

Medical Prior Authorization List Notice of Change

This is a listing of the changes that have occurred to the Medical Prior Authorization List effective May 1, 2021. For a complete list of services and procedures that require prior authorization, please refer to the Medical Prior Authorization List (Auth List).

General Information

- Health First Health Plans (Health Plan) administers these requirements.
- Benefits are determined by the plan. Items listed may have limited coverage or not be covered at all.
- Referrals are not required for in-network specialist care. Refer to the current Provider Directory or visit our website at myHFHP.org for a list of network providers.
- Authorization is not a guarantee of payment. Coverage is subject to member eligibility, as well as applicable benefit and provider contract provisions on the date of service. Contract limitations may apply and supersede any authorization provided.

Services and Procedures No Longer Requiring Prior Authorization

Category	Codes
Orthotics / Orthosis / Braces / Prosthetics and Accessories	L2040, L2070, L2184, L2186, L2260, L2265, L2275, L2310 L2320, L2335, L2370, L2375, L2380, L2385, L2387, L2390 L2395, L2415, L2425, L2430, L2530, L2550, L2600, L2610 L2622, L2630, L2650, L2660, L2670, L2680, L2755, L2768 L3140, L3150, L3160, L3170, L4055, L4060, L4070, L4205 L4210, L4360, L4361, L6890, L7510, L7520, L8310, L8470 L8480, L8501, L8507, L8509, L8510

Miscellaneous Updates

Category	Codes
Behavioral Health	All neuropsychological testing requests should be sent to the Health Plan for review. If the testing reveals a behavioral or mental health diagnosis, all claims should be submitted to Magellan.

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