

PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

Changes to Prior Authorization Requirement for Selected Procedure Codes Effective Jan. 10, 2024

Effective Dates: Jan. 10, 2024

Health Plans Affected: Advantage MD, Priority Partners, US Family Health Plan (USFHP)

Type of Change: Prior Authorization

Explanation of Change:

Please note the following Prior Authorization (PA) and No Prior Authorization (NPA) required changes for Advantage MD, Priority Partners and USFHP effective Jan. 10, 2024.

Advantage MD Code Changed to NPA effective Jan. 10, 2024:

- **77412** - Radiation treatment delivery, \geq 1 MeV; complex

Priority Partners Code Changed to NPA effective Jan. 10, 2024:

- **E0776** - IV pole

USFHP Codes Changed to NPA effective Jan. 10, 2024:

- **E0776** - IV pole
- **28750** - Arthrodesis, great toe; metatarsophalangeal joint

USFHP Codes Changed to PA effective Jan. 10, 2024:

- **S2401** - Repair, urinary tract obstruction in the fetus, procedure performed in utero.
- **S2402** - Repair, congenital cystic adenomatoid malformation in the fetus, procedure performed in utero
- **S2404** - Repair, myelomeningocele in the fetus, procedure performed in utero
- **S2405** - Repair of sacrococcygeal teratoma in the fetus, procedure performed in utero
- **S2411** - Fetoscopic laser therapy for treatment of twin-to-twin transfusion syndrome