Authorization Updates. Changes will go into effect 60 days from this Provider Alert.

Sentara Health Plans would like to notify you of the following authorization updates made since the last version of providerNEWS:

You can access all current Sentara Health Plans medical behavioral health, durable medical equipment, imaging, medical, obstetrics, pharmacy, and surgical policies via the weblink. sentarahealthplans.com/providers/clinical-reference/medical-policies.

POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS	
Cosmetic and Reconstructive Surgery, Surgical 03	Criteria from Surgical 14, Panniculectomy added to policy for both Commercial and Medicaid. Codes: 12011, 15780, 15781, 15782, 15783, 15788, 15789, 15792, 15793, 15832, 15833, 15834, 15835, 15836, 15837, 15838, 15839, 11950, 11951, 11952, 11954, 15769, 15771, 15772, 15773, 15774, 15819, 15824, 15825, 15826, 15828, 15829, 15876, 15877, 15878, 15879, 17340, 17360, 17380, 21137, 21138, 21139, 21175, 21179, 21180, 21270.	 Cosmetic and Reconstructive Surgery Commercial - Surgical 03 Cosmetic and Reconstructive Surgery Medicaid - Surgical 03 	
Exhaled Breath Condensate, Medical 286 Archiving policy for all LOBs. Codes: 83987.		Archiving March 1, 2025	
Genetic and Molecular Testing, Medical 34A – 34E	Update SHP Medical 34 series and rename Genetic and Molecular Testing to include criteria not available in MCG from Medical 34A-E. Utilize MCG for when genetic tests available.		
Medical Necessity Guidelines, Medical 347	Commercial Policy created. No associated codes.		

POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS
New Technology Review Nerivio Device	For both Commercial and Medicaid added to Headache Treatment, Surgical 103 and Electrical Stimulation, DME 07. Codes: A4540.	
Not Medically Necessary, Experimental, Investigational and Unproven Guidelines, Medical 348	Commercial Policy created. No associated codes.	
Panniculectomy, Surgical 14	Archiving policy and adding to Surgical 03, Cosmetic and Reconstructive Surgery for Commercial and Medicaid. Codes: 15830, 15847, 15877.	Archiving March 1, 2025
Post Partum Recovery Garment	Added to Compression garments, DME 04 and Miscellaneous Orthotics and Braces, DME 251 for Commercial and Medicaid. Continue to utilize NCD 280.1 for Medicare. Codes: L2620.	
Spinal Braces, Orthotics and Garments, DME 244	Criteria expanded for Commercial and Medicaid. Codes: L0450, L0452, L0454, L0455, L0457, L0458, L0462, L0466, L0467, L0468, L0469, L0470, L0472, L0480, L0482, L0484, L0486, L0488, L0490, L0491, L0492, L0621, L0622, L0623, L0624, L0625, L0626, L0627, L0628, L0629, L0630, L0631, L0632, L0633, L0634, L0635, L0636, L0637, L0639, L0640, L0641, L0642, L0643, L0648, L0649, L0650, L0651, L1310, L1499, L2999.	 Spinal Braces, Orthotics and Garments Commercial - <u>DME 244</u> Spinal Braces, Orthotics and Garments Medicaid - <u>DME 244</u>
Vestibular Evoked Myogenic Potential (VEMP), Medical 174	Medical 174, Vestibular Function Testing was renamed to Vestibular Evoked Myogenic Potential (VEMP) for both Commercial and Medicaid, and codes have been removed from policy in favor for pay upon request. Codes Removed: 92537, 92538, 92540,	 Vestibular Function Testing Commercial - Medical 174 Vestibular Function Testing Medicaid - Medical 174

POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS
	92541, 92542, 92544, 92545, 92546, 92547.	

IBMT UPDATES: SHP Medicaid/ SHP Medicare/SHP Commercial & Exchange Plans LVAD Driveline Supplies - Prior Authorization Updates, Effective 3.1.2025

Prior Authorization requirements for three (3) procedure codes will be updated to reflect No Authorization Required (N) effective 3.1.2025 for Medicare, Medicaid, and Commercial line of business.

Q0507

Q0508

Q0509

Sentara Health Plans would like to notify you of the following authorization updates made since the last version of Network News:

Note-Code changes and deleted codes are uploaded to the Sentara Health Plan website.

Sentara Health Plans Pal Tool: pal.sentarahealthplans.com

IBMT UPDATES: SHP Commercial & Exchange Plans Prior Authorization Updates, Effective 3.1.2025

Prior Authorization requirements for nine (9) procedure codes will be updated to reflect Authorization Required (Y) effective 3.1.2025 for SHP Commercial & Exchange Plans lines of business.

52287

62350

63276

63281

63283

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	63663
	63664
	90589
	90683

IBMT UPDATES: Durable Medical Equipment Authorization Updates for Medicare & Medicaid Effective 3.1.2025

Prior Authorization requirements for thirteen (13) procedure codes will be updated to reflect Authorization Required (Y) effective 3.1.2025 for Medicare & Medicaid line of business.

L1310	L2126	L8035
L1685	L2128	
L1686	L2132	
L2108	L2134	
L2114	L2136	
L2116	L3981	

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Note-Code changes and deleted codes are uploaded to the Sentara Health Plan website.

Sentara Health Plans Pal Tool: pal.sentarahealthplans.com

IBMT UPDATES: Prior Authorization Updates for Medicare Effective 3.1.2025

Prior Authorization requirements for four (4) procedure codes will be updated to reflect Authorization Required (Y) effective 3.1.2025 for Medicare line of business.

30462	47379
11981	11983

Sentara Health Plans would like to notify you of the following authorization updates made since the last version of Network News:

Note-Code changes and deleted codes are uploaded to the Sentara Health Plan website.

IBMT UPDATES: Prior Authorization Updates for Medicaid Effective 3.1.2025

Prior Authorization requirements for one (1) procedure code will be updated to reflect Authorization Required (Y) effective 3.1.2025 for Medicaid line of business.

47379

Sentara Health Plans would like to notify you of the following authorization updates made since the last version of Network News:

Note-Code changes and deleted codes are uploaded to the Sentara Health Plan website.

Sentara Health Plans Pal Tool: pal.sentarahealthplans.com