

PROVIDER *Update*



CONTRACTUAL | MARCH 26, 2026 | UPDATE 26-408 | 2 PAGES

Updates to Prior Authorization Requirements

Changes to prior authorization codes, effective January 1 through June 1, 2026

This provider update includes prior authorization (PA) requirement changes for the Los Angeles County Department of Health Services (LA-DHS) on page 2.

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

How to access prior authorization requirements

Access the **Medi-Cal LA-DHS Participating Provider Groups PA** requirements at <https://bit.ly/HN-Prior-Auth>.

Need help? Contact us

If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center as listed in the right-hand column. Behavioral health providers can call 844-966-0298.

THIS UPDATE APPLIES TO:

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

LINES OF BUSINESS:

- Medi-Cal
 - Los Angeles

PROVIDER SERVICES

Medi-Cal (including CS and ECM providers)

– 800-675-6110

Behavioral Health providers –

844-966-0298

PROVIDER PORTAL

provider.healthnetcalifornia.com

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Additions, effective January 1, 2026

The below services, procedures, equipment and outpatient pharmaceuticals require PA as of January 1, 2026, per new CPT and HCPCS codes issued by the Centers for Medicare & Medicaid Services.

Category	CPT/HCPCS code
Ablative techniques for prostate tumors	55877
Durable medical equipment – items with a total Medi-Cal purchase price greater than \$1,500	C9810, C9817
Genetic testing	0607U, 0608U, 0609U, 0610U, 0611U, 0612U, 0613U, 0602U, 0605U, 81354, 81524
Outpatient pharmaceuticals – Emrelis®	J9326
Outpatient pharmaceuticals – gene therapy: Skysona®	J3387
Outpatient pharmaceuticals – Imaavy™	J9256
Outpatient pharmaceuticals – Jobevne®	Q5160
Outpatient pharmaceuticals – Lynozyfic®	C9307
Outpatient pharmaceuticals – Spravato®	J0013
Outpatient pharmaceuticals – testosterone therapy	J1073
Outpatient pharmaceuticals – Zevaskyn®	J3389
Outpatient pharmaceuticals – Zusduri®	J9282
Prosthetics	C1608

Change, effective immediately

The following biosimilar has been added as a non-preferred bevacizumab agent, effective immediately.

Category	CPT code
Outpatient pharmaceuticals: Avzivi® – non-preferred Bevacizumab agent	J3490

Addition, effective June 1, 2026

The following code requires PA, effective June 1, 2026.

Category	CPT/HCPCS code
Applied behavioral analysis	S5111

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