

Prior Authorization List Updates

Changes effective January 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. These will be **effective January 1st, 2019**. Please note:

- 7 Q codes have been added to the list with clarification that these **do** require prior authorization .
- 5 codes have been added to the list with clarification that they **do not** require prior authorization
- 2 J codes that were previously “conditional” no longer require prior authorization, retro-actively effective back to 1/1/2018
- 2 codes that previously required prior authorization no longer require authorization.

Code	Description	Change
Q4176	Neopatch, per square centimeter	New code: Y
Q4177	Floweramnioflo, 0.1 cc	New code: Y
Q4178	Floweramniopatch, per square centimeter	New code: Y
Q4179	Flowerderm, per square centimeter	New code: Y
Q4180	Revita, per square centimeter	New code: Y
Q4181	Amnio wound, per square centimeter	New code: Y

Q4182	Transcyte, per square centimeter	New code: Y
J0606	Injection, Etelcalcetide 0.1 mg	Conditional to N, retroactively effective back to 1/1/2018
J0604	Oral Cinacalcet ESRD dialysis	Conditional to N, retroactively effective back to 1/1/2018
Z4304	Patient report-complex/comprehensive	New code: N
Z4309	Assess/interven, alld prof-per half hour	New code: N
Z4312	Medical case conf, dietitian-per 1/4 hr	New code: N
Z4313	Group counseling, phsy-per person	New code: N
Z4306	Case conf, phys/dentist-per half hour	Y to N
92552	Pure tone audiometry air	New code: N
92557	Comprehensive hearing test	New code: N
63057	Decompress spine cord add-on	Y to N

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