



**PROCEDURE CODES REQUIRING PRIOR AUTHORIZATION EFFECTIVE FOR SERVICE
DATES 09/01/2019 and AFTER**

**UTILIZE SUPERIOR HEALTHPLAN'S ONLINE PRIOR AUTHORIZATION
TOOL FOR PRIOR AUTHORIZATION REQUIREMENTS**

Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
22858	REMOVAL OF TOTAL DISC ARTHROPLASTY ARTIFICIAL DISC, ANTERIOR APPROACH, SINGLE INTERSPACE	09/01/2021
33270	INS/REP SUBQ DEFIBRILLATOR	07/01/21
33271	INSJ SUBQ IMPLTBL DFB ELCTRD	07/01/21
33274	TCAT INSJ/RPL PERM LEADLESS PACEMAKER RV W/IMG	07/01/21
0163T	LUMB ARTIF DISKECTOMY ADDL	11/01/2019
0164T	REMOVE LUMB ARTIF DISC ADDL	11/01/2019
0165T	REVISE LUMB ARTIF DISC ADDL	11/01/2019
0200T	PERQ SACRAL AUGMT UNILAT INJ	11/01/2019
0201T	PERQ SACRAL AUGMT BILAT INJ	11/01/2019
0202T	POST VERT ARTHRPLST 1 LUMBAR	11/01/2019
0219T	FUSE SPINE FACET JT CERV	11/01/2019
0220T	FUSE SPINE FACET JT THOR	11/01/2019
0221T	FUSE SPINE FACET JT LUMBAR	11/01/2019
0222T	FUSE SPINE FACET JT ADD SEG	11/01/2019
0274T	PERQ LAMOT/LAM CRV/THRC	11/01/2019
0275T	PERQ LAMOT/LAM LUMBAR	11/01/2019
20931	SP BONE ALGRFT STRUCT ADD-O	11/01/2019
20937	AUTOGRAFT SPINE SURGERY MORSELIZED SEP INCISION	11/01/2019
20938	AUTOGRAFT SPINE SURGERY BICORT/TRICORT SEP INC	11/01/2019
22100	PART EXC POST VERTEB COMPON-1 SEGMENT; CERV	11/01/2019
22101	PART EXC POST VERTEB COMPON-1 SEGMENT; THOR	11/01/2019
22102	PART EXC POST VERTEB COMPON-1 SEGMENT; LUMB	11/01/2019
22103	PART EXC POST VERTEB COMPON; EA ADD SEGMENT	11/01/2019
22110	PART EXC VERTEB BODY WO DECOMP-1 SEGMENT; CERV	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
22112	PART EXC VERTEB BODY WO DECOMP-1 SEGMT; THOR	11/01/2019
22114	PART EXC VERTEB BODY WO DECOMP-1 SEGMT; LUMB	11/01/2019
22116	PART EXC VERTEB BODY; EA ADD VERTEB SEGMT	11/01/2019
22206	CUT SPINE 3 COL THOR	11/01/2019
22207	CUT SPINE 3 COL LUMB	11/01/2019
22208	CUT SPINE 3 COL ADDL SEG	11/01/2019
22210	OSTEOT SPINE-POST/POSTLAT APPROACH-1 SEGMT; CERV	11/01/2019
22212	OSTEOT SPINE-POST/POSTLAT APPROACH-1 SEGMT; THOR	11/01/2019
22214	OSTEOT SPINE-POST/POSTLAT APPROACH-1 SEGMT; LUMB	11/01/2019
22216	OSTEOT SPINE-POST/POSTLAT APPROACH; EA ADD SEGMT	11/01/2019
22220	OSTEOT SPINE W/DISKECT-ANT APPRCH-1 SEGMT; CERV	11/01/2019
22222	OSTEOT SPINE W/DISKECT-ANT APPRCH-1 SEGMT; THOR	11/01/2019
22224	OSTEOT SPINE W/DISKECT-ANT APPRCH-1 SEGMT; LUMB	11/01/2019
22226	OSTEOT SPINE W/DISKECT-ANT APPROCH; EA ADD SEGMT	11/01/2019
22325	OPEN TX VERT FX/DISLOC-VIA POST-1 SEGMT; LUMB	11/01/2019
22326	OPEN TX VERT FX/DISLOC-VIA POST-1 SEGMT; CERV	11/01/2019
22327	OPEN TX VERT FX/DISLOC-VIA POST-1 SEGMT; THOR	11/01/2019
22328	OPEN TX VERT FX/DISLOC VIA POST; EA ADD VERT/SEG	11/01/2019
22510	PERQ CERVICOTHORACIC INJECT	11/01/2019
22511	PERQ LUMBOSACRAL INJECTION	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
22512	VERTEBROPLASTY ADDL INJECT	11/01/2019
22513	PERQ VERTEBRAL AUGMENTATION	11/01/2019
22514	PERQ VERTEBRAL AUGMENTATION	11/01/2019
22515	PERQ VERTEBRAL AUGMENTATION	11/01/2019
22526	PERCUTANEOUS INTRADISCAL ELECTROTHERMAL ANNULOPLASTY	11/01/2019
22532	ARTHRDSIS LAT MINI DISKECT THOR	11/01/2019
22533	ARTHRDSIS LAT MINI DISKECT LUMB	11/01/2019
22534	ARTHRDSIS LAT MINI DISKECT EA ADD	11/01/2019
22548	ARTHRODESIS-ANT-C1 C2, W/WO EXC ODONTOID PROCESS	11/01/2019
22551	NECK SPINE FUSE&REMOVE ADDL	11/01/2019
22552	ADDL NECK SPINE FUSION	11/01/2019
22554	ARTHRODESIS-ANT W/MINI DISKECT; CERV BELOW C2	11/01/2019
22556	ARTHRODESIS-ANT INTERBODY W/MINI DISKECT; THOR	11/01/2019
22558	ARTHRODESIS-ANT INTERBODY W/MINI DISKECT; LUMB	11/01/2019
22585	ARTHRODESIS-ANT-W/MINI DISKECT; EA ADD INTRSPACE	11/01/2019
22586	PRESCLR FUSE W/ INSTR L5/S1	11/01/2019
22590	ARTHRODESIS-POST TECH, CRANIOCERV	11/01/2019
22595	ARTHRODESIS-POST TECH, ATLAS-AXIS	11/01/2019
22600	ARTHRODESIS-POST/POSTLAT-1 LEVEL; CERV BELOW C2	11/01/2019
22610	THORAX SPINE FUSION	11/01/2019
22612	LUMBAR SPINE FUSION	11/01/2019
22614	ARTHRODESIS-POST/POSTLAT TECH; EA ADD VERT SEGMENT	11/01/2019
22630	ARTHRODESIS-POST INTERBODY-1 INTERSPACE; LUMB	11/01/2019
22632	ARTHRODESIS-POST INTERBODY; EA ADD INTERSPACE	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
22633	LUMBAR SPINE FUSION COMBINED	11/01/2019
22634	SPINE FUSION EXTRA SEGMENT	11/01/2019
22800	ARTHRODESIS-POST-W/WO CAST; 6/LESS VERTEB SEGMT	11/01/2019
22802	ARTHRODESIS-POST-W/WO CAST; 7 TO 12 VERTEB SEGMT	11/01/2019
22804	ARTHRODESIS-POST-W/WO CAST; 13/MORE VERTEB SEGMT	11/01/2019
22808	ARTHRODESIS-ANT-W/WO CAST; 2 TO 3 VERTEB SEGMT	11/01/2019
22810	ARTHRODESIS-ANT-W/WO CAST; 4 TO 7 VERTEB SEGMT	11/01/2019
22812	ARTHRODESIS-ANT-W/WO CAST; 8/MORE VERTEB SEGMT	11/01/2019
22818	KYPHECTOMY, RESECT VERT SEGMT; 1-2 SEGMT	11/01/2019
22819	KYPHECTOMY, RESECT VERT SEGMT; 3/MORE SEGMT	11/01/2019
22830	EXPLOR SPINAL FUSION	11/01/2019
22840	POSTERIOR NON-SEGMENTAL INSTRUMENTATION	11/01/2019
22841	INTERNAL SPINAL FIXATION WIRING SPINOUS PROCESS	11/01/2019
22842	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG	11/01/2019
22843	POSTERIOR SEGMENTAL INSTRUMENTATION 7-12 VRT SEG	11/01/2019
22844	POSTERIOR SEGMENTAL INSTRUMENTATION 13/> VRT SEG	11/01/2019
22845	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS	11/01/2019
22846	ANTERIOR INSTRUMENTATION 4-7 VERTEBRAL SEGMENTS	11/01/2019
22847	ANTERIOR INSTRUMENTATION 8/> VERTEBRAL SEGMENTS	11/01/2019
22848	PELVIC FIXATION OTHER THAN SACRUM	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
22849	REINSERTION SPINAL FIXA DEVICE	11/01/2019
22850	REMOV POST NONSEGMENTAL INSTRUM	11/01/2019
22852	REMOV POST SEGMT INSTRUM	11/01/2019
22853	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W/ARTHRD	11/01/2019
22854	INSJ BIOMCHN DEV VRT CORPECTOMY DEFECT W/ARTHRD	11/01/2019
22855	REMOV ANT INSTRUM	11/01/2019
22856	CERV ARTIFIC DISKECTOMY	09/01/21
22857	LUMBAR ARTIF DISKECTOMY	11/01/2019
22859	INSJ BIOMCHN DEV NTRVRT DISC SPACE W/O ARTHRD	11/01/2019
22861	REVISE CERV ARTIFIC DISC	09/01/21
22862	REVISE LUMBAR ARTIF DISC	11/01/2019
22864	REMOVE CERV ARTIF DISC	09/01/21
22865	REMOVE LUMB ARTIF DISC	11/01/2019
22899	UNLISTED PROC SPINE	11/01/2019
23130	ACROMIOPLAS/ACROMIONECT PART W/WO LIGAMNT RELEAS	11/01/2019
23333	REMOVE SHOULDER FB DEEP	11/01/2019
23334	SHOULDER PROSTHESIS REMOVAL	11/01/2019
23335	SHOULDER PROSTHESIS REMOVAL	11/01/2019
23410	REP RUP MUSCULOTENDINUS CUFF OPN;AC	11/01/2019
23412	REP RUP MUSCLOTENDNUS CUFF OPN;CHRN	11/01/2019
23415	CORACOACROMIAL LIG RELEASE W/WO ACROMIOPLASTY	11/01/2019
23420	RECONS COMPLT SHLDR CUFF AVULS CHRONIC	11/01/2019
23470	ARTHROPLASTY GLENOHUMERAL JT; HEMIARTHROPLASTY	11/01/2019
23472	ARTHROPLASTY GH JT; TOT SHLDR HUMERAL REPLACE	11/01/2019
23473	REVIS RECONST SHOULDER JOINT	11/01/2019
23474	REVIS RECONST SHOULDER JOINT	11/01/2019

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23616	OPEN PROX HUMERAL FRACTURE PROSHETIC REPLACEMENT	11/01/2019
23800	ARTHRODESIS GLENOHUMERAL JOINT;	11/01/2019
23802	ARTHRODESIS GLENOHUMERAL JOINT; W/AUTOG GFT	11/01/2019
24160	REMOVE ELBOW JOINT IMPLANT	11/01/2019
24164	REMOVE RADIUS HEAD IMPLANT	11/01/2019
24360	ARTHROPLASTY ELBOW; W/MEMBRN	11/01/2019
24361	ARTHROPLASTY ELBOW; W/DISTAL HUMERAL PROSTH REPL	11/01/2019
24362	ARTHROPLASTY ELBOW; W/IMPLNT & LIGMNT RECON	11/01/2019
24363	ARTHROPLASTY ELBOW; (TOT ELBOW)	11/01/2019
24365	ARTHROPLASTY RADIAL HEAD	11/01/2019
24366	ARTHROPLASTY RADIAL HEAD; W/IMPLNT	11/01/2019
24370	REVISE RECONST ELBOW JOINT	11/01/2019
24371	REVISE RECONST ELBOW JOINT	11/01/2019
25332	ARTHROPLASTY WRIST; W/WO INTERPOSITION- W/WO FIXA	11/01/2019
25441	ARTHROPLASTY W/PROSTH REPLAC; DISTAL RADIUS	11/01/2019
25442	ARTHROPLASTY W/PROSTH REPLAC; DISTAL ULNA	11/01/2019
25443	ARTHROPLASTY W/PROSTH REPLAC; SCAPHOID	11/01/2019
25444	ARTHROPLASTY W/PROSTH REPLAC; LUNATE	11/01/2019
25445	ARTHROPLASTY W/PROSTH REPLAC; TRAPEZIUM	11/01/2019
25446	ARTHROPLASTY W/PROS REPLAC; DIST RAD/PART CARPUS	11/01/2019
25800	ARTHRODESIS WRIST; COMPLT WO BONE GFT	11/01/2019
25805	ARTHRODESIS WRIST;W/SLIDING GFT	11/01/2019
25810	ARTHRODESIS WRIST JT; W/ILIAC/OTHER AUTOGFT	11/01/2019
25820	ARTHRODESIS WRIST; LIMITED WO BONE GFT	11/01/2019
25825	ARTHRODESIS WRIST; W/AUTOGFT	11/01/2019

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27033	ARTHROT HIP-EXPLOR/REMOV LOOSE BODY/FB	11/01/2019
27090	REMOV HIP PROSTH; (SEPART PROC)	11/01/2019
27091	REMOV HIP PROSTH; COMPLIC TOT HIP METHYLMETH	11/01/2019
27120	ACETABULOPLASTY	11/01/2019
27122	ACETABULOPLASTY; RESECT FEM HEAD	11/01/2019
27125	HEMIARTHROPLASTY HIP PART	11/01/2019
27130	ARTHROPLASTY ACETABULAR & PROX FEM PROSTH REPLAC	11/01/2019
27132	CONVERSION PREV HIP TO TOTAL HIP REPLAC W/WO GFT	11/01/2019
27134	REVIS TOT HIP ARTHROPLASTY; BOTH COMPON W/WO GFT	11/01/2019
27137	REVIS TOT HIP ARTHROPLASTY; ACETABULAR ONLY	11/01/2019
27138	REVIS TOT HIP ARTHROPLASTY; FEMORAL ONLY W/WO GF	11/01/2019
27280	FUSION OF SACROILIAC JOINT	11/01/2019
27299	UNLISTED PROC PELVIS/HIP JT	11/01/2019
27360	PART EXC BONE FEM/PROX TIBIA &/OR FIBULA	11/01/2019
27405	REPR PRIM TORN LIGAMNT/CAPSULE KNEE; COLLATERAL	11/01/2019
27407	REPR PRIM TORN LIGAMNT/CAPSULE KNEE; CRUCIATE	11/01/2019
27409	REPR PRIM TORN LIGAM KNEE; COLLATERAL & CRUCIATE	11/01/2019
27412	AUTOLOGOUS CHONDROCYTE IMPLANTATION KNEE	11/01/2019
27415	OSTEOCHONDRAL ALLOGRAFT KNEE OPEN	11/01/2019
27416	OSTEOCHONDRAL KNEE AUTOGRAFT	11/01/2019
27437	ARTHROPLASTY PATELLA; WO PROSTH	11/01/2019
27438	ARTHROPLASTY PATELLA; W/PROSTH	11/01/2019
27440	ARTHROPLASTY KNEE TIBIAL PLATEAU	11/01/2019

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27441	ARTHROPLASTY KNEE TIB PLATEAU; W/DEBRID/SYNOVECT	11/01/2019
27442	ARTHROPLASTY FEM CONDYLE/TIB PLATEAU KNEES;	11/01/2019
27443	ARTHROPLASTY CONDYLE KNEE; DEBRID PART SYNOVECT	11/01/2019
27445	ARTHROPLASTY KNEE HINGE PROSTH	11/01/2019
27446	ARTHROPLASTY KNEE CONDYLE & PLATEAU; MEDIAL/LAT	11/01/2019
27447	ARTHROPLASTY KNEE CONDYLE & PLATEAU; MED & LAT	11/01/2019
27486	REVIS TOT KNEE ARTHROPL W/WO ALLOGFT; 1 COMPON	11/01/2019
27487	REVIS TOT KNEE ARTHROPLAS; FEM & WHOLE TIB COMP	11/01/2019
27488	REMOV TOTAL KNEE PROSTH METHYLMETH W/WO SPACER	11/01/2019
27700	ARTHROPLASTY ANK	11/01/2019
27702	ARTHROPLASTY ANK; W/IMPLNT (TOT ANK)	11/01/2019
27703	ARTHROPLASTY ANK; REVIS TOT ANK	11/01/2019
27704	REMOV ANK IMPLNT	11/01/2019
27870	ARTHRODESIS, ANKLE, OPEN	11/01/2019
28010	TENOT PERCUT TOE; SINGL TENDON	11/01/2019
28011	TENOT PERCUT TOE; MX TENDON	11/01/2019
29826	SURGICAL ARTHROSCOPY SHO W/CORACOACRM LIGM RLS	11/01/2019
29827	SURGICAL ARTHROSCOPY SHOULDER W/ROTATOR CUFF RPR	11/01/2019
29860	ARTHROSCOPY HIP DX W/WO SYNOVIAL BX (SEP PROC)	11/01/2019
29861	ARTHROSCOPY HIP SURG; W/REMOV LOOSE/FB	11/01/2019
29862	ARTHROSCOPY HIP SURG; DEBRID/SHAV ARTIC CARTIL	11/01/2019
29863	ARTHROSCOPY HIP SURG; W/SYNOVECTOMY	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
29866	ARTHROSCOPY KNEE OSTEOCHONDRAL AGRFT MOSAICPLAST	11/01/2019
29867	ARTHROSCOPY KNEE SURG; OSTEOCHONDRAL ALLOGRAFT	11/01/2019
29868	ARTHROSCOPY KNEE SURG; MENISCAL TPLNT MED/LAT	11/01/2019
29870	ARTHROSCOPY KNEE DX W/WO SYNOVIAL BX (SEP PRO)	11/01/2019
29871	ARTHROSCOPY KNEE SURG; INFEC/LAVAGE & DRAINAGE	11/01/2019
29873	SCOPE KNEE SURGICAL; W/LAT RELEASE	11/01/2019
29874	ARTHROSCOPY KNEE SURG; REMOV LOOSE/FB	11/01/2019
29875	ARTHROSCOPY KNEE SURG; SYNOVECTOMY LTD (SEP PRO)	11/01/2019
29876	ARTHROSCOPY KNEE SURG; SYNOVECTOMY MAJOR	11/01/2019
29877	ARTHROSCOPY KNEE SURG; DEBRID/SHAV ARTIC CARTIL	11/01/2019
29879	ARTHROSCOPY KNEE SURG; ABRASION ARTHROPLASTY	11/01/2019
29880	KNEE ARTHROSCOPY/SURGERY	11/01/2019
29881	KNEE ARTHROSCOPY/SURGERY	11/01/2019
29882	ARTHROSCOPY KNEE SURG; W/MENISCUS REPR (MED/LAT)	11/01/2019
29883	ARTHROSCOPY KNEE SURG; W/MENISCUS REPR (MED & LAT)	11/01/2019
29884	ARTHROSCOPY KNEE SURG; W/LYSIS ADHES (SEP PRO)	11/01/2019
29885	ARTHROSCOPY KNEE SURG; DRILLING W/GFT W/WO FIX	11/01/2019
29886	ARTHROSCOPY KNEE SURG; DRILL-OSTEOCHOND LES	11/01/2019
29887	ARTHROSCOPY KNEE; DRILL-OSTEOCHOND LES W/FIXA	11/01/2019

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29888	ARTHROSCOPICALLY AIDED ACL REPAIR/AUGMENT/RECON	11/01/2019
29889	ARTHROSCOPICALLY AIDED PCL REPAIR/AUGMENT/RECON	11/01/2019
29899	SCOPE ANKLE SURG; W/ANK ARTHRODESIS	11/01/2019
29914	HIP ARTHRO W/FEMOROPLASTY	11/01/2019
29915	HIP ARTHRO ACETABULOPLASTY	11/01/2019
29916	HIP ARTHRO W/LABRAL REPAIR	11/01/2019
29999	UNLISTED ARTHROSCOPY PROCEDURE	11/01/2019
33270	INSERTION OR REPLACEMENT OF PERMANENT SUBCUTANEOUS IMPLANTABLE DEFIBRILLATOR SYSTEM, W/ SUBQ ELECTRODE	09/01/2021
33271	REMOVAL OF SUBCUTANEOUS IMPLANTABLE DEFIBRILLATOR	09/01/2021
33274	TRANSCATHETER INSERTION OR REPLACEMENT OF PERMANENT LEADLESS PACE MAKER, RIGHT VENTRICULAR	09/01/2021
36260	INSRT IMPLNT INTRA-ART INFUSION PUMP	11/01/2019
36563	INSRT TUNNLD CNTRL CVAD W/SUBQ PUMP	11/01/2019
36583	REPL TUNNLD CNTRL CVAD W/SUBQ PUMP	11/01/2019
61215	INSRT SUBQ RESERVOIR/PUMP-CONNECT TO VENT CATH	11/01/2019
62287	PERCUTANEOUS DISKECTOMY	11/01/2019
62350	IMPLNT/REVIS THECAL/EPIDUR CATH; WO LAMINECT	11/01/2019
62351	IMPLNT/REVIS INTHECAL/EPIDUR CATH; W/LAMINECT	11/01/2019
62360	IMPLNT/REPLAC DEVIC-EPIDUR DRUG INFUS; SUBQ RESV	11/01/2019
62361	IMPLNT/REPLAC DEVIC-EPIDUR INFUS; NONPROGRM PUMP	11/01/2019
62362	IMPLNT/REPLAC DEVIC-EPIDUR INFUS; PROGRMBLE PUMP	11/01/2019
62365	REMOV PREV IMPLNT SUBQ RESERVOIR/PUMP	11/01/2019

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62367	ANALYZE SPINE INFUS PUMP	11/01/2019
62368	ELEC ANALYS PROGRAMBLE IMPLNT PUMP; W/REPROGRAM	11/01/2019
63001	LAMINECT W/EXPLOR WO FACETECT 1-2 VERTEB; CERV	11/01/2019
63003	LAMINECT W/EXPLOR WO FACETECT 1-2 VERTEB; THORAC	11/01/2019
63005	LAMINECT W/EXPLOR 1-2 VERTEB; LUMBAR EX SPONDYLO	11/01/2019
63011	LAMINECTOMY W/EXPLOR 1-2 VERTEB SEGMT; SACRAL	11/01/2019
63012	LAMINECT W/REMOV ABNL FACETS-SPONDYLOLIST LUMBAR	11/01/2019
63015	LAMINECTOMY W/EXPLOR > 2 VERTEBRAL SEGMT; CERV	11/01/2019
63016	LAMINECT W/EXPLOR > 2 VERTEBRAL SEGMT; THORACIC	11/01/2019
63017	LAMINECTOMY W/EXPLOR > 2 VERTEBRAL SEGMT; LUMBAR	11/01/2019
63020	NECK SPINE DISK SURGERY	11/01/2019
63030	LOW BACK DISK SURGERY	11/01/2019
63035	SPINAL DISK SURGERY ADD-ON	11/01/2019
63040	LAMINOTOMY W/DECOMP NERV ROOT RE-EXPLOR; CERV	11/01/2019
63042	LAMINOTOMY W/DECOMP NERV ROOT RE-EXPLOR; LUMBAR	11/01/2019
63043	LAMINOTOMY ADDL CERVICAL	11/01/2019
63044	LAMINOTOMY ADDL LUMBAR	11/01/2019
63045	LAMINECTOMY SNGL VERTEBRAL SEGMT-UNI/BIL; CERV	11/01/2019
63046	LAMINECTOMY SNGL VERTEBRAL SEGMT-UNI/BIL; THORAC	11/01/2019
63047	LAMINECTOMY SNGL VERTEBRAL SEGMT-UNI/BIL; LUMBAR	11/01/2019

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63048	LAMINECTMY 1 SEGMENT-UNI/BIL; EA ADD CERV/THOR/LUM	11/01/2019
63050	LAMINOPLASTY CERV W/DECOMP SP CRD 2/> VERT SEG;	11/01/2019
63051	LAMINOPLASTY CERV 2/> SEG; RECON POST BONY ELEM	11/01/2019
63055	TRANSPEDICULAR APPROACH SNGL SEGMENT; THORACIC	11/01/2019
63056	TRANSPEDICULAR APPROACH SNGL SEGMENT; LUMBAR	11/01/2019
63057	TRANSPEDICULAR APPROACH SNGL SEGMENT; EA ADD SEGMENT	11/01/2019
63064	COSTOVERTEBRAL W/DECOMP THORACIC; SNGL SEGMENT	11/01/2019
63066	COSTOVERTEBRAL W/DECOMP THORACIC; EA ADD SEGMENT	11/01/2019
63075	DISKECTOMY ANT W/DECOMP; CERV SNGL INTERSPACE	11/01/2019
63076	DISKECTOMY ANT W/DECOMP; CERV EA ADD INTERSPACE	11/01/2019
63077	DISKECTOMY ANT W/DECOMP; THORACIC 1 INTERSPACE	11/01/2019
63078	DISKECTOMY ANT; THORACIC EA ADD INTERSPACE	11/01/2019
63081	VERTEBRAL CORPECTOMY-ANT W/DECOMP; CERV 1 SEGMENT	11/01/2019
63082	VERTEBRAL CORPECTOMY-ANT; CERV EA ADD SEGMENT	11/01/2019
63085	VERTEBRAL CORPECT TRANSTHORACIC; THORACIC 1 SEGM	11/01/2019
63086	VERTEBRAL CORPECT TRANSTHOR; THORACIC EA AD SEGM	11/01/2019
63087	VERTEBRAL CORPECTOMY LOW THORACIC/LUMBAR; 1 SEGM	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
63088	VERTEBRAL CORPECTOMY LOW THORACIC/LUMBAR; EA ADD	11/01/2019
63090	VERTEBRAL CORPECTOMY TRANSPERITON LUMB/SACRAL; 1	11/01/2019
63091	VERTEBRAL CORPECTOMY LUMBAR/SACRAL; EA ADD SEGMENT	11/01/2019
63101	VERT CORPCT SC&/NRV ROOT THOR 1 SEG	11/01/2019
63102	VERT CORPCT SC&/NRV ROOT LUMB 1 SEG	11/01/2019
63103	VERT CORPCT SC&/NRV ROOT T/L EA ADD	11/01/2019
63170	LAMINECTOMY W/MYELOTOMY CERV/THORACIC/THORACOLUM	11/01/2019
63172	LAMINECTOMY W/DRAIN CYST; TO SUBARACHNOID SPACE	11/01/2019
63173	LAMINECT DRAIN CYSTPERITON/PLEURAL	11/01/2019
63180	LAMINECTOMY & SECT DENTATE LIGAMNT CERV; 1-2 SEG	11/01/2019
63182	LAMINECTOMY & SECT DENTATE LIGAMNT CERV; >2 SEGMENT	11/01/2019
63185	LAMINECTOMY W/RHIZOTOMY; 1 OR 2 SEGMENT	11/01/2019
63190	LAMINECTOMY W/RHIZOTOMY; MORE THAN 2 SEGMENT	11/01/2019
63191	LAMINECTOMY W/SECT SPINAL ACCES NERV	11/01/2019
63194	LAMINECTOMY W/SECT 1 SPINOTHALAMIC TRACT; CERV	11/01/2019
63195	LAMINECTOMY W/SECT 1 SPINOTHALAM TRACT; THORACIC	11/01/2019
63196	LAMINECTOMY W/SECT BOTH SPINOTHALAMIC; CERV	11/01/2019
63197	LAMINECTOMY W/SECT BOTH SPINOTHALAMIC; THORACIC	11/01/2019
63198	LAMINECTOMY-2 STAGES WITHIN 14 DA; CERV	11/01/2019
63199	LAMINECTOMY-2 STAGES WITHIN 14 DA; THORACIC	11/01/2019
63200	LAMINECTOMY W/RELEASE TETHERED CORD LUMBAR	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
63250	LAMINECTOMY-EXC/OCCLUD AV MALFORM CORD; CERV	11/01/2019
63251	LAMINECTOMY-EXC/OCCLUD AV MALFORM CORD; THORACIC	11/01/2019
63252	LAMINECTOMY-EXC AV MALFORM CORD; THORACOLUMBAR	11/01/2019
63265	LAMINECTOMY-EXC INTRASPINAL LES-EXTRADURAL; CERV	11/01/2019
63267	LAMINECTOMY-EXC LES-EXTRADURAL; LUMBAR	11/01/2019
63268	LAMINECTOMY-EXC LES-EXTRADURAL; SACRAL	11/01/2019
63270	LAMINECTOMY-EXC INTRASPINAL LES-INTRADURAL; CERV	11/01/2019
63271	LAMINECTOMY-EXC LES-INTRADURAL; THORACIC	11/01/2019
63272	LAMINECTOMY-EXC LES INTRADURAL; LUMBAR	11/01/2019
63275	LAMINECTOMY BX/EXC NEOPLSM; EXTRADURAL-CERV	11/01/2019
63277	LAMINECTOMY BX/EXC NEOPLSM; EXTRADURAL-LUMBAR	11/01/2019
63280	LAMINECTOMY-NEOPLSM; INTRADURAL EXTRAMEDUL CERV	11/01/2019
63282	LAMINECTOMY-NEOPLSM; INTRADUR EXTRAMEDUL LUMBAR	11/01/2019
63285	LAMINECTOMY; INTRADURAL INTRAMEDULLARY CERV	11/01/2019
63286	LAMINECTOMY; INTRADURAL INTRAMEDULLARY THORACIC	11/01/2019
63287	LAMINECT; INTRADURAL INTRAMEDULLARY THORACOLUMB	11/01/2019
63290	LAMINECTOMY; COMBO EXTRA-INTRADURL LES ANY LEVEL	11/01/2019
63300	VERTEBRAL CORPECTOMY 1 SEGMENT; EXTRADURAL CERV	11/01/2019
63301	VERTEB CORPECT; EXTRADURAL THORAC-TRANSTHORACIC	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
63302	VERTEB CORPECT; EXTRADURAL THORAC-THORACOLUMBAR	11/01/2019
63303	VERTEB CORPECT; LUMBAR/SACRAL TRANSPERITONEAL	11/01/2019
63304	VERTEBRAL CORPECTOMY 1 SEGMENT; INTRADURAL CERV	11/01/2019
63305	VERTEB CORPECT; INTRADURAL THORAC-TRANSTHORACIC	11/01/2019
63306	VERTEB CORPECT; INTRADURAL THORAC-THORACOLUMBAR	11/01/2019
63307	VERTEB CORPECT; INTRADUR LUMB/SACRAL-TRANSPERITO	11/01/2019
63308	VERTEBRAL CORPECTOMY 1 SEGMENT; EA ADD SEGMENT	11/01/2019
63650	PERCUT IMPLNT ELECTRODE ARRAY; EPIDURAL	11/01/2019
63655	LAMINECT IMPLNT ELECTRODE/PLATE/PADDLE EPIDURAL	11/01/2019
63661	REMOVE SPINE ELTRD PERQ ARAY	11/01/2019
63662	REMOVE SPINE ELTRD PLATE	11/01/2019
63663	REVISE SPINE ELTRD PERQ ARAY	11/01/2019
63664	REVISE SPINE ELTRD PLATE	11/01/2019
63685	INCS & SUBQ PLCMT SPINAL NEUROSTIM PULSE GEN	11/01/2019
63688	REVIS/REMOV IMPLNT SPINAL NEUROSTIM PULSE GEN	11/01/2019
81229	CYTOGENETIC CONSTITUTIONAL MICROARRAY ANALYSIS (CMA)	09/01/2021
C1767	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE)	11/01/2019
C1772	INFUSION PUMP, PROGRAMMABLE (IMPLANTABLE)	11/01/2019
C1787	PATIENT PROGRAMMER, NEUROSTIMULATOR	11/01/2019
C1820	GEN NEUROSTIM RECHRG BATT&CHARG SYS	11/01/2019
C1883	ADAPTOR/EXTENSION, PACING LEAD OR NEUROSTIMULATOR LEAD (IMPLANTABLE)	11/01/2019

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
C1891	INFUSION PUMP, NON-PROGRAMMABLE, PERMANENT (IMPLANTABLE)	11/01/2019
C1897	LEAD, NEUROSTIMULATOR TEST KIT (IMPLANTABLE)	11/01/2019
C2626	INFUSION PUMP, NON-PROGRAMMABLE, TEMPORARY (IMPLANTABLE)	11/01/2019
E0783	INFUS PUMP SYST IMPLNT PROGRAMABLE (INCL COMPON)	11/01/2019
E0785	IMPLANT INTRASPINAL CATH W/FUS PUMP REPLAC	11/01/2019
E0786	IMPLNT PROGRAM INFUS PUMP REPLCMT	11/01/2019
J0881	INJECTION DARBEPOETIN ALFA 1 MICROGRAM NON-ESRD USE	07/01/20
J0882	INJECTION DARBEPOETIN ALFA 1 MICROGRAM FOR ESRD ON DIALYSIS	07/01/20
J0885	INJECTION EPOETIN ALFA FOR NON-ESRD USE 1000 UNITS	07/01/20
J0986	Reblozyl (luspatercept) Subcutaneous	05/01/20
J1442	Injection, filgrastim (G-CSF), excludes biosimilars, 1 microgram	07/01/20
J1823	Inebilizumab Intravenous (IV) Infusion	04/01/20
J2250	INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	06/01/21
J3032	Vyepti (eptinezumab) Intravenous (IV) Infusion	04/01/20
J7311	INJECTION FA INTRAVITREAL IMPL 0.01 MG	05/01/20
J7312	DEXAMETHASONE INTRA IMPLANT	05/01/20
J7330	AUTOL CULTURD CHONDROCYTES IMP	11/01/2019
J7351	Durysta (bimatoprost implant) Intracameral Implant	04/01/20
J9035	INJECTION BEVACIZUMAB 10 MG	07/01/20
J9173	Imfinzi (durvalumab) Intravenous (IV) Infusion	05/01/20
J9177	Padcev (efortumab vedotin-ejfv) Intravenous (IV) Infusion	04/01/20
J9317	Sacituzumab Govitecan Intravenous (IV) Infusion	04/01/20

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Procedure Code	Procedure Code Description	Effective Date of Prior Authorization Requirement
J9355	INJECTION TRASTUZUMAB EXCLUDES BIOSIMILAR 10 MG	01/01/21
J9355	INJECTION TRASTUZUMAB EXCLUDES BIOSIMILAR 10 MG	07/01/20
J9358	Enhertu (fam-trasuzumab deruxtecan-nxki) Intravenous (IV) Infusion	04/01/20
L8680	IMPLT NEUROSTIM ELCTR EACH	11/01/2019
L8681	PT PRGRM FOR IMPLT NEUROSTIM	11/01/2019
L8682	IMPLANTABLE NEUROSTIMULATOR RADIOFREQUENCY RECEIVER	11/01/2019
L8683	RADIOFREQUENCY TRANSMIT EXTERNAL USE W IMPLANT NEUROSTIM RADIOFREQ RCVR	11/01/2019
L8685	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR SINGLE ARRAY RECHARGEABLE	11/01/2019
L8686	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR SINGLE ARRAY NON-RECHARGE	11/01/2019
L8687	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR DUAL ARRAY RECHARGEABLE	11/01/2019
L8688	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR DUAL ARRAY NON-RECHARGE	11/01/2019
L8689	EXTERNAL RECHARG SYS INTERN	11/01/2019
L8695	EXTERNAL RECHARG SYS EXTERN	11/01/2019
Q5115	Rituximab-abbs injection, for intravenous use	07/01/20
Q5119	Injection, rituximab-pvvr, biosimilar, (ruxience), 10 mg	07/01/20
S2112	ARTHROSCOPY KNEE	11/01/2019
S2118	TOTAL HIP RESURFACING	11/01/2019
S2348	DECOMP PERQ INTERVERT DISC RF ENERGY 1/MX LUMB	11/01/2019
S2350	DISK ANT W/DECOMPRES SPINAL CORD/1	11/01/2019
S2351	DISK ANT DECOMPRES SPINE CORD EA/ADD	11/01/2019