

Prior Authorization Requirement Changes

Sentara Health Plans has relaxed auth on 499 codes for all Commercial products offered in Virginia to align with the Sentara Health Plans Commercial PAL Search tool. Updates include, but are not limited to, the following categories:

This applies to all Commercial products offered in Virginia.

1. Medical & Surgical Supplies
2. Cardiovascular Procedures
3. Surgical Procedures on the Cardiovascular System
4. Proprietary Laboratory Analyses
5. Outpatient PPS

Prior Authorization Requirement Changes

Effective October 1, 2025, the medical code(s) listed below will not require Prior Authorization/Precertification by Sentara Health Plans.

This applies to all Medicaid products offered in Virginia.

CODE	LONG DESCRIPTION
92606	THERAPEUTIC SERVICE(S) FOR THE USE OF NON-SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
92609	THERAPEUTIC SERVICES FOR THE USE OF SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
97140	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/ MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION) 1 OR MORE REGIONS, EACH 15 MINUTES

Prior Authorization Requirement Changes

Effective December 1, 2025, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans with Exception "No Authorization Required Until DMAS Limit is Reached".

This applies to all Medicaid products offered in Virginia.

CODE	LONG DESCRIPTION
A7020	INTERFACE FOR COUGH STIMULATING DEVICE, INCLUDES ALL COMPONENTS, REPLACEMENT ONLY

Prior Authorization Requirement Changes

Effective December 1, 2025, the medical code(s) listed below will not require Prior Authorization/Precertification by Sentara Health Plans.

This applies to all Commercial products offered in Virginia.

A4623	21315	23071	28039	30801	63663	97598	A6511	L8480	S0353
A4624	21320	23075	28043	31570	63664	97602	B4081	L8511	S0354
A4625	21330	23120	28289	31571	65778	0479T	B4082	L8513	S8424
A4626	21336	23130	28291	31574	65782	0480T	B4083	L8607	29806
21011	21337	24071	28292	31641	66170	A4623	B4087	L8630	29820

21012	21552	26111	28295	50592	66172	A4624	B4088	L8631	29905
21013	21555	26115	28296	50593	66174	A4625	G0248	L8642	29906
21014	21811	27080	28297	52327	66710	A4626	G0249	L8659	29907
21230	21930	27138	28298	58674	75736	A4627	L3660	Q2026	G0289
21235	21931	27486	28299	61556	97597	A6508	L8470	Q4112	G0428
S2112	S2300	29891	29904	29871	29874				

Prior Authorization Requirement Changes

Effective February 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.

21280	65770	38206	0042T	G0465	23802	55200	S4014	S4021	S4042
21282	78801	38207	A4211	L8035	29804	58999	S4015	S4022	58970
28446	78802	38208	A4244	H2011	29860	58760	S4016	S4023	58976
29863	78803	51990	E0565	A4575	29863	55870	S4018	S4025	S4017
33268	79445	51999	E0604	E0446	19396	S4013	S4020	S4035	S4026
S4027	S4028	S4030	S4031	S4035	S4037	S4040	S4042	58770	

Prior Authorization Requirement Changes

Effective February 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans with Exception "No auth required until limit of 10 hours for Neuro Psych Testing is reached".

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
96132	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP 1ST HOUR
96133	NEUROPSYCHOLOGICAL TST EVAL PHYS/QHP EA ADDL HR

Prior Authorization Requirement Changes

Effective February 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans with Exception "No auth required until limit of 8 hours is reached for Psych Testing is reached".

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
96130	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR
96131	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR

Prior Authorization Requirement Changes

Effective February 1, 2026, the medical code(s) listed below will require Prior Authorization/Precertification by Sentara Health Plans with Exception "No auth required until limit of 8 hours is reached for Psych Testing; 10 hours for Neuro Psych Testing".

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
96136	PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN
96137	PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN
96138	PSYCL/NRPSYCL TST TECH 2+ TST 1ST 30 MIN
96139	PSYCL/NRPSYCL TST TECH 2+ TST EA ADDL 30 MIN
96146	PSYCL/NRPSYCL TST ELEC PLATFORM AUTO RESULT
96156	HEALTH BEHAVIOR ASSESSMENT/RE-ASSESSMENT
96158	HEALTH BEHAVIOR IVNTJ INDIV F2F 1ST 30 MIN
96159	HEALTH BEHAVIOR IVNTJ INDIV F2F EA ADDL 15 MIN

Prior Authorization Requirement Changes

Effective February 1, 2026, the medical code(s) listed below will not require Prior Authorization/Precertification by Sentara Health Plans with Exception "Code is not reimbursable".

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
99377	SUPERVISION HOSPICE PATIENT/MONTH 15-29 MIN
99378	SUPERVISION HOSPICE PATIENT/MONTH 30 MINUTES/>

Prior Authorization Requirement Changes

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

This applies to all Commercial products offered in Virginia.

CODE	LONG DESCRIPTION
99070	SUPPLIES&MATERIALS ABOVE/BEYOND PROV BY PHYS/QHP
A9286	HYGIENIC ITEM OR DEVICE, DISPOSABLE OR NON-DISPOSABLE, ANY TYPE, EACH
G0330	FACILITY SERVICES FOR DENTAL REHABILITATION PROCEDURE(S) PERFORMED ON A PATIENT WHO REQUIRES MONITORED ANESTHESIA (E.G., GENERAL, INTRAVENOUS SEDATION (MONITORED ANESTHESIA CARE) AND USE OF AN OPERATING ROOM
S9152	SPEECH THERAPY, RE-EVALUATION

Prior Authorization Requirement Changes

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

This applies to Self-Funded Commercial products offered in Virginia.

15786	24071	38213	63663	93701	0116U	0412T	0580T	E0610	H0023	L6698	Q4267
15787	24075	38214	63664	93702	0117U	0413T	0581T	E0615	H0024	L6883	Q4268
20985	24999	38215	64400	95803	0119U	0414T	0614T	E0616	H0025	L6884	Q4269
20999	25999	38242	64405	95940	0122U	0415T	0640T	E0656	H0032	L6885	Q4270
21011	26111	38243	64580	95941	0123U	0416T	0652T	E0657	H0034	L7259	Q4271
21012	26115	40840	64625	96112	0156U	0417T	0653T	E0677	H0035	L7400	Q9991
21013	26989	40842	65778	96113	0164T	0418T	0654T	E0711	H2018	L7401	Q9992

21014	27120	40843	65779	96440	0174T	0432U	0664T	E0761	H2020	L7402	S0013
21016	27122	40844	65780	96446	0175T	0437T	0665T	E0762	K0455	L7403	S0201
21315	27130	40845	65781	96450	0208T	0439T	0666T	E0785	K0462	L7404	S0800
21320	27132	41512	65782	96522	0209T	0443T	0667T	E0786	K0601	L7405	S0810
21330	27134	41820	67911	96549	0210T	0444T	0668T	E0830	K0602	L7600	S2068
21335	27137	41870	69300	96931	0211T	0445T	0669T	E0840	K0603	L8040	S2080
21336	27138	41872	81596	96932	0212T	0505T	0670T	E0850	K0604	L8047	S2300
21337	27140	41874	88380	96933	0234T	0506T	0691T	E0856	K0900	L8048	S2348
21499	27486	43257	89251	96934	0235T	0509T	0694T	E0860	K1004	L8049	S2900
21552	27487	43999	89253	96935	0236T	0510T	0695T	E0920	K1007	L8400	S8130
21555	27599	44705	89257	96936	0237T	0515T	0696T	E0930	K1030	L8410	S8131
21600	27899	50549	89258	97026	0238T	0516T	0699T	E0947	K1035	L8417	S8930
21930	28039	50949	89259	97158	0243U	0517T	0707T	E1030	L0455	L8420	S8948
21931	28043	51999	89260	97163	0247U	0518T	0708T	E1352	L0457	L8430	S9090
22110	28289	52287	89261	97164	0263T	0519T	0709T	E1357	L0458	L8470	S9480
22206	28899	53430	89264	97165	0264T	0520T	0736T	E1358	L0466	L8480	S9482
22207	29799	53451	89268	97166	0265T	0521T	0807T	E1700	L0467	L8511	S9485
22208	29805	53452	89272	97167	0266T	0522T	0808T	E1701	L0469	L8512	T1012
22210	29806	53453	89280	97168	0267T	0524T	0810T	E1702	L1907	L8513	
22212	29807	53454	89281	97597	0268T	0541T	A2014	E2120	L2034	L8514	
22214	29819	53899	89290	97598	0269T	0542T	A2019	G0151	L2387	L8515	
22216	29820	56620	89291	97602	0270T	0546T	A2020	G0152	L3760	L8608	
22220	29821	56625	89322	97610	0271T	0547T	A2021	G0153	L3763	L8609	
22222	29822	56805	89335	97810	0272T	0554T	A4520	G0155	L3764	L8631	
22224	29823	56810	89337	97811	0273T	0555T	A4554	G0157	L3765	L8659	
22226	29824	57110	89342	97813	0278T	0556T	A4627	G0158	L3905	L8679	
22526	29825	57291	89343	97814	0310U	0557T	A6000	G0162	L3961	L8681	
22527	29826	57292	89344	98940	0311U	0558T	A7049	G0276	L3967	L8684	
22556	29827	57335	89346	98941	0322U	0559T	C9356	G0283	L3971	L8689	
22830	29870	58275	89352	98942	0331T	0560T	C9362	G0288	L3973	L8693	
22847	29888	58578	89353	98943	0332T	0561T	E0117	G0410	L3975	L8695	
22848	29999	58579	89354	0004M	0333T	0562T	E0144	G0411	L3976	L8696	
22850	30468	62350	89356	0042T	0335T	0565T	E0181	G0453	L3977	L8701	
22852	31660	62351	89398	0054T	0342T	0566T	E0231	G0455	L3978	L8702	
22860	31661	62360	90283	0055T	0351U	0571T	E0232	G2082	L5969	M0075	
22999	33274	62361	91112	0060U	0355U	0572T	E0247	G2083	L5990	M0076	
23071	33275	62362	92145	0061U	0361U	0573T	E0248	G9012	L6621	Q1004	
23075	36468	63016	92521	0063U	0378T	0574T	E0370	H0010	L6638	Q1005	
23120	36482	63046	92522	0071T	0379T	0575T	E0371	H0014	L6646	Q2052	
23130	38205	63055	92523	0072T	0408T	0576T	E0372	H0015	L6647	Q4082	
23472	38209	63276	92524	0105U	0409T	0577T	E0373	H0017	L6648	Q4206	

23474	38210	63281	92610	0106U	0410T	0578T	E0433	H0018	L6677	Q4265	
23929	38212	63283	93268	0107U	0411T	0579T	E0481	H0019	L6697	Q4266	

Prior Authorization Requirement Changes

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

This applies to Self-Funded Commercial products offered in Virginia.

21248	88025	97169	A0120	A9180	H0002	S0320	S9449	T4526	T4541
21249	88027	97170	A0130	A9270	H0021	S0592	S9452	T4527	T4542
38204	88028	97171	A0420	A9273	H1001	S0622	S9470	T4528	T4543
55400	88029	97172	A0888	A9280	H1002	S4993	T1005	T4529	T4544
69090	88036	98966	A4233	A9900	H1003	S5000	T1017	T4530	T4545
80155	88037	98967	A4234	E0215	H1004	S5102	T1032	T4531	V2610
86910	88040	98968	A4235	G0159	H1010	S5116	T1033	T4532	V2615
86911	88045	99002	A4236	G0176	H2026	S5121	T1999	T4533	V2787
88000	88099	99080	A4267	G0181	H2034	S5135	T2003	T4534	V2788
88005	90882	99439	A4268	G0281	L7900	S5136	T2023	T4535	
88007	92548	99487	A4269	G0295	L7902	S5165	T4521	T4536	
88012	93025	99489	A4634	G0447	M0010	S5170	T4522	T4537	
88014	94452	99490	A7023	G0473	Q0513	S8110	T4523	T4538	
88016	94453	99491	A9152	G2021	Q4050	S8415	T4524	T4539	
88020	96904	A0100	A9153	G2211	S0281	S9442	T4525	T4540	

Note: Code changes and deleted codes are available on the Sentara Health Plans [website](#).