

Special Bulletin

Updated: December 21, 2022

For professional and facility providers

December 1, 2022

Upcoming Prior Authorization Changes

January Updates

Effective January 1, 2023, the 14 services — represented by the CPT/HCPCS codes below — will no longer require prior authorization for Highmark members. Highmark will revise its [List of Procedures/DME Requiring Authorization](#) by removing the following codes on January 1, 2023:

Procedure Code	Description
21497	Interdental Wiring, for Condition Other Than Fracture
27437	Arthroplasty, Patella; without Prosthesis
43285	Removal of Esophageal Sphincter Augmentation Device
E0302	Hospital Bed, Extra Heavy Duty, Extra Wide, with Weight Capacity Greater Than 600 Pounds, with Any Type Side Rails, without Mattress
E0304	Hospital Bed, Extra Heavy Duty, Extra Wide, with Weight Capacity Greater Than 600 Pounds, with Any Type Side Rails, with Mattress
E0425	Stationary Compressed Gas System, Purchase; Includes Regulator, Flowmeter, Humidifier, Nebulizer, Cannula Or Mask, and Tubing
E1018	Heavy Duty Shock Absorber for Heavy Duty or Extra Heavy-Duty Power Wheelchair, Each
J9247	Injection, Melphalan Flufenamide, 1 Mg (Pepaxto)
J9295	Injection, Necitumumab, 1 Mg (Portrazza)
L3570	Orthopedic Shoe Addition, Special Extension to Instep (Leather with Eyelets)
V5286	Assistive Listening Device, Personal Blue Tooth FM/DM Receiver
V5287	Assistive Listening Device, Personal FM/DM Receiver, Not Otherwise Specified
V5288	Assistive Listening Device, Personal FM/DM Transmitter Assistive Listening Device
V5289	Assistive Listening Device, Personal FM/DM Adapter/Boot Coupling Device for Receiver, Any Type

Note: These procedures will continue to require authorization and appear on the all-inclusive authorization list on the Provider Resource Center until **January 1, 2023**.

April Update

The effective date for the CPT code below — originally scheduled to be implemented on March 1, 2023 — has been delayed by one month and will now be added to the [List of Procedures/DME Requiring Authorization](#) on **April 1, 2023**. This code will not appear on the Authorizations list on the Provider Resource Center until **April 1, 2023**.

Procedure Code	Description
33285	Insertion, Subcutaneous Cardiac Rhythm Monitor, including Programming

Important Information for Acquiring Prior Authorization

The [List of Procedures/DME Requiring Authorization](#) for Highmark is subject to change. During the year, Highmark makes several adjustments to its full list of outpatient procedures, services, durable medical equipment, and drugs requiring authorization.

For benefits to be paid, the member must be eligible on the date of service and the service must be a covered benefit.

Providers should use [NaviNet®](#) or the applicable HIPAA electronic transactions to check member benefits and eligibility, to verify if an authorization is required, and to obtain authorization for services before they are rendered.

Providers who don't have NaviNet or access to the HIPAA transactions should fax authorization requests to one of the following departments:

- Behavioral Health: **877-650-6112**
- Gastric Surgery/Therapy/Durable Medical Equipment/Outpatient Procedures: **888-236-6321**
- Home Health/Home Infusion Therapy/Hospice: **888-567-5703**
- Inpatient Clinical: **800-416-9195**
- Medical Injectable Drugs: **833-581-1861**
- Musculoskeletal (eviCore): **800-540-2406**

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