

PROVIDER Update



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Updates to the Prior Authorization Process and New Requirements, Effective January 1, 2025

Stay aligned with available options for submitting prior authorization requests; discover what procedures, services and drugs now require prior authorization

The following update includes information about the prior authorization (PA) process and PA requirements for Medicare fee-for-service FFS physicians and other providers.

These changes apply to services, procedures, equipment and outpatient pharmaceuticals (submitted under the medical benefit).

Options for submitting a prior authorization request

Physicians and other providers can submit requests for prior authorization via any of following:

- **Fax** – Complete the appropriate Inpatient or Outpatient Medicare Authorization form, and fax to 844-501-5713. Forms are available at <https://bit.ly/HN-Prior-Auth>.
- **Online** – Log on to the secure provider portal at <https://provider.healthnetcalifornia.com>.
- **Phone** – Call Provider Services at 800-929-9224 for Medicare Individual and Employer Plans or 800-641-7761 for Medicare Supplement. Behavioral health providers may contact 844-966-0298.

How to access prior authorization requirements

Access the Medicare Prior Authorization requirements via either option below:

- **Provider Library** – Go to providerlibrary.healthnetcalifornia.com, select *Medicare Advantage*, then select *Prior Authorization Requirements* on the left-hand side.
- **Prior Authorization page on Healthnet.com** – Go to <https://bit.ly/HN-Prior-Auth> and select the *Medicare - California Prior Authorization List*.

THIS UPDATE APPLIES TO:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers
- Behavioral Health Providers

LINES OF BUSINESS:

- Wellcare By Health Net
 - Medicare Advantage (HMO)

PROVIDER SERVICES

provider_services@healthnet.com

Medicare (individual & employer group) (Wellcare By Health Net) – 800-929-9224

Medicare Supplement – 800-641-7761

Behavioral Health providers – 844-966-0298

PROVIDER PORTAL

provider.healthnetcalifornia.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com

CPT and HCPCS code changes, effective January 1, 2025

The below procedures, services (including durable medical equipment [DME]) and outpatient pharmaceuticals require PA per new CPT and HCPCS codes issued by the Centers for Medicare & Medicaid Services (CMS).

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Code	Description	Category
C1735	Catheter(s), intravascular for renal denervation, radiofrequency, including all single-use system components	Durable medical equipment (DME) and supplies
C1736	Catheter(s), intravascular for renal denervation, ultrasound, including all single-use system components	DME and supplies
C1737	Joint fusion and fixation device(s), sacroiliac and pelvis, including all system components (implantable)	DME and supplies
C8002	Preparation of skin cell suspension autograft, automated, including all enzymatic processing and device components (do not report with manual suspension preparation)	Wound care
C8003	Implantation of medial knee extraarticular implantable shock absorber spanning the knee joint from distal femur to proximal tibia, open, includes measurements, positioning and adjustments, with imaging guidance (e.g., fluoroscopy)	Joint surgeries
C9173	Injection, filgrastim-txid (Nypozi®), biosimilar, 1 mcg	Outpatient Pharmaceuticals: Part B Medications
C9807	Nerve stimulator, percutaneous, peripheral (e.g., sprint peripheral nerve stimulation system), including electrode and all disposable system components, nonopioid medical device (must be a qualifying Medicare nonopioid medical device for postsurgical pain relief in accordance with Section 4135 of the CAA, 2023)	DME – Nerve Stimulator
E1803	Dynamic adjustable elbow extension only device, includes soft interface material	DME
E1804	Dynamic adjustable elbow flexion only device, includes soft interface material	DME
E1807	Dynamic adjustable wrist extension only device, includes soft interface material	DME
E1808	Dynamic adjustable wrist flexion only device, includes soft interface material	DME
E1813	Dynamic adjustable knee extension only device, includes soft interface material	DME
E1814	Dynamic adjustable knee flexion only device, includes soft interface material	DME
E1822	Dynamic adjustable ankle extension only device, includes soft interface material	DME

Code	Description	Category
E1823	Dynamic adjustable ankle flexion only device, includes soft interface material	DME
E1826	Dynamic adjustable finger extension only device, includes soft interface material	DME
E1827	Dynamic adjustable finger flexion only device, includes soft interface material	DME
E1828	Dynamic adjustable toe extension only device, includes soft interface material	DME
E1829	Dynamic adjustable toe flexion only device, includes soft interface material	DME
G0552	Supply of digital mental health treatment device and initial education and onboarding, per course of treatment that augments a behavioral therapy plan	DME and supplies
G0563	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance and real-time positron emissions-based delivery adjustments to 1 or more lesions, entire course not to exceed 5 fractions	Radiation therapy – Stereotactic radiosurgery and stereotactic body radiotherapy (SBRT)
J0139	Injection, adalimumab, 1 mg	Outpatient Pharmaceuticals: Part B Medications
J0601	Sevelamer carbonate (Renvela® or therapeutically equivalent), oral, 20 mg (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0602	Sevelamer carbonate (Renvela or therapeutically equivalent), oral, powder, 20 mg (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0603	Sevelamer HCl (Renagel® or therapeutically equivalent), oral, 20 mg (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0605	Sucroferric oxyhydroxide, oral, 5 mg (for end-stage renal disease [ESRD] on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0607	Lanthanum carbonate, oral, 5 mg (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0608	Lanthanum carbonate, oral, powder, 5 mg, not therapeutically equivalent to J0607 (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0609	Ferric citrate, oral, 3 mg ferric iron, (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J0870	Injection, imetelstat, 1 mg	Outpatient Pharmaceuticals: Part B Medications
J0901	Vadadustat, oral, 1 mg (for ESRD on dialysis)	Outpatient Pharmaceuticals: Part B Medications
J1307	Injection, crovalimab-akkz, 10 mg	Outpatient Pharmaceuticals: Part B Medications

Code	Description	Category
J1414	Injection, fidanacogene elaparvovec-dzkt, per therapeutic dose	Outpatient Pharmaceuticals: Part B Medications
J1552	Injection, immune globulin (Alyglo™), 500 mg	Outpatient Pharmaceuticals: Part B Medications
J2802	Injection, romiplostim, 1 mcg	Outpatient Pharmaceuticals: Part B Medications
J3392	Injection, exagamglogene autotemcel, per treatment	Outpatient Pharmaceuticals: Part B Medications
J7514	Mycophenolate mofetil (Myhibbin™), oral suspension, 100 mg	Outpatient Pharmaceutical: Part B Medications
J7601	Ensifentrine, inhalation suspension, FDA-approved final product, noncompounded, administered through DME, unit dose form, 3 mg	Outpatient Pharmaceuticals: Part B Medications
J9026	Injection, tarlatamab-dlle, 1 mg	Outpatient Pharmaceuticals: Part B Medications
J9028	Injection, nogapendekin alfa inbakicept-pmln, for intravesical use, 1 mcg	Outpatient Pharmaceuticals: Part B Medications
J9076	Injection, cyclophosphamide (Baxter™), 5 mg	Outpatient Pharmaceuticals: Part B Medications
J9292	Injection, pemetrexed (Avyxa™), not therapeutically equivalent to J9305, 10 mg	Outpatient Pharmaceuticals: Part B Medications
Q0155	Dronabinol (Syndros®), 0.1 mg, oral, FDA-approved prescription anti-emetic, for use as a complete therapeutic substitute for an IV anti-emetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	Outpatient Pharmaceuticals: Part B Medications
Q4346	Shelter™ DM Matrix, per sq cm	Skin substitutes and biologicals
Q4347	Rampart™ DL Matrix, per sq cm	Skin substitutes and biologicals
Q4348	Sentry™ SL Matrix, per sq cm	Skin substitutes and biologicals
Q4349	Mantle™ DL Matrix, per sq cm	Skin substitutes and biologicals
Q4350	Palisade™ DM Matrix, per sq cm	Skin substitutes and biologicals
Q4351	Enclose™ TL Matrix, per sq cm	Skin substitutes and biologicals
Q4352	Overlay™ SL Matrix, per sq cm	Skin substitutes and biologicals
Q4353	Xceed™ TL Matrix, per sq cm	Skin substitutes and biologicals

Code	Description	Category
Q5139	Injection, eculizumab-aeeb (Bkemv®), biosimilar, 10 mg	Outpatient Pharmaceuticals: Part B Medications
Q5140	Injection, adalimumab-fkjp, biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5141	Injection, adalimumab-aaty, biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5142	Injection, adalimumab-ryvk biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5143	Injection, adalimumab-adbm, biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5144	Injection, adalimumab-aacf (Idacio®), biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5145	Injection, adalimumab-afzb (Abrilada™), biosimilar, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q5146	Injection, trastuzumab-strf (Hercessi™), biosimilar, 10 mg	Outpatient Pharmaceuticals: Part B Medications
Q9996	Injection, ustekinumab-ttwe (Pyzchiva®), subcutaneous, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q9997	Injection, ustekinumab-ttwe (Pyzchiva), intravenous, 1 mg	Outpatient Pharmaceuticals: Part B Medications
Q9998	Injection, ustekinumab-aekn (Selarsdi™), 1 mg	Outpatient Pharmaceuticals: Part B Medications
0523U	Oncology (solid tumor), DNA, qualitative, next-generation sequencing (NGS) of single-nucleotide variants (SNV) and insertion/deletions in 22 genes utilizing formalin-fixed paraffin-embedded tissue, reported as presence or absence of mutation(s), location of mutation(s), nucleotide change, and amino acid change	Genetic testing
0529U	Hematology (venous thromboembolism [VTE]), genome-wide single-nucleotide polymorphism variants, including F2 and F5 gene analysis, and Leiden variant, by microarray analysis, saliva, report as risk score for VTE	Genetic testing
0530U	Oncology (pan-solid tumor), ctDNA, utilizing plasma, next-generation sequencing (NGS) of 77 genes, 8 fusions, microsatellite instability, and tumor mutation burden, interpretative report for single-nucleotide variants, copy-number alterations, with therapy association	Genetic testing
38225	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day	Outpatient Pharmaceuticals: Part B Medications
38226	CAR-T therapy; preparation of blood-derived T lymphocytes for transportation (e.g., cryopreservation, storage)	Outpatient Pharmaceuticals: Part B Medications

Code	Description	Category
38227	CAR-T therapy; receipt and preparation of CAR-T cells for administration	Outpatient Pharmaceuticals: Part B Medications
38228	CAR-T therapy; CAR-T cell administration, autologous	Outpatient Pharmaceuticals: Part B Medications
64466	Thoracic fascial plane block, unilateral; by injection(s), including imaging guidance, when performed	Pain management
64467	Thoracic fascial plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed	Pain management
64468	Thoracic fascial plane block, bilateral; by injection(s), including imaging guidance, when performed	Pain management
64469	Thoracic fascial plane block, bilateral; by continuous infusion(s), including imaging guidance, when performed	Pain management
64473	Lower extremity fascial plane block, unilateral; by injection(s), including imaging guidance, when performed	Pain management
64474	Lower extremity fascial plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed	Pain management
81195	Cytogenomic (genome-wide) analysis, hematologic malignancy, structural variants and copy number variants, optical genome mapping (OGM)	Genetic testing
81558	Transplantation medicine (allograft rejection, kidney), mRNA, gene expression profiling by quantitative polymerase chain reaction (qPCR) of 139 genes, utilizing whole blood, algorithm reported as a binary categorization as transplant excellence, which indicates immune quiescence, or not transplant excellence, indicating subclinical rejection	Genetic testing

Additional information

Relevant sections of Health Net’s provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library on Health Net’s provider portal at provider.healthnetcalifornia.com > *Provider Library* under Quick Links, or go directly to providerlibrary.healthnetcalifornia.com.

If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center by email at provider_services@healthnet.com, by telephone or through the Health Net provider portal as listed in the right-hand column on page 1. Behavioral health providers can call 844-966-0298.