



Authorization Requirement Update for Vision Services

Effective **August 1, 2022**, Healthfirst no longer requires authorization for the selected vision services listed below. These changes are part of Healthfirst's ongoing responsibility to provide accurate, up-to-date information to our providers, quickly correct any errors we are aware of, and 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.

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

For the most complete, up-to-date authorization information, please use our Authorization Code Lookup Tool at [HFProviders.com](https://www.healthfirst.com/HFProviders.com).

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

CPT [®] CODE	CPT [®] CODE DESCRIPTION
66170	Fistulization for glaucoma
66172	
66179	Aqueous shunt
66180	
66840	Removal of lens material
66850	
66852	
66930	
66940	

Provider Alert

CPT® CODE	CPT® CODE DESCRIPTION
66989	Extracapsular cataract removal
66991	
67208	Cryotherapy
67916	Repair ectropion
67917	
67923	Repair entropion
67924	
68761	Punctal Plugs
0253T	Glaucoma drainage devices
0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without extraocular reservoir, and without concomitant cataract removal, one or more.
66184	Revision of aqueous shunt w/o graft
66185	Revision of aqueous shunt
66761	Iridotomy/iridectomy by laser
67028	Vitreous procedures on the posterior segment of the eye
67210	Photocoagulation
67218	Radiation implant
67220	Photocoagulation
67221	Photodynamic therapy
67228	Pan-retinal photocoagulation
67914-67917	Repair ectropion
67921-67924	Repair entropion
J2503	Injection, pegaptanib sodium, 0.3 mg (Macugen)
J7312	Injection, dexamethasone, intravitreal implant, 0.1 mg (Ozurdex)
J7313	Illuvien/fluocinolone acetonide - 19 units
J7314	Injection, fluocinolone acetonide, intravitreal implant, 0.18 mg (Yutiq)

Provider Alert

CPT® CODE	CPT® CODE DESCRIPTION
66150	Fistulization for glaucoma
66155	
66160	
66175	Transluminal dilation of aqueous outflow canal
66183	Aqueous shunt
66920	Removal of lens material
66982	Cataract surgery
66983	
66984	
66985	
66986	
67915	Repair ectropion
67922	Repair entropion
0449T	Glaucoma drainage devices
0450T	
0474T	
66821	Discussion of secondary membranous cataract
67225	Photodynamic therapy