

AUTHORIZATION GRID UPDATE Changes in Alterwood Authorization Requirements, effective 9/1/2023

Existing Codes Effective 1/1/2024 that require Prior Authorization:

CPT/HCPS	Full Description
J0887	Injection, epoetin beta, 1 mcg, (for ESRD on dialysis)
J0897	Injection, denosumab, 1 mg
J1569	Injection, immune globulin, (Gammagard liquid), nonlyophilized, (e.g., liquid), 500 mg
J1930	Injection, lanreotide, 1 mg
J2182	Injection, mepolizumab, 1 mg
J2778	Injection, ranibizumab, 0.1 mg
J7327	Hyaluronan or derivative, Monovisc, for intra-articular injection, per dose
J9041	Injection, bortezomib, 0.1 mg
J9227	Injection, isatuximab-irfc, 10 mg
J9264	Injection, paclitaxel protein-bound particles, 1 mg
Q0138	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (non-ESRD use)
Q0139	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (for ESRD on dialysis)
Q4081	Injection, epoetin alfa, 100 units (for ESRD on dialysis)
Q5104	Injection, infliximab-abda, biosimilar, (Renflexis), 10 mg
Q5110	Injection, filgrastim-aafi, biosimilar, (Nivestym), 1 mcg
Q5111	Injection, pegfilgrastim-cbqv (Udenyca), biosimilar, 0.5 mg
Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg
Q5113	Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg
Q5122	Injection, pegfilgrastim-apgf (Nyvepria), biosimilar, 0.5 mg
Q5123	Injection, rituximab-arrx, biosimilar, (Riabni), 10 mg

Existing Codes that NO LONGER require Prior Authorization, effective 1/1/2024:

CPT/HCPS	Full Description
J0517	Injection, benralizumab, 1 mg
J1300	Injection, eculizumab, 10 mg
J1303	Injection, ravulizumab-cwvz, 10 mg
J1559	Injection, immune globulin (Hizentra), 100 mg
J1561	Injection, immune globulin, (Gamunex/Gamunex-C/Gammaked), nonlyophilized (e.g., liquid), 500 mg
J1786	Injection, imiglucerase, 10 units
J2502	Injection, pasireotide long acting, 1 mg
J7201	Injection, Factor IX, Fc fusion protein, (recombinant), Alprolix, 1 IU
J7202	Injection, Factor IX, albumin fusion protein, (recombinant), Idelvion, 1 IU
J7211	Injection, Factor VIII, (antihemophilic factor, recombinant), (Kovaltry), 1 IU
J7318	Hyaluronan or derivative, Durolane, for intra-articular injection, 1 mg
J9294	Injection, pemetrexed (Hospira), not therapeutically equivalent to J9305, 10 mg
J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg

NEW Codes Effective 1/1/2024 that require Prior Authorization:

CPT/HCPS	Full Description
0019M	Cardiovascular disease, plasma, analysis of protein biomarkers by aptamer-based microarray and algorithm reported as 4-year likelihood of coronary event in high-risk populations
0402U	Infectious agent (sexually transmitted infection), Chlamydia trachomatis, Neisseria gonorrhoeae, Trichomonas vaginalis, Mycoplasma genitalium, multiplex amplified probe technique, vaginal, endocervical, or male urine, each pathogen reported as detected or not detected
0403U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch post-digital rectal examination urine (or processed first-catch urine), algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer
0404U	Oncology (breast), semiquantitative measurement of thymidine kinase activity by immunoassay, serum, results reported as risk of disease progression
0405U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected
0406U	Oncology (lung), flow cytometry, sputum, 5 markers (meso-tetra [4-carboxyphenyl] porphyrin [TCPP], CD206, CD66b, CD3, CD19), algorithm reported as likelihood of lung cancer
0407U	Nephrology (diabetic chronic kidney disease [CKD]), multiplex electrochemiluminescent immunoassay (ECLIA) of soluble tumor necrosis factor receptor 1 (sTNFR1), soluble tumor necrosis receptor 2 (sTNFR2), and kidney injury molecule 1 (KIM-1) combined with clinical data, plasma, algorithm reported as risk for progressive decline in kidney function
0408U	Infectious agent antigen detection by bulk acoustic wave biosensor immunoassay, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])
0409U	Oncology (solid tumor), DNA (80 genes) and RNA (36 genes), by next-generation sequencing from plasma, including single nucleotide variants, insertions/deletions, copy number alterations, microsatellite instability, and fusions, report showing identified mutations with clinical actionability
0410U	Oncology (pancreatic), DNA, whole genome sequencing with 5-hydroxymethylcytosine enrichment, whole blood or plasma, algorithm reported as cancer detected or not detected
0411U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication analysis of CYP2D6
0412U	Beta amyloid, AB42/40 ratio, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and qualitative ApoE isoform-specific proteotyping, plasma combined with age, algorithm reported as presence or absence of brain amyloid pathology
0413U	Oncology (hematolymphoid neoplasm), optical genome mapping for copy number alterations, aneuploidy, and balanced/complex structural rearrangements, DNA from blood or bone marrow, report of clinically significant alterations
0414U	Oncology (lung), augmentative algorithmic analysis of digitized whole slide imaging for 8 genes (ALK, BRAF, EGFR, ERBB2, MET, NTRK1-3, RET, ROS1), and KRAS G12C and PD-L1, if performed, formalin-fixed paraffin-embedded (FFPE) tissue, reported as positive or negative for each biomarker
0415U	Cardiovascular disease (acute coronary syndrome [ACS]), IL-16, FAS, FASLigand, HGF, CTACK, EOTAXIN, and MCP-3 by immunoassay combined with age, sex, family history, and personal history of diabetes, blood, algorithm reported as a 5-year (deleted risk) score for ACS

NEW Codes Effective 1/1/2024 that require Prior Authorization (continued):

CPT/HCPS	Full Description
0416U	Infectious agent detection by nucleic acid (DNA), genitourinary pathogens, identification of 20 bacterial and fungal organisms, including identification of 20 associated antibiotic-resistance genes, if performed, multiplex amplified probe technique, urine
0417U	Rare diseases (constitutional/heritable disorders), whole mitochondrial genome sequence with heteroplasmy detection and deletion analysis, nuclear-encoded mitochondrial gene analysis of 335 nuclear genes, including sequence changes, deletions, insertions, and copy number variants analysis, blood or saliva, identification and categorization of mitochondrial disorder-associated genetic variants
0418U	Oncology (breast), augmentative algorithmic analysis of digitized whole slide imaging of 8 histologic and immunohistochemical features, reported as a recurrence score
0419U	Neuropsychiatry (eg, depression, anxiety), genomic sequence analysis panel, variant analysis of 13 genes, saliva or buccal swab, report of each gene phenotype
A2022	InnovaBurn or InnovaMatrix XL, per sq cm
A2023	InnovaMatrix PD, 1 mg
A2024	Resolve Matrix, per sq cm
A2025	Miro3D, per cu cm
A9156	Oral mucoadhesive, any type (liquid, gel, paste, etc.), per 1 ml
A9292	Prescription digital visual therapy, software-only, FDA cleared, per course of treatment
A9573	Injection, gadopiclenol, 1 ml
A9603	Injection, pafolacianine, 0.1 mg
A9697	Injection, carboxydextran-coated superparamagnetic iron oxide, per study dose
B4148	Enteral feeding supply kit; elastomeric control fed, per day, includes but not limited to feeding/flushing syringe, administration set tubing, dressings, tape
C9155	Injection, epcoritamab-bysp, 0.16 mg
C9156	Flotufolastat F-18, diagnostic, 1 mCi
C9157	Injection, tofersen, 1 mg
C9788	Opto-acoustic imaging, breast (including axilla when performed), unilateral, with image documentation, analysis and report, obtained with ultrasound examination
C9789	Instillation of antineoplastic pharmacologic/biologic agent into renal pelvis, any method, including all imaging guidance, including volumetric measurement if performed
C9790	Histotripsy (i.e., nonthermal ablation via acoustic energy delivery) of malignant renal tissue, including image guidance
C9791	Magnetic resonance imaging with inhaled hyperpolarized xenon-129 contrast agent, chest, including preparation and administration of agent

NEW Codes Effective 1/1/2024 that require Prior Authorization (continued):

CPT/HCPS	Full Description
C9792	Blinded or nonblinded procedure for symptomatic New York Heart Association (NYHA) Class II, III, IVA heart failure; transcatheter implantation of left atrial to coronary sinus shunt using jugular vein access, including all imaging necessary to intra procedurally map the coronary sinus for optimal shunt placement (e.g., transesophageal echocardiography (TTE), intracardiac echocardiography (ICE), fluoroscopy), performed under general anesthesia in an approved investigational device exemption (IDE) study
E0490	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by hardware remote
E0491	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by hardware remote, 90-day supply
J0174	Injection, lecanemab-irmb, 1 mg
J0801	Injection, corticotropin (Acthar Gel), up to 40 units
J0802	Injection, corticotropin (ANI), up to 40 units
J2781	Injection, pegcetacoplan, intravitreal, 1 mg
J7214	Injection, Factor VIII/von Willebrand factor complex, recombinant (Altuviiio), per Factor VIII IU
J9064	Injection, cabazitaxel (Sandoz), not therapeutically equivalent to J9043, 1 mg
J9345	Injection, retifanlimab-dlwr, 1 mg
L1681	Hip orthosis (HO), bilateral hip joints and thigh cuffs, adjustable flexion, extension, abduction control of hip joint, postoperative hip abduction type, prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a specific patient by an individual with expertise
L5991	Addition to lower extremity prostheses, osseointegrated external prosthetic connector
Q4285	NuDYN DL or NuDYN DL MESH, per sq cm
Q4286	NuDYN SL or NuDYN SLW, per sq cm

NEW Codes Effective 1/1/2024 that DO NOT require Prior Authorization:

CPT/HCPS	Full Description
90380	Respiratory syncytial virus, monoclonal antibody, seasonal dose; 0.5 mL dosage, for intramuscular use
90381	Respiratory syncytial virus, monoclonal antibody, seasonal dose; 1 mL dosage, for intramuscular use
90480	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, single dose
91318	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, 3 mcg/0.2 mL dosage, tris-sucrose formulation, for intramuscular use
91319	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, 10 mcg/0.2 mL dosage, tris-sucrose formulation, for intramuscular use
91320	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use
91321	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 25 mcg/0.25 mL dosage, for intramuscular use
91322	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 50 mcg/0.5 mL dosage, for intramuscular use
C9152	Injection, aripiprazole, (Abilify Asimtufii), 1 mg
C9153	Injection, amisulpride, 1 mg
C9154	Injection, buprenorphine extended-release (Brixadi), 1 mg
C9158	Injection, risperidone, (Uzedy), 1 mg
J0349	Injection, rezafungin, 1 mg
J0874	Injection, daptomycin (Baxter), not therapeutically equivalent to J0878, 1 mg
J2359	Injection, olanzapine, 0.5 mg
J7353	Anacaulase-bcdb, 8.8% gel, 1 gm
J7519	Injection, mycophenolate mofetil, 10 mg
J9051	Injection, bortezomib (MAIA), not therapeutically equivalent to J9041, 0.1 mg

NEW Codes Effective 1/1/2024 that are NOT COVERED by Medicare/Alterwood:

CPT/HCPS	Full Description
A9268	Programmer for transient, orally ingested capsule
A9269	Programmable, transient, orally ingested capsule, for use with external programmer, per month
H2040	Coordinated specialty care, team-based, for first episode psychosis, per month
H2041	Coordinated specialty care, team-based, for first episode psychosis, per encounter
K1036	Supplies and accessories (e.g., transducer) for low frequency ultrasonic diathermy treatment device, per month
V2526	Contact lens, hydrophilic, with blue-violet filter, per lens