

## **Prior Authorization List Updates – Q1 2019**

### **All changes effective April 1, 2019**

The HPSM Prior Authorization Required List states which service codes do, and do not, require prior authorization. It is expected that all services requiring prior authorization must be authorized *prior* to providing the service, with the exception of services that might be necessary on an emergent or urgent basis.

The list of codes requiring prior authorization is updated regularly to reflect current clinical guidelines and regulatory requirements. HPSM recommends that our providers visit our website for the most current Prior Authorization Required Services List. This list is available in both PDF and XLSX format, at <https://www.hpsm.org/Home/provider/authorizations>.

This notice is a courtesy reminder to highlight upcoming changes to our Prior Authorization Required Services List. The following changes will be **effective April 1<sup>st</sup>, 2019:**

#### **Prior authorization requirements for 17 codes will be removed (Y to N):**

E0602, E0603, 01480, 11042, 11043, 11044, 11047, 14040, 17110, 17111, 20605, 27650, 28124, 28193, 28415, 73700, Z7506

#### **Comments will be adjusted for 5 codes:**

“CareAdvantage only code” comment was removed for G0475, G0480, G0481, G0482, G0483

#### **Regulatory update: over 50 new codes have been added (prior authorization required):**

Q9995, 10004 – 10012, 11102 – 11107, 76391, 77046-77049, 81163 – 81167, 81173, 81174, 81204, 81177 - 81190, 81234, 81239, 81271, 81274, 81284 – 81286, 81289, 81306, 81312, 81329, 81336, 81337, 81343 - 81345, 81518, 81216, V5171, V5172, V5181, V5211 – V5215, V5221, A9513, C9038, J9044, J9057, J9173, J9311, J9312, Q2042, C9036, J0517, J0567, J1301, J1628, J1746, J3316, J3398, J7170, J9312, Q5109

#### **Regulatory update: over 40 codes have been discontinued**

10022, 11100, 11101, 20005, 27370, 33282, 33284, 43760, 50395, 64508, 64550, 66220  
81211, 81213, 76001, 77058, 77059, 78270-78272, 92275, 95975, 95978, 95979, 96111, 96118, V5170, V5180 V5210, V5220, J9310, J0833, Q5102, C9275, C9497, C9741, K0903, Q4131, Q4172, C8904, C8907, C9744

Please contact HPSM Health Services at 650-616-2070 with questions.

**Reminder:** HPSM will be hosting our first-ever Prior Authorization Provider Forum (in person and via webex) on April 23<sup>rd</sup>, from 6:00-7:30pm. The event will be hosted by HPSM's Senior Medical Director, Dr. Cindy Cooper.

We're hosting this event to get feedback from you, HPSM's network providers, about our prior authorization process. This is part of HPSM's efforts to continuously improve services and connect with our network providers. Dinner will be provided. **If you plan to attend, please RSVP at <https://www.hpsm.org/events/pa-rsvp> by April 9th.** If you are unable to attend in person, you may participate through a webinar – please RSVP for log in information.

**Agenda:** as our program facilitator, Dr. Cooper will:

- Give a brief overview of HPSM's prior authorization process
- Explain how she makes prior authorization decisions as a medical director
- Address providers' questions and concerns about our prior authorization process

If you have questions or feedback about HPSM's prior authorization process, please submit them at [www.hpsm.org/pa-rsvp](http://www.hpsm.org/pa-rsvp) by April 16<sup>th</sup>.

Medical knowledge and best treatment practices are constantly evolving, and we are open to your feedback. We base our prior authorization decisions on national guidelines. If you are aware of nationally-accepted guidelines that differ from ours, we want to know. HPSM greatly values your input, and we hope you can join us for this forum.

Visit <https://www.hpsm.org/events/pa-rsvp>

RSVP by April 9<sup>th</sup>

Submit questions by April 16<sup>th</sup>