



## Changes to Authorization Guidelines for Selected Services

Effective **November 1, 2022**, Healthfirst will make changes to its authorization guidelines for selected services. The service codes that newly require a prior authorization include pathology and laboratory services and non-oral and injectable chemotherapy drugs.

These changes are part of Healthfirst's ongoing responsibility to evaluate our medical policies compared to the latest scientific evidence and specialty society guidance.

Meanwhile, prior-authorization requirements may be added/updated/removed for certain codes, and post-service determinations may still be applicable based on criteria published in medical policies or local/national coverage determination criteria.

For a new Provider Portal account, please go to [hfproviderportal.org](https://hfproviderportal.org). You will find a user guide to assist you with the registration process.

**Note:** Any authorizations on file at this time will remain effective until the next re-authorization is required. As of **November 1, 2022**, authorization requests will be reviewed under the new authorization guidelines.

If you have any questions, contact your Network Account Manager, or call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am–5:30pm.

**See list below for current prior-authorization requirements for all services, including delegated vendors.** See the Procedure Code Lookup Tool which can be found within

Code	Code Description
0306U	Oncology (minimal residual disease [MRD]), next-generation targeted sequencing analysis, cell-free DNA, initial (baseline) assessment to determine a patient-specific panel for future comparisons to evaluate for MRD
0307U	Oncology (minimal residual disease [MRD]), next-generation targeted sequencing analysis of a patient-specific panel, cell-free DNA, subsequent assessment with comparison to previously analyzed patient specimens to evaluate for MRD

# Provider Alert

<b>0313U</b>	Oncology (pancreas), DNA and mRNA next-generation sequencing analysis of 74 genes and analysis of CEA (CEACAM5) gene expression, pancreatic cyst fluid, algorithm reported as a categorical result (i.e., negative, low probability of neoplasia, or positive, high probability of neoplasia)
<b>0314U</b>	Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 35 genes (32 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (i.e., benign, intermediate, malignant)
<b>0315U</b>	Oncology (cutaneous squamous cell carcinoma), mRNA gene expression profiling by RT-PCR of 40 genes (34 content and 6 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical risk result (i.e., Class 1, Class 2A, Class 2B)
<b>0317U</b>	Oncology (lung cancer), four-probe FISH (3q29, 3p22.1, 10q22.3, 10cen) assay, whole blood, predictive algorithm-generated evaluation reported as decreased or increased risk for lung cancer
<b>0318U</b>	Pediatrics (congenital epigenetic disorders), whole genome methylation analysis by microarray for 50 or more genes, blood
<b>0319U</b>	Nephrology (renal transplant), RNA expression by select transcriptome sequencing, using pretransplant peripheral blood, algorithm reported as a risk score for early acute rejection
<b>0320U</b>	Nephrology (renal transplant), RNA expression by select transcriptome sequencing, using posttransplant peripheral blood, algorithm reported as a risk score for acute cellular rejection
<b>C9093</b>	Injection, ranibizumab, via sustained release intravitreal implant (Susvimo), 0.1 mg
<b>J1427</b>	Injection, viltolarsen, 10 mg
<b>J9036</b>	Injection, bendamustine hydrochloride, (Belrapzo/ bendamustine), 1 mg
<b>Q5124</b>	Injection, rituximab-arrx, biosimilar, (Riabni), 10 mg

# Provider Alert

<b>0308U</b>	Cardiology (coronary artery disease [CAD]), analysis of 3 proteins (high sensitivity [hs] troponin, adiponectin, and kidney injury molecule-1 [KIM-1]), plasma, algorithm reported as a risk score for obstructive CAD
<b>0309U</b>	Cardiology (cardiovascular disease), analysis of 4 proteins (NT-proBNP, osteopontin, tissue inhibitor of metalloproteinase-1 [TIMP-1], and kidney injury molecule-1 [KIM-1]), plasma, algorithm reported as a risk score for major adverse cardiac event
<b>0310U</b>	Pediatrics (vasculitis, Kawasaki disease [KD]), analysis of 3 biomarkers (NT-proBNP, C-reactive protein, and T-uptake), plasma, algorithm reported as a risk score for KD
<b>0311U</b>	Infectious disease (bacterial), quantitative antimicrobial susceptibility reported as phenotypic minimum inhibitory concentration (MIC)-based antimicrobial susceptibility for each organism identified
<b>0312U</b>	Autoimmune diseases (e.g., systemic lupus erythematosus [SLE]), analysis of 8 IgG autoantibodies and 2 cell-bound complement activation products using enzyme-linked immunosorbent immunoassay (ELISA), flow cytometry and indirect immunofluorescence, serum, or plasma and whole blood, individual components reported along with an algorithmic SLE-likelihood assessment
<b>0316U</b>	<i>Borrelia burgdorferi</i> (Lyme disease), OspA protein evaluation, urine
<b>0321U</b>	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 20 bacterial and fungal organisms and identification of 16 associated antibiotic-resistance genes, multiplex amplified probe technique
<b>0322U</b>	Neurology (autism spectrum disorder [ASD]), quantitative measurements of 14 acyl carnitines and microbiome-derived metabolites, liquid chromatography with tandem mass spectrometry (LC-MS/MS), plasma, results reported as negative or positive for risk of metabolic subtypes associated with ASD