

# PROVIDER Update

CONTRACTUAL | AUGUST 27, 2019 | UPDATE 19-669 | 2 PAGES



Health Net®

## Prior Authorization Requirements Updates

### Changes for Zolgensma® medication and other requirements

#### Zolgensma – FDA newly approved medication

The U.S. Food and Drug Administration (FDA) approved Zolgensma on May 24, 2019. Effective immediately, Zolgensma requires prior authorization (PA). Zolgensma is used to treat pediatric patients under age two with spinal muscular atrophy (SMA) with bi-allelic mutations in the survival motor neuron 1 (SMN1) gene.

#### Prior authorization changes

Health Net\* is implementing the changes outlined below to the prior authorization requirements for Los Angeles County Department of Health Services (LA-DHS) hospitals and clinics.

Requirement	Comments
<b>Additions, effective November 1, 2019</b>	
Avastin® (for non-Ophthalmologist only), Kyprolis®, Perjeta®	Listed under Outpatient Pharmaceuticals (Submitted under Medical Plan)
<b>Deletions, effective November 1, 2019</b>	
Select durable medical equipment (DME) codes	Select codes removed from PA requirement (see HCPCS codes list on page 2)

#### View authorization requirements online

Follow the steps below to find out if prior authorization is needed for any procedures, services or equipment:

- 1 Go to [provider.healthnet.com](http://provider.healthnet.com)
- 2 Before logging in, select *Working with Health Net > Policies for Non-Contracting Providers > Additional Resources > Services Requiring Prior Authorization*.
- 3 After logging in, select *Working with Health Net > Contractual > Services Requiring Prior Authorization*.

If you have questions regarding the information contained in this update, contact the Health Net Medi-Cal Provider Services Center at 1-800-675-6110.

#### THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals/Clinics
- Ancillary Providers

#### LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
  - Kern
  - Los Angeles (LA-DHS)
    - Molina
  - Riverside
  - Sacramento
  - San Bernardino
  - San Diego
  - San Joaquin
  - Stanislaus
  - Tulare

#### PROVIDER SERVICES

1-800-675-6110  
[provider.healthnet.com](http://provider.healthnet.com)

PROVIDER COMMUNICATIONS  
[provider.communications@healthnet.com](mailto:provider.communications@healthnet.com)

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## DME HCPCS Codes – Medi-Cal LA-DHS

The DME HCPCS codes listed below no longer require prior authorization for Medi-Cal LA-DHS members as of November 1, 2019.

HCPCS	Description
<b>A4217</b>	sterile water/saline, 500 ml
<b>A4267</b>	contraceptive supply, condom, male, each
<b>A4483</b>	moisture exchanger, disposable, for use with invasive mechanical ventilation
<b>A4625</b>	tracheostomy care kit for new tracheostomy
<b>A6210</b>	foam dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing
<b>A6223</b>	gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size more than 16 sq. in., but less than or equal to 48 sq. in., without adhesive border, each dressing
<b>A7030</b>	full face mask used with positive airway pressure device, each
<b>A7044</b>	oral interface used with positive airway pressure device, each
<b>A7520</b>	tracheostomy/laryngectomy tube, non-cuffed, polyvinylchloride (pvc), silicone or equal, each
<b>A7526</b>	tracheostomy tube collar/holder, each
<b>A9579</b>	injection, gadolinium-based magnetic resonance contrast agent, not otherwise specified (nos), per ml
<b>E0149</b>	walker, heavy duty, wheeled, rigid or folding, any type
<b>E0163</b>	commode chair, mobile or stationary, with fixed arms
<b>E0184</b>	dry pressure mattress
<b>E0272</b>	mattress, foam rubber
<b>E0424</b>	stationary compressed gaseous oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing
<b>E0431</b>	portable gaseous oxygen system, rental; includes portable container, regulator, flowmeter, humidifier, cannula or mask, and tubing
<b>E0443</b>	portable oxygen contents, gaseous, 1 month's supply = 1 unit
<b>E0951</b>	heel loop/holder, any type, with or without ankle strap, each
<b>E0952</b>	toe loop/holder, any type, each
<b>E1392</b>	portable oxygen concentrator, rental
<b>K0738</b>	portable gaseous oxygen system, rental; home compressor used to fill portable oxygen cylinders; includes portable containers, regulator, flowmeter, humidifier, cannula or mask, and tubing