Effective October 1, 2026, please note the exception updates for the following procedure codes for Sentara Health Plans. Please verify Benefits prior to rendering services.

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION	EXCEPTION
58660	LAPAROSCOPY W/LYSIS OF ADHESIONS	Benefit Restrictions apply
58673	LAPAROSCOPY SALPINGOSTOMY	Benefit Restrictions apply
G0299	DIRECT SNS RN HOME HEALTH/HOSPICE SET EA 15 MIN	Benefit Limits Apply
G0300	DIRECT SNS LPN HOME HLTH/HOSPICE SET EA 15 MIN	Benefit Limits Apply
T1000	PRIV DUTY/INDEPEND NRS SERVICE LIC UP 15 MIN	Not Generally Reimbursable

Effective October 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans with the associated exception(s).

This applies to all Medicaid, Medicare, and Commercial products offered in Virginia.

CODE	LONG DESCRIPTION	EXCEPTION
86152	CELL ENUMERATION IMMUNE SELECTJ & ID FLUID SPEC	FOR ONCOLOGY PROGRAM CONTACT ONCOHEALTH

Effective October 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans.

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
A9506	TC-99M GRAPHITE CRUCIBLE 1 CRUC
S2260	INDUCED ABORTION 17 TO 24 WEEKS
S2267	INDUCED ABORTION 32 WEEKS OR GREATER
19340	INSERTION BREAST IMPLANT SAME DAY OF MASTECTOMY

23470	ARTHROPLASTY GLENOHUMRL JT HEMIARTHROPLASTY
27138	REVJ TOT HIP ARTHRP FEM ONLY W/WO ALGRFT
27437	ARTHROPLASTY PATELLA W/O PROSTHESIS
27438	ARTHROPLASTY PATELLA W/PROSTHESIS
27440	ARTHROPLASTY KNEE TIBIAL PLATEAU
27442	ARTHROPLASTY FEM CONDYLES/TIBIAL PLATEAU KNEE
27446	ARTHRP KNEE CONDYLE&PLATEAU MEDIAL/LAT CMPRT
27447	ARTHRP KNE CONDYLE&PLATU MEDIAL&LAT COMPARTMENTS
27486	REVJ TOTAL KNEE ARTHRP W/WO ALGRFT 1 COMPONENT
L1320	THORACIC PC ORTHOSIS STERNAL COMP CUSTOM FAB

Effective October 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans.

This applies to all Medicaid products offered in Virginia.

CODE	LONG DESCRIPTION
22860	TOTAL DISC ARTHRP ANT SECOND INTERSPACE LUMBAR
27703	ARTHROPLASTY ANKLE REVISION TOTAL ANKLE
S9365	HOM INFUS TX TPN; 1 LITER-DAY DIEM
S9366	HIT TPN; > 1 LITER BUT NOT > 2 LITERS-DA-DIEM
S9367	HIT TPN; > 2 LITERS BUT NOT > 3 LITERS-DA -DIEM

Effective October 1, 2026, the medical code(s) listed below will be Not Covered by Sentara Health Plans with the associated exceptions.

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
T1018	SCHOOL-BASED IND EDUCATION PROGRAM SERV BUNDLED
T1019	PERSONAL CARE SERVICES PER 15 MINUTES
T1020	PERSONAL CARE SERVICES PER DIEM
T1022	CONTRACT HOME HEALTH SRVC UNDER CONTRACT DAY
T1027	FAMILY TRAIN & COUNSEL CHILD DEVELOPMENT 15 MINS
T1040	MEDICAID CERT COM BEHAVIORAL HLTH CLINIC SRVC PD
T1041	MEDICAID CERT COM BEHAVIORAL HLTH CLINIC SRVC PM
T2012	HABILITATION EDUCATIONAL WAIVER; PER DIEM
T2013	HABILITATION EDUCATIONAL WAIVER; PER HOUR
T2014	HABILITATION PREVOCATIONAL WAIVER; PER DIEM
T2015	HABILITATION PREVOCATIONAL WAIVER; PER HOUR
T2016	HABILITATION RESIDENTIAL WAIVER; PER DIEM
T2017	HABILITATION RESIDENTIAL WAIVER; PER 15 MINUTES
T2018	HABILITATION SUPP EMPLOYMENT WAIVER; PER DIEM
T2019	HABILITATION SUPP EMPLOYMENT WAIVER; PER 15 MIN
T2020	DAY HABILITATION WAIVER; PER DIEM
T2021	DAY HABILITATION WAIVER; PER 15 MINUTES
T2022	CASE MANAGEMENT; PER MONTH

H2040	COORDINATED SC TEAM-BASED FIRST EP PSY PER MONTH
G2212	PROLONG OFC/OP E&M BYND REQ TIME; EA ADD 15 M
90738	JAPANESE ENCEPHALITIS VACCINE INACTIVATED IM
90758	ZAIRE EBOLAVIRUS VACCINE LIVE FOR IM USE
90589	CHIKUNGUNYA VIRUS VACCINE LIVE FOR IM USE
90593	CHIKUNGUNYA VIRUS VACCINE RECOMBINANT FOR IM USE
90625	CHOLERA VACCINE ADULT 1 DOSE LIVE FOR ORAL USE