

AUTHORIZATION RULE UPDATE - Quarter 3 July 1, 2024

**CPT/HCPCS
CODE**

DESCRIPTION

ALT Status 4/1/24

**New
ALT Status for 7/1/24**

Key for ALT Status Columns:

MN = Authorization by WellCare

CCN = Authorization by eviCore

NIA = Authorization by NIA

TP = Authorization by Turning Point

HH = Authorization by HealthHelp

Yellow: ADD to authorization rules

Green: REMOVE from auth Requirement

Blue: CHANGE who does the auth

Orange: Added to ALT, no auth required

CPT/HCPCS CODE	DESCRIPTION	ALT Status 4/1/24	New ALT Status for 7/1/24
H0011	ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)	NA	MN
S9480	MENTAL HEALTH INTENSIVE OUTPATIENT TREATMENT	NA	MN
T2016	BEHAVIORAL HEALTH URGENT CARE	NOT LISTED	NA
0364U	ONC HL NEO GEN SEQ ALYS ALG	NA	CCN
0388U	ONC NONSM CLL LNG CA 37 GEN	NA	CCN
0439U	CRD CHD DNA ALYS 5 SNP 3 DNA MTHYLTN MRK QPCR	NOT LISTED	NA
0440U	CRD CHD DNA ALYS 10 SNP 6 DNA MTHYLTN MRK QPCR	NOT LISTED	NA
0441U	NFCT DS BCT FNGL/VIR INFCTJ SEMIQ BIOMCHN ASSMT	NOT LISTED	NA
0442U	NFCT DS RESPIRATORY INFCTJ MXA AND CRP FS WHL BLOOD	NOT LISTED	NA
0443U	NEUROFILAMENT LIGHT CHAIN ULTRSENS IA SERUM/CSF	NOT LISTED	NA
0444U	ONC SLD ORGN NEO TGSAP 361 GEN INTERROG DNA FFPE	NOT LISTED	NA
0445U	ABETA42 AND PTAU181 ECLIA CEREBRAL SPINAL FLUID	NOT LISTED	NA
0446U	AI DS SLE ALYS 10 CYTOKINE SOL MDTR BMRK IA PLSM	NOT LISTED	NA
0447U	AI DS SLE ALYS 11 CYTOKINE SOL MDTR BMRK IA PLSM	NOT LISTED	NA
0448U	ONC LNG AND CLN CA DNA QUAL NGS SNV AND DELET EGFR AND KRAS	NOT LISTED	NA
0449U	CAR SCR SEV INH COND GENOMIC SEQ ALYS PNL 5 GEN	NOT LISTED	NA
C9166	INJECTION SECUKINUMAB INTRAVENOUS 1 MG	NOT LISTED	NA
C9167	INJECTION APADAMTASE ALFA 10 UNITS	NOT LISTED	NA

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C9168	INJECTION MIRIKIZUMAB-MRKZ 1 MG	NOT LISTED	NA
H0051	TRADITIONAL HEALING SERVICE	NOT LISTED	NA
J0177	INJECTION AFLIBERCEPT HD 1 MG	NOT LISTED	NA
J0209	INJECTION SODIUM THIOSULFATE 100 MG	NOT LISTED	NA
J0577	INJECTION BUPRENORPHINE ER <=/ TO 7 DAYS TX	NOT LISTED	NA
J0578	INJECTION BUPRENORPHINE ER > 7 TO 28 DAYS TX	NOT LISTED	NA
J0589	INJECTION DAXIBOTULINUMTOXINA-LANM 1 UNIT	NOT LISTED	NA
J0650	INJECTION LEVOTHYROXINE SODIUM NOS 10 MCG	NOT LISTED	NA
J0651	INJ FRESENIUS KABI NOT THR EQUIV TO J0650 10 MCG	NOT LISTED	NA
J0652	INJECTION HIKMA NOT THR EQUIV TO J0650 10 MCG	NOT LISTED	NA
J1010	INJECTION METHYLPREDNISOLONE ACETATE 1 MG	NOT LISTED	NA
J1202	MIGLUSTAT ORAL 65 MG	NOT LISTED	NA
J1203	INJECTION CIPAGLUCOSIDASE ALFA-ATGA 5 MG	NOT LISTED	NA
J1323	INJECTION ELRANATAMAB-BCMM 1 MG	NOT LISTED	NA
J1434	INJECTION FOSAPREPITANT 1 MG	NOT LISTED	NA
J2277	INJECTION MOTIXAFORTIDE 0.25 MG	NOT LISTED	NA
J2782	INJECTION AVACINCAPTAD PEGOL 0.1 MG	NOT LISTED	NA
J2801	INJECTION RISPERIDONE 0.5 MG	NOT LISTED	NA
J2919	INJECTION METHYLPREDNISOLONE NA SUCCINATE 5 MG	NOT LISTED	NA
J3055	INJECTION TALQUETAMAB-TGVS 0.25 MG	NOT LISTED	NA
J3424	INJECTION HYDROXOCOBALAMIN INTRAVENOUS 25 MG	NOT LISTED	NA
J7165	INJ PRT CMLPX CONC HMN-LANS PER I.U. FAC IX ACTV	NOT LISTED	NA
J7354	CANTHARIDIN TOP ADM 0.7% SINGLE UNIT DOSE APPL	NOT LISTED	NA
J9073	INJECTION CYCLOPHOSPHAMIDE INGENUS 5 MG	NOT LISTED	NA
J9074	INJECTION CYCLOPHOSPHAMIDE SANDOZ 5 MG	NOT LISTED	NA

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J9075	INJECTION CYCLOPHOSPHAMIDE NOS 5 MG	NOT LISTED	NA
J9248	INJECTION MELPHALAN HEPZATO 1 MG	NOT LISTED	NA
J9249	INJECTION MELPHALAN APOTEX 1 MG	NOT LISTED	NA
J9376	INJECTION POZELIMAB-BBFG 1 MG	NOT LISTED	NA
Q5133	INJECTION TOCILIZUMAB-BAVI BIOSIMILAR 1 MG	NOT LISTED	NA
Q5134	INJECTION NATALIZUMAB-SZTN BIOSIMILAR 1 MG	NOT LISTED	NA