

Effective Date 8/21/2023 – Prior Authorization Requirement List

MEDICAID

Trillium Medicaid has updated its authorization codes effective 8/21/2023.

Changes to the authorization requirements for the codes are listed in the below table.

CPT/HCPC Code	Description	Authorization Required
E1399	DME Miscellaneous	Yes
A9279	Monitoring feature/device, stand-alone or integrated	No
E0147	Walker, heavy-duty, multiple braking system, variable wheel resistance	No
E0240	Bath/shower chair, with or without wheels, any size	No
E0600	Respiratory suction pump, home model	No
E0675	Pneumatic compression device, high pressure, rapid inflation/deflation cycle, for arterial insufficiency	No
99212	OFFICE/OUTPATIENT VISIT EST	No
93303	ECHO TRANSTHORACIC	No (updated to include non-PAR providers)
93320	DOPPLER ECHO EXAM HEART	No (updated to include non-PAR providers)
93325	DOPPLER COLOR FLOW ADD-ON	No (updated to include non-PAR providers)
96111	DEVELOPMENTAL SCREEN	No
96112	DEVELOPMENTAL TST ADMIN PHYS/QHP 1ST HOUR	No
96113	DEVELOPMENTAL TST ADMIN PHYS/QHP EA ADDL 30 MIN	No
90791	PSYCH DIAGNOSTIC EVALUATION	No (updated to include non-PAR providers)