN SYS 4 BAR LINK/MULTIAXIAL	PA required for all	PA required for all	PA required for all	PA required for all
L5926	ADD TO LE PROSTH ENDOSKEL KD AK HD ROT U ANY TYP	PA required for all	PA required for all	PA required for all	PA required for all
Q4279	VENDAJE AC PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4287	DERMABIND DL PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4288	DERMABIND CH PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4289	REVOSHIELD+ AMNIOTIC BARRIER PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all

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Q4290	MEMBRANE WRAP-HYDRO(TM) PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4291	LAMELLAS XT PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4292	LAMELLAS PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4293	ACESSO DL PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4294	AMNIO QUAD-CORE PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4295	AMNIO TRI-CORE AMNIOTIC PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4296	REBOUND MATRIX PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4297	EMERGE MATRIX PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4298	AMNICORE PRO PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4299	AMNICORE PRO+ PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4300	ACESSO TL PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4301	ACTIVATE MATRIX PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4302	COMPLETE ACA PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4303	COMPLETE AA PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
Q4304	GRAFIX PLUS PER SQ CM	PA required for all	PA required for all	PA required for all	PA required for all
G9886	BEHAVIORAL CNSLG DIABETES PREV IP GROUP 60 MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G9887	BEHAVIORAL CNSLG DIABETES PREV DL 60 MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
G9888	MAINTENANCE 5 PERCENT WL FROM BASELINE WEIGHT MO 7-12	No PA required for all	PA required for non-par	No PA required for all	No PA required
0420U	ONC URTHL MRNA XPRSN PRFL RT QUAN PCR DDPCR 6SNP	PA required for all	PA required for all	PA required for all	PA required for all
0421U	ONC CLRCT SCR QUAN RT TRGT AND SGL AMP 8 RNA MRK	PA required for all	PA required for all	PA required for all	PA required for all
0422U	ONC PAN SOLID TUM ALYS DNA BMRK RSPSE ANTCA THER	PA required for all	PA required for all	PA required for all	PA required for all
0423U	PSYC GENOMIC ALYS PNL VRNT ALYS 26 GEN BUCC SWAB	PA required for all	PA required for all	PA required for all	PA required for all
0424U	ONC PRST8 XOME BASED ALYS 53 SNCRNA RT-QPCR UR	PA required for all	PA required for all	PA required for all	PA required for all
0425U	GENOME RAPID SEQ ANALYSIS EACH COMPARATOR GENOME	PA required for all	PA required for all	PA required for all	PA required for all

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0426U	GENOME ULTRA-RAPID SEQUENCE ANALYSIS	PA required for all	PA required for all	PA required for all	PA required for all
0427U	MONOCYTE DISTRIBUTION WIDTH WHOLE BLOOD	No PA required for all	PA required for non-par	No PA required for all	No PA required
0428U	ONC BRST TRGT GENOMIC SEQ CTDNA ALYS 56/> GENES	PA required for all	PA required for all	PA required for all	PA required for all
0429U	HPV OROPHARYNGEAL SWAB 14 HIGH-RISK TYPES	No PA required for all	PA required for non-par	No PA required for all	No PA required
0430U	GI MALABS EVAL AAT CALPROTECTIN PNCRTC ELASTASE	No PA required for all	PA required for non-par	No PA required for all	No PA required
0431U	GLYCINE RECEPTOR ALPHA1 IGG SERUM/CSF LCBA QUAL	No PA required for all	PA required for non-par	No PA required for all	No PA required
0432U	KLHL11 ANTB SERUM/CSF CELL BINDING ASSAY QUAL	No PA required for all	PA required for non-par	No PA required for all	No PA required
0433U	ONC PROSTATE 5 DNA REG MRK QUAN PCR WHL BLD ALG	PA required for all	PA required for all	PA required for all	PA required for all
0434U	RX METAB ADVRS RX RXN AND RSPSE VARIANT ALYS 25 GEN	PA required for all	PA required for all	PA required for all	PA required for all
0435U	ONC CHEMO CYTOX ASY CSC RX RSPSE MIN 14 RX/CMBN	No PA required for all	PA required for non-par	No PA required for all	No PA required
0436U	ONC LNG PLSM ALYS 388 PRTN APTMR BSD PRTOMC TECH	PA required for all	PA required for all	PA required for all	PA required for all
0437U	PSYC ANXIETY DO MRNA GEN XPRSN PRFL RNA 15 BMRK	PA required for all	PA required for all	PA required for all	PA required for all
0438U	RX METAB ADVRS RX RXN AND RSPSE VRNT ALYS 33 GENES	PA required for all	PA required for all	PA required for all	PA required for all
0784T	INSJ/RPLCMT PERQ ELTRD RA SPI W/INTEGRATED NSTIM	Not covered	Not covered	PA required for all	Not Covered
0785T	REVJ/RMVL NSTIM ELTRD RA SPI W/INTEGRATED NSTIM	Not covered	Not covered	Not covered	Not Covered
0786T	INSJ/RPLCMT PERQ ELTRD RA SAC W/INTEGRATED NSTIM	Not covered	Not covered	PA required for all	Not Covered
0787T	REVJ/RMVL NSTIM ELTRD RA SAC W/INTEGRATED NSTIM	Not covered	Not covered	Not covered	Not Covered
0788T	ELEC ALYS SMPL PRGRMG IINS SP/SAC NRV 1-3 PARAM	Not covered	Not covered	Not covered	Not Covered
0789T	ELEC ALYS CPLX PRGRMG IINS SP/SAC NRV 4+PARAM	Not covered	Not covered	Not covered	Not Covered
0790T	REVJ RPLCMT/RMVL TLMBR/LMBR VRT BODY TETHERING	Not covered	Not covered	PA required for all	Not Covered
0811T	REM MULTI DAY CPLX UROFLOWMETRY SETUP AND PT EDUCAJ	Not covered	Not covered	Not covered	Not Covered
0812T	REM MULTI DAY CPLX UROFLOWMETRY DEV SPLY W/REPRT	Not covered	Not covered	Not covered	Not Covered
0813T	EGD FLX TRNSORL VOL ADJMT NTRGSTR BARIATRIC BALO	Not covered	Not covered	Not covered	Not Covered

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0814T	PERQ NJX CALCIUM BIOD OSTEOCONDUCTIVE MATRL FEM	Not covered	Not covered	Not covered	Not Covered
0815T	US REMS B1 DNS AND FX RSK ASSMT 1+SITE HIPS PLVS/SPI	Not covered	Not covered	Not covered	Not Covered
0816T	OPEN INSJ/RPLCMT INTEGRATED NSTIMJ SYS PTN SUBQ	Not covered	Not covered	PA required for all	Not Covered
0817T	OPEN INSJ/RPLCMT INTEGRATED NSTIMJ SYS PTN SUBF	Not covered	Not covered	PA required for all	Not Covered
0818T	REVJ/RMVL INTEGRATED NSTIMJ SYS PTN SUBCUTANEOUS	Not covered	Not covered	Not covered	Not Covered
0819T	REVJ/RMVL INTEGRATED NSTIMJ SYS PTN SUBFASCIAL	Not covered	Not covered	Not covered	Not Covered
0820T	CONT IP MNTR AND IVNTJ PSYCHEDELIC MED THERAPY 1ST	Not covered	Not covered	Not covered	Not Covered
0821T	CONT IP MNTR AND IVNTJ PSYCHEDELIC MED THERAPY 2ND	Not covered	Not covered	Not covered	Not Covered
0822T	CONT IP MNTR AND IVNTJ PSYCHEDELIC MED THERAPY STAFF	Not covered	Not covered	Not covered	Not Covered
0823T	TCAT INSJ PERM 1CHMBR LDLS PACEMAKER R ATRIAL	Not covered	Not covered	Not covered	Not Covered
0824T	TCAT RMVL PERM 1CHMBR LDLS PACEMAKER R ATRIAL	Not covered	Not covered	Not covered	Not Covered
0825T	TCAT RMVL AND RPLCMT PERM 1CHMBR LDLS PM R ATRIAL	Not covered	Not covered	Not covered	Not Covered
0826T	PRGRMG DEV EVAL LDLS PM SINGLE CAR CHAMBER IP	Not covered	Not covered	Not covered	Not Covered
0827T	DGTZ GLASS MCRSCP SLD CYTP SMEARS W/INTERPJ	Not covered	Not covered	Not covered	Not Covered
0828T	DGTZ GLASS MCRSCP SLD CYTP SMPL FLTR METH INTERP	Not covered	Not covered	Not covered	Not Covered
0829T	DGTZ GLASS MCRSCP SLD CYTP CONCTRJ TQ SMR AND INTERP	Not covered	Not covered	Not covered	Not Covered
0830T	DGTZ GLASS MCRSCP SLD CYTP SLCTV CELL NHNCMNT TQ	Not covered	Not covered	Not covered	Not Covered
0831T	DGTZ GLASS MCRSCP SLD CYTP CERVICAL OR VAGINAL	Not covered	Not covered	Not covered	Not Covered
0832T	DGTZ GLASS MCRSCP SLD CYTP SMR OTH SRC SCR AND NTRP	Not covered	Not covered	Not covered	Not Covered
0833T	DGTZ GLASS MCRSCP SLD CYTP SMR OTH SRC PREP SCR	Not covered	Not covered	Not covered	Not Covered
0834T	DGTZ GLASS MCRSCP SLD CYTP SMR OTH SRC EXTND STD	Not covered	Not covered	Not covered	Not Covered
0835T	DGTZ GLASS MCRSCP SLD CYTP FNA IMMT 1ST EPSD EA	Not covered	Not covered	Not covered	Not Covered
0836T	DGTZ GLASS MCRSCP SLD CYTP FNA IMMT EA SEP ADDL	Not covered	Not covered	Not covered	Not Covered
0837T	DGTZ GLASS MCRSCP SLD CYTP FNA INTERPJ AND REPT	Not covered	Not covered	Not covered	Not Covered

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0838T	DGTZ GLS MCRSCP SLD CNSLT AND REPRT REF SLD PREP ELS	Not covered	Not covered	Not covered	Not Covered
0839T	DGTZ GLS MCRSCP SLD CNSLT AND REPRT REF MAT PREP SLD	Not covered	Not covered	Not covered	Not Covered
0840T	DGTZ GLS MCRSCP SLD FOR CONSLTJ COMPREHENSIVE	Not covered	Not covered	Not covered	Not Covered
0841T	DGTZ GLS MCRSCP SLD PATH CNSLT DRG SRG 1ST TIS 1	Not covered	Not covered	Not covered	Not Covered
0842T	DGTZ GLS MCRSCP SLD PATH CNSLT DRG SURG EA ADDL	Not covered	Not covered	Not covered	Not Covered
0843T	DGTZ GLS MCRSCP SLD PATH CNSLT SURG CYTL XM 1ST	Not covered	Not covered	Not covered	Not Covered
0844T	DGTZ GLS MCRSCP SLD PATH CNSLT SURG CYTL XM EA	Not covered	Not covered	Not covered	Not Covered
0845T	DGTZ GLS MCRSCP SLD IMFLUOR 1ST SINGLE ANTB STN	Not covered	Not covered	Not covered	Not Covered
0846T	DGTZ GLS MCRSCP SLD IMFLUOR EACH ADDL 1 ANTB STN	Not covered	Not covered	Not covered	Not Covered
0847T	DGTZ GLS MCRSCP SLD XM AND SLCTN ARCH TIS MOLEC ALYS	Not covered	Not covered	Not covered	Not Covered
0848T	DGTZ GLS MCRSCP SLD ISH 1ST SINGLE PROBE STAIN	Not covered	Not covered	Not covered	Not Covered
0849T	DGTZ GLS MCRSCP SLD ISH EA ADDL 1 PROBE STAIN	Not covered	Not covered	Not covered	Not Covered
0850T	DGTZ GLS MCRSCP SLD ISH EA MULT PROBE STAIN	Not covered	Not covered	Not covered	Not Covered
0851T	DGTZ GLS MCRSCP SLD M/PHMTRC ISH 1ST 1 PROBE STN	Not covered	Not covered	Not covered	Not Covered
0852T	DGTZ GLS MCRSCP SLD M/PHMTRC ISH EA ADD 1PRB STN	Not covered	Not covered	Not covered	Not Covered
0853T	DGTZ GLS MCRSCP SLD M/PHMTRC ISH EA MULT PRB STN	Not covered	Not covered	Not covered	Not Covered
0854T	DGTZ GLS MCRSCP SLD BLOOD SMEAR PERIPHERAL I AND R	Not covered	Not covered	Not covered	Not Covered
0855T	DGTZ GLS MCRSCP SLD BONE MARROW SMEAR INTERPJ	Not covered	Not covered	Not covered	Not Covered
0856T	DGTZ GLS MCRSCP SLD ELECTRON MICROSCOPY DX	Not covered	Not covered	Not covered	Not Covered
0857T	OPTO-ACOUSTIC IMG BREAST UNI AUGMNT ALYS AND REPRT	Not covered	Not covered	Not covered	Not Covered
0858T	XTRNL TRNSCRANL MAG STIMJ MEAS EVOKD CRTCL PTNTL	Not covered	Not covered	Not covered	Not Covered
0859T	NCNTC NR IFR SPECTRSC OTH/THN PAD EA ANTMC SITE	Not covered	Not covered	PA required for all	Not Covered
0860T	NCNTC NR IFR SPECTRSC SCR PAD W/PROV MANEUVERS	Not covered	Not covered	PA required for all	Not Covered
0861T	REMOVAL PG WCS LV PACING BOTH COMPONENTS	Not covered	Not covered	Not covered	Not Covered

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0862T	RELOCATION PG WCS LV PACG BATTERY COMPONENT ONLY	Not covered	Not covered	Not covered	Not Covered
0863T	RELOCATION PG WCS LV PACG TRANSMITTR COMPNT ONLY	Not covered	Not covered	Not covered	Not Covered
0864T	LOW INTENSITY ESWT CORPUS CAVERNOSUM LOW ENERGY	Not covered	Not covered	PA required for all	Not Covered
0865T	QUAN MRI ALYS BRAIN W/O DIAGNOSTIC MRI SAME SESS	Not covered	Not covered	Not covered	Not Covered
0866T	QUAN MRI ALYS BRAIN WITH DIAGNOSTIC MRI	Not covered	Not covered	Not covered	Not Covered
22836	ANT THORACIC VRT BODY TETHERING <7 VRT SEGMENTS	PA required for all	PA required for all	PA required for all	PA required for all
22837	ANT THORACIC VRT BODY TETHERING 8+ VRT SEGMENTS	PA required for all	PA required for all	PA required for all	PA required for all
22838	REVJ RPLCMT/RMVL THORACIC VRT BODY TETHERING	PA required for all	PA required for all	PA required for all	PA required for all
27278	ARTHRD SI JT PRQ W/PLMT IARTIC IMPLT WO TFXJ DEV	PA required for all	PA required for all	PA required for all	PA required for all
31242	NASAL/SINUS NDSC DSTRJ RF ABLATION PST NSL NRV	No PA required for all	PA required for non-par	No PA required for all	No PA required
31243	NASAL/SINUS NDSC DSTRJ CRYOABLATION PST NSL NRV	No PA required for all	PA required for non-par	No PA required for all	No PA required
33276	INSERTION PHRENIC NERVE STIMULATOR SYSTEM	PA required for all	PA required for all	PA required for all	PA required for all
33277	INSJ PHRENIC NRV STIMULATOR TRANSVNS SENSING LD	PA required for all	PA required for all	PA required for all	PA required for all
33278	REMOVAL PHRENIC NERVE STIMULATOR SYSTEM	No PA required for all	PA required for non-par	No PA required for all	No PA required
33279	RMVL PHRNC NRV STIMULATOR TRANSVNS STIMJ/SNSG LD	No PA required for all	PA required for non-par	No PA required for all	No PA required
33280	RMVL PHRENIC NRV STIMULATOR PULSE GENERATOR ONLY	No PA required for all	PA required for non-par	No PA required for all	No PA required
33281	REPOSITIONING PHRENIC NRV STIMULATOR TRANSVNS LD	No PA required for all	PA required for non-par	No PA required for all	No PA required
33287	RMVL AND RPLCMT PHRENIC NRV STIMULATOR PLS GENERATOR	No PA required for all	PA required for non-par	No PA required for all	No PA required
33288	RMVL AND RPLCMT PHRNC NRV STIM TRNSVNS STIMJ/SNSG LD	PA required for all	PA required for all	PA required for all	PA required for all
52284	CYSTO W/DILAT RX BALO CATH URTL STRIX/STEN MALE	No PA required for all	PA required for non-par	No PA required for all	No PA required
58580	TRANSCERVICAL ABLATION UTERINE FIBROID RF	No PA required for all	PA required for non-par	No PA required for all	No PA required
61889	INSERTION SKULL-MNTD CRANIAL NSTIM PG/RECEIVER	PA required for all	PA required for all	PA required for all	PA required for all
61891	REVJ/RPLCMT SKULL-MNTD CRANIAL NSTIM PG/RECEIVER	No PA required for all	PA required for non-par	No PA required for all	No PA required
61892	REMOVAL SKULL-MNTD CRANIAL NSTIM PG/RCVR W/CRNOP	No PA required for all	PA required for non-par	No PA required for all	No PA required

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64596	INSJ/RPLCMT PERQ ELTRD RA PN W/INT NSTIM 1ST RA	PA required for all	PA required for all	PA required for all	PA required for all
64597	INSJ/RPLCMT PERQ ELTRD RA PN INT NSTIM EA ADD RA	PA required for all	PA required for all	PA required for all	PA required for all
64598	REVISION/REMOVAL NSTIM ELTRD ARRAY PN INT NSTIM	No PA required for all	PA required for non-par	No PA required for all	No PA required
67516	SUPRACHOROIDAL SPACE NJX PHARMACOLOGIC AGENT	No PA required for all	PA required for non-par	No PA required for all	No PA required
75580	N-INVAS EST C FFR AUGMNT SW ALYS CTA I AND R PHY/QHP	No PA required for all	PA required for non-par	No PA required for all	No PA required
76984	DX INTRAOPERATIVE THORACIC AORTA ULTRASOUND	No PA required for all	PA required for non-par	No PA required for all	No PA required
76987	DX NTRAOP EPICAR CAR US CHD PLMT AND MNP TRNSDCR I AND R	No PA required for all	PA required for non-par	No PA required for all	No PA required
76988	DX NTRAOP EPCAR CAR US CHD PLMT MNPJ AND IMG ACQUISJ	No PA required for all	PA required for non-par	No PA required for all	No PA required
76989	DX INTRAOP EPICAR CARDIAC US CHD I AND R ONLY	No PA required for all	PA required for non-par	No PA required for all	No PA required
81457	SO NEO GSAP DNA ALYS MICROSATELLITE INSTABILITY	PA required for all	PA required for all	PA required for all	PA required for all
81458	SO NEO GSAP DNA ALY CPY NMBR AND MICROSATELLITE INS	PA required for all	PA required for all	PA required for all	PA required for all
81459	SO NEO GSAP DNA ALYS/DNA AND RNA CPY NMBR MCRSTL INS	PA required for all	PA required for all	PA required for all	PA required for all
81462	SO NEO GSAP CLL FR DNA/DNA AND RNA CPY NMBR AND REARGMT	PA required for all	PA required for all	PA required for all	PA required for all
81463	SO NEO GSAP CLL FR DNA ALYS CPY NMBR AND MCRSTL INS	PA required for all	PA required for all	PA required for all	PA required for all
81464	SO NEO GSAP CL FR DNA/DNA AND RNA CPY NMBR MCRST INS	PA required for all	PA required for all	PA required for all	PA required for all
81517	LIVER DS ALYS 3 BIOMARKERS IA SRM PROGNOSTIC ALG	PA required for all	PA required for all	PA required for all	PA required for all
82166	ASSAY OF ANTI-MULLERIAN HORMONE	No PA required for all	PA required for non-par	No PA required for all	No PA required
86041	ACETYLCHOLINE RECEPTOR BINDING ANTIBODY	No PA required for all	PA required for non-par	No PA required for all	No PA required
86042	ACETYLCHOLINE RECEPTOR BLOCKING ANTIBODY	No PA required for all	PA required for non-par	No PA required for all	No PA required
86043	ACETYLCHOLINE RECEPTOR MODULATING ANTIBODY	No PA required for all	PA required for non-par	No PA required for all	No PA required
86366	MUSCLE-SPECIFIC KINASE ANTIBODY	No PA required for all	PA required for non-par	No PA required for all	No PA required
87523	IADNA HEPATITIS D DELTA QUAN W/REV TRANSCRIPTION	No PA required for all	PA required for non-par	No PA required for all	No PA required
92622	DX ALY PRGRMG AND VERIF AUD OI SOUND PROCESSR 1ST 60	No PA required for all	PA required for non-par	No PA required for all	No PA required
92623	DX ALY PRGRMG AND VERIF AUD OI SOUND PROCESSR EA ADL	No PA required for all	PA required for non-par	No PA required for all	No PA required

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92972	PERCUTANEOUS TRANSLUMINAL CORONARY LITHOTRIPSY	PA required for all	PA required for all	PA required for all	PA required for all
93150	THER ACTIVATION IMPL PHRENIC NRV STIMULATOR SYS	No PA required for all	PA required for non-par	No PA required for all	No PA required
93151	INTERROG AND PRGRMG IMPL PHRENIC NRV STIMULATOR SYS	No PA required for all	PA required for non-par	No PA required for all	No PA required
93152	INTERROG AND PRGRMG IPNSS DURING POLYSOMNOGRAPHY	No PA required for all	PA required for non-par	No PA required for all	No PA required
93153	INTERROGATION WITHOUT PROGRAMMING IPNSS	No PA required for all	PA required for non-par	No PA required for all	No PA required
93584	VENOGRAPHY CHD ANOMALOUS/PERSISTENT SVC NT DRG	No PA required for all	PA required for non-par	No PA required for all	No PA required
93585	VENOGRAPHY CHD AZYGOS/HEMIAZYGOS VENOUS SYSTEM	No PA required for all	PA required for non-par	No PA required for all	No PA required
93586	VENOGRAPHY CHD CORONARY SINUS	No PA required for all	PA required for non-par	No PA required for all	No PA required
93587	VENOGRAPHY CHD VENOVENOUS COLTRL AT/ABOVE HRT	No PA required for all	PA required for non-par	No PA required for all	No PA required
93588	VENOGRAPHY CHD VENOVENOUS COLLATERAL BELOW HEART	No PA required for all	PA required for non-par	No PA required for all	No PA required
96547	INTRAOPERATIVE HIPEC PX FIRST 60 MINUTES	No PA required for all	PA required for non-par	No PA required for all	No PA required
96548	INTRAOPERATIVE HIPEC PX EACH ADDL 30 MINUTES	No PA required for all	PA required for non-par	No PA required for all	No PA required
97037	APPL MODALITY 1+ AREAS LLLT PO PAIN REDUCTION	Not covered	Not covered	No PA required for all	No PA required
97550	CAREGIVER TRAINING STRATEGIES AND TQ 1ST 30 MINUTES	No PA required for all	PA required for non-par	No PA required for all	No PA required
97551	CAREGIVER TRAINING STRATEGIES AND TQ EA ADDL 15 MIN	No PA required for all	PA required for non-par	No PA required for all	No PA required
97552	GROUP CAREGIVER TRAINING STRATEGIES AND TECHNIQUE	No PA required for all	PA required for non-par	No PA required for all	No PA required
99459	PELVIC EXAMINATION	No PA required for all	PA required for non-par	No PA required for all	No PA required