

Date Updated: February 12, 2025
Applicable for New York

FEP Standard and Basic Options Prior Approval List

For enrollment codes (located on the member's ID card): 104, 105, 106, 111, 112, 113,33A, 33B, 33C, 33D. 33E, 33F

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Category: Surgical Services

Topic: Surgery for Morbid Obesity

Note: Procedure Codes marked with an asterisk (*) are for services incurred on or after January 1, 2024.

Benefits may be available only for the following procedures when all benefit requirements are met: Roux-en-Y, Gastric Bypass, Laparoscopic Adjustable Gastric Banding, Sleeve Gastrectomy, and Biliopancreatic Bypass with Duodenal Switch.

Procedure Codes 0813T, 43290*, 43291*, 43644, 43645, 43770, 43771, 43773, 43775, 43842*, 43843*, 43845, 43846, 43847, 43848, 43886, 43888, C9784*, C9785*

Topic: Gender Reassignment Surgery

The prior approval request must include all surgical procedures anticipated/planned to change the member's biological gender, where the procedure(s) will be performed, and the estimated procedure date(s).

Note: For services incurred on or after January 1, 2024, Procedure Codes marked with an asterisk (*) are covered for Male-to-Female Gender Affirming Surgery Services.

Note: • For services incurred on or after January 1, 2024, Procedure Codes marked with asterisks (**) are only covered for Male-to-Female transitions when associated with Gender Affirming Breast Augmentation Surgical Services.

Specific: For Female-to-Male Gender Reassignment Surgery

Procedure Codes 11920, 11921, 11922, 15877, 19303, 19318, 19350, 53430, 54400, 54401, 54405, 54660, 55175, 55180, 55899, 55980, 56625, 57110, 58150, 58180, 58260, 58262, 58275, 58290, 58291, 58541, 58542, 58543, 58544, 58550, 58552, 58553, 58554, 58570, 58571, 58572, 58573, C1813, C2622

Specific: For Male-to-Female Gender Reassignment Surgery

Procedure Codes *11920, *11921, *11922, **11970, **15771, **15772, *19325, *19350, *19357, 53410, 54125, 54520, 54690, 55970, 56805, 57291, 57292, 57335, 58999, *C1789, *L8600

Specific: Breast Repair/Reconstruction

Procedure Codes -*19316, 19318, 19324, *19325, 19328, *19340, *19342, *19357, 19361, 19364, 19366, 19367, 19368, 19369, 19370, 19371, *19380, *19396

Specific: Gender Affirming Facial Surgery

Procedure Codes - 11950, 11951, 11952, 11954, 15769, 15773, 15774, 15775, 15776, 15780, 15781, 15782, 15783, 15788, 15789, 15792, 15793, 15820, 15821, 15822, 15823, 15824, 15825, 15826, 15828, 15829, 15876, 17380, 21025, 21120, 21121, 21122, 21123, 21125, 21127, 21137, 21138, 21139, 21141, 21142, 21143, 21145, 21146, 21147, 21150, 21151, 21154, 21155, 21159, 21160, 21172, 21175, 21179, 21180, 21188, 21193, 21194, 21195, 21196, 21208, 21209, 21210, 21230, 21235, 21244, 21245, 21246, 21248, 21249, 21270, 21899, 30400, 30410, 30420, 30430, 30435, 30450, 31599, 40799, 67900, 69300

Topic: Oral Maxillofacial Surgeries

Surgery on the Jaw, Cheeks, Lips, Tongue, Floor and Roof of The Mouth, and Related Procedures

Codes marked with an asterisk (*) when billed with a Gender Dysphoria diagnosis code billed after January 1, 2024, do not require review.

Procedure Codes 21010, 21050, 21060, 21070, 21073, 21193*, 21194*, 21195*, 21196*, 21198, 21199, 21206, 21210*, 21215*, 21240, 21242, 21243, 21244*, 21245*, 21246*, 21247, 21248*, 21249*, 21440, 21445, 21452, 21454, 21461, 21462, 21465, 21470, 21480, 21485, 21490, 21497, 29804, 40510, 40520, 40525, 40527, 40650, 40652, 40654, 40800, 40801, 40804, 40805, 40830, 40831, 41000, 41005, 41006, 41007, 41008, 41009, 41015, 41016, 41017, 41018, 41250, 41251, 41252, 42180, 42182 or 40530

Topic: Spinal Surgery

Procedure Codes 22836, 22837, 27278

Category: Transplants

Topic: Blood or Marrow Stem Cell Transplants

Note: This also includes clinical trials for blood or marrow stem cell transplants

Note: Procedure Codes marked with an asterisk (*) are donor procedure codes

Procedure Codes 38240, 38241, S2142, S2150, 38205*, 38206*, 38207*, 38230*, 38232*, S2140*

Topic: Artificial Heart Transplant

Procedure Codes 33927, 33928, 33929

Topic: Organ/Tissue Transplants

Procedure Codes 32851, 32852, 32853, 32854, 33935, 33945, 44135, 44136, 47135, 48160, 48554, 0584T, 0585T, 0586T, G0341, G0342, G0343, S2053, S2054, S2060, S2065, S2152

Donor Procedure Codes 0494T, 0495T, 0496T, 0894T, 0895T, 0896T, 32850, 33930, 33940, 44132, 44133, 47133, 47140, 47141, 47142, 48550, S2055, S2061

Backbench Procedure Codes 32855, 32856, 33933, 33944, 44715, 44720, 44721, 47143, 47144, 47145, 47146, 47147, 48551, 48552

Topic: Kidney Transplants

Procedure Codes 50300, 50320, 50323, 50325, 50327, 50328, 50329, 50340, 50360, 50365, 50380, 50547
(Donor)

Topic: Travel Benefits

Procedure Codes S9992, S9994

Category: Genetic Testing

Topic: BRCA Genetic Testing and Testing for Large Genomic Rearrangements in the BRCA1 and BRCA2 Genes

Procedure Codes 0138U, 81162, 81163, 81164, 81165, 81166, 81167, 81212, 81215, 81216, 81217

Topic: Genetic Testing for the Diagnosis and/or Management of an Existing Medial Condition

Procedure Codes G0452, G9143, S3800, S3840, S3841, S3842, S3844, S3845, S3846, S3849, S3850, S3852, S3853, S3854, S3861, S3865, S3866, S3870, 0001M, 0001U, 0004M, 0005U, 0006M, 0007M, 0008U, 0009M, 0009U, 0010U, 0011M, 0012M, 0013M, 0016M, 0017M, 0016U, 0017U, 0018U, 0019U, 0022U, 0023U, 0026U, 0027U, 0029U, 0030U, 0031U, 0032U, 0033U, 0034U, 0036U, 0037U, 0039U, 0040U, 0055U, 0069U, 0070U, 0071U, 0072U, 0073U, 0074U, 0075U, 0076U, 0078U, 0079U, 0081U, 0087U, 0088U, 0089U, 0090U, 0091U, 0094U, 0101U, 0102U, 0103U, 0111U, 0112U, 0113U, 0114U, 0118U, 0120U, 0129U, 0130U, 0131U, 0132U, 0133U, 0134U, 0135U, 0136U, 0137U, 0153U, 0154U, 0155U, 0156U, 0157U, 0158U, 0159U, 0160U, 0161U, 0162U, 0169U, 0170U, 0171U, 0172U, 0173U, 0175U, 0177U, 0179U, 0180U, 0181U, 0182U, 0183U, 0184U, 0185U, 0186U, 0187U, 0188U, 0189U, 0190U, 0191U, 0192U, 0193U, 0194U, 0195U, 0196U, 0197U, 0198U, 0199U, 0200U, 0201U, 0203U, 0204U, 0205U, 0209U, 0211U, 0212U, 0213U, 0214U, 0215U, 0216U, 0217U, 0218U, 0221U, 0229U, 0230U, 0231U, 0232U, 0233U, 0234U, 0235U, 0236U, 0237U, 0238U, 0239U, 0242U, 0244U, 0245U, 0249U, 0250U, 0252U, 0258U, 0260U, 0262U, 0264U, 0265U, 0266U, 0267U, 0268U, 0269U, 0270U, 0271U, 0272U, 0273U, 0274U, 0276U, 0277U, 0278U, 0282U, 0285U, 0286U, 0287U, 0288U, 0289U, 0291U, 0292U, 0293U, 0294U, 0295U, 0296U, 0297U, 0298U, 0299U, 0300U, 0306U, 0307U, 0313U, 0314U, 0315U, 0317U, 0318U, 0319U, 0320U, 0326U, 0327U, 0329U, 0331U, 0332U, 0333U, 0334U, 0335U, 0336U, 0339U, 0340U, 0341U, 0343U, 0345U, 0347U, 0348U, 0349U, 0350U, 0356U, 0362U, 0363U, 0364U, 0368U, 0378U, 0379U, 0380U, 0388U, 0391U, 0392U, 0395U, 0396U, 0398U, 0400U, 0401U, 0403U, 0405U, 0409U, 0410U, 0411U, 0413U, 0414U, 0416U, 0417U, 0419U, 0420U, 0421U, 0422U, 0423U, 0424U, 0425U, 0426U, 0428U, 0433U, 0434U, 04337U, 0438U, 0439U, 0440U, 0443U, 0444U, 0445U, 0448U, 0449U, 0452U, 0453U, 0454U, 0456U, 0460U, 0463U, 0464U, 0465U, 0466U, 0467U, 0469U, 0470U, 0471U, 0473U, 0474U, 0475U, 0488U, 0489U, 0495U, 0496U, 0498U, 0499U, 0500U, 0501U, 0506U, 0507U, 81120, 81121, 81161, 81168, 81170, 81171, 81172, 81173, 81174, 81175, 81176, 81177, 81178, 81179, 81180, 81181, 81182, 81183, 81184, 81185, 81186, 81187, 81188, 81189, 81190, 81191, 81192, 81193, 81194, 81200, 81201, 81202, 81203, 81204, 81205, 81206, 81207, 81208, 81209, 81210, 81218, 81219, 81220, 81221, 81222, 81223, 81224, 81225, 81226, 81227, 81228, 81229, 81230, 81231, 81232, 81233, 81234, 81235, 81236, 81237, 81238, 81239, 81240, 81241, 81242, 81243, 81244, 81245, 81246, 81247, 81248, 81249, 81250, 81251, 81252, 81253, 81254, 81255, 81257, 81258, 81259, 81260, 81261, 81262, 81263, 81264, 81269, 81270, 81271, 81272, 81273, 81274, 81275, 81276, 81277, 81278, 81279, 81283, 81284, 81285, 81286, 81287, 81288, 81289, 81290, 81291, 81292, 81293, 81294, 81295, 81296, 81297, 81298, 81299, 81300, 81301, 81302, 81303, 81304, 81305, 81306, 81307, 81308, 81309, 81310, 81311, 81312, 81313, 81314, 81315, 81316, 81317, 81318, 81319, 81320, 81321, 81322, 81323, 81324, 81325, 81326, 81327, 81328, 81329, 81330, 81331, 81332, 81333, 81334, 81335, 81336, 81337, 81338, 81339, 81340, 81341, 81342, 81343, 81344, 81345, 81346, 81347, 81348, 81349, 81350, 81351, 81352, 81353, 81355, 81357, 81360, 81361, 81362, 81363, 81364, 81400, 81401, 81402, 81403, 81404, 81405, 81406, 81407, 81408, 81410, 81411, 81412, 81413, 81414, 81415, 81416, 81417, 81418, 81419, 81422, 81425, 81426, 81427, 81430, 81431, 81432, 81433, 81434, 81435, 81436, 81437, 81438, 81439, 81440, 81441, 81443, 81445, 81448, 81449, 81450, 81451, 81455, 81456, 81457, 81458, 81459, 81460, 81462, 81463, 81464, 81465, 81470, 81471, 81479, 81493, 81504, 81518, 81519, 81520, 81521, 81522, 81523, 81525, 81528, 81529, 81540, 81541, 81542, 81546,

81551, 81552, 81554, 81595, 81599, 88245, 88248, 88249, 88261, 88262, 88263, 88264, 88271, 88272, 88273, 88274, 88275, 88280, 88283, 88285, 88289, 88291

Category: Other Services Requiring Prior Approval

Topic: Hearing Aids Require Prior Approval Even If Other Insurance is Primary

V5030, V5040, V5050, V5060, V5070, V5080, V5100, V5120, V5130, V5140, V5150, V5171, V5172, V5181, V5190, V5211, V5212, V5213, V5214, V5215, V5221, V5230, V5242, V5243, V5244, V5245, V5246, V5247, V5248, V5249, V5250, V5251, V5252, V5253, V5254, V5255, V5256, V5257, V5258, V5259, V5260, V5261, V5264, V5265, V5298, V5299

Topic: Air Ambulance Transport (non-emergent)

Procedure Codes A0430, A0431, A0435, A0436

Topic: Gene Therapy and Cellular Immunotherapy (e.g., CAR-T and T-Cell Receptor Therapy)

Procedure Codes J1411, J1413, J3393, J3394, J3398, J3399, J3401, J9029, J9380, Q2041, Q2042, Q2053, Q2054, Q2055, Q2056, S2107, 0537T, 0538T, 0539T or 0540T

Topic: Applied Behavior Analysis (ABA)

Procedure Codes 0362T, 0373T, 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158

Topic: Outpatient Sleep Studies Performed Outside the Home

Procedure Codes 95782, 95783, 95803, 95805, 95807, 95808, 95810, 95811

Topic: Hospice Care

Home hospice, continuous home hospice, or inpatient hospice care services

Professional Claims

Procedure Codes: S0255, S0271 or S9126.

Facility Claims

Revenue Codes: 0651, 0652, 0115, 0125, 0135, 0145, 0155, 0235, 0655, 0656 or 0658

Topic: Sperm or Egg Storage

Procedure codes 89343, 89344, 89346

Topic: In Vitro Fertilization Procedures (Standard Option Only)

Note: In Vitro Fertilization (IVF) services are not covered for Basic Option and codes marked with an asterisk (*) are not covered for Basic Option

*58323, *58970, 58974, 58976, *76948, 89250, 89251, 89253, *89254, 89255, *89257, 89258, *89259, *89260, *89261, *89264, 89268, 89272, 89280, 89281, 89290, 89291, *89335, *89337, 89342, *89343, *89344, *89346, 89352, *89353, *89354, 89356, S4011, S4013, S4014, S4015, S4016, S4017, S4018, S4020, S4021, S4022, S4027, *S4028, S4030, *S4031, S4037 or S4040

Topic: Inpatient Hospital Admission, Inpatient Residential Treatment Center (RTC) Admission, or Skilled Nursing Facility (SNF) Admission

If pre-certification is not obtained prior to admission, inpatient benefits (i.e., room and board) are not available for inpatient care at the residential treatment center, or, when Medicare Part A is not the primary payor, at a Skilled Nursing Facility. We will only consider payment for medical services and supplies that are otherwise payable on an outpatient basis.

Topic: Proton Beam Therapy

Note: Prior approval not required for ages 21 and younger
Procedure codes 77520, 77522, 77523, 77525, C9795

Topic: Stereotactic Radiosurgery

Procedure codes 77373, C9795

Topic: Artificial Insemination

Procedure code is 58321, 58322, 58323, 89250, 89251, 89253, 89254, 89255, 89257, 89258, 89259, 89260, 89261, 89264, 89268, 89272, 89280, 89281, 89290, 89291, 89335, 89342, *89343, 89344, *89346, 89352, 89353, 89354, 89356

Category: Drug Codes

J0725, J1675, J1950, J1951, J1952, J2675, J3315, J3316, J9217, J9218, S0122, S0126, S0128, S0132

NDC Codes for Artificial Insemination

*Highlighted in grey are new codes

00023615004, 00023615005, 00023615108, 00023615109, 00025016608, 00025016610, 00032170801, 00032171101, 00033226040, 00052031301, 00052031510, 00052031601, 00052032601, 00093004103, 00093004165, 00093535301, 00093535401, 00143972501, 00182080463, 00182080563, 00182116563, 00223776010, 00223777010, 00223777510, 00304133456, 00364658454, 00364658554, 00364658654, 00364670654, 00395650056, 00395650059, 00395650062, 00395806319, 00395806343, 00395806356, 00395806360, 00395806362, 00395810543, 00395810556, 00395810562, 00395816743, 00395816756, 00395816762, 00395816843, 00395816856, 00395816862, 00402012510, 00402012511, 00402012610, 00402012611, 00418581142, 00418582142, 00436021170, 00469150130, 00469150230, 00469151130, 00469151230, 00469153230, 00517075001, 00527012255, 00527015355, 00536040070, 00536050070, 00536512570, 00536513070, 00536513570, 00537244970, 00537245270, 00537245670, 00537245770, 00548500100, 00588509370, 00591078130, 00591312879, 00591396401, 00591396501, 00713088509, 00713088530, 00719309987, 00719310087, 00779753465, 00802806343, 00802806362, 00814172340, 00814172440, 00814172640, 00839556330, 00839556430, 00904118910, 10888713502, 10888713602, 16714015701, 16714015801, 17478076610, 17478076710, 17478079312, 33261053310, 33261053330, 33261096201, 35356035805, 35356035810, 37803064710, 37803064717, 37803164705, 37803164707, 37803164708, 37803164709, 38779004301, 38779004303, 38779004304, 38779004305, 38779004306, 38779004307, 38779004308, 38779004309, 38779005701,

38779005703, 38779005704, 38779005705, 38779005708, 38779005709, 38779031005, 38779031007,
38779031009, 38779039003, 38779039004, 38779039005, 38779039006, 38779039009, 38779230902,
38779230904, 38779230905, 38779230907, 38779230908, 38779230909, 38779232702, 38779267301,
38779267302, 38779267306, 38779316905, 38779316908, 38779316909, 38779324708, 42291068801,
42291068901, 42291069001, 42291069101, 43063025005, 43063064930, 43598034901,
43598035001, 44087025001, 44087115001, 44087111501, 44087111601, 44087111701, 44087122501,
44087900501, 44087900506, 44087903001, 44087907001, 46144010001, 46144012801, 46144014405,
46144010101, 46144012601, 46144012605, 47202400701, 47649019005, 47679075830,
47679077130, 49072012710, 49452214601, 49452214602, 49452214603, 49452214604, 49452214605,
49452606001, 49452606002, 49452606003, 49452606004, 49452606005, 49452606006, 49452606101,
49452606102, 49452606103, 49452606104, 49452606105, 49452606106, 49452608001, 49452608002,
49452608003, 49452608004, 49452608005, 49452608006, 49452608101, 49452608102, 49452608103,
49452608104, 49452608105, 49884070154, 49884070155, 50090067801, 50090252700, 50090252701,
50090324000, 50090465600, 50090465601, 50090592800, 50090592801, 50090604900, 50488101200,
50488101201, 51309040910, 51309041010, 51309041110, 51309041210, 51309041310, 51552000601,
51552000603, 51552000604, 51552000605, 51552000606, 51552000607, 51552073803, 51552073804,
51552073805, 51552073806, 51552073807, 51552082903, 51552082904, 51552082905, 51552082906,
51552082907, 51552106603, 51552106604, 51552106605, 51552106606, 51552106607, 51552124805,
51552124807, 51552127902, 51552127903, 51552127904, 51552127905, 51552127906, 51552127907,
51552127909, 51552149202, 51552149203, 51927104600, 51927180800, 51927353000, 51927314700,
51927356000, 51927358800, 51927499400, 51927512400, 51927901700, 52349010110, 52372082201,
52372082202, 52372082203, 52372082204, 52372082205, 52372082206, 52372082301,
52372082302, 52372909001, 52372909005, 52372959501, 52372959502, 52372959503, 52372959504,
52372959505, 52372959506, 52372959507, 52372959508, 52372959510, 52372959550, 52544022524,
52544025524, 52544025554, 52544025612, 52544025654, 53638012510, 53638012511, 53638012610,
53638012611, 54274051962, 54274053262, 54348095005, 54348095010, 54348095015,
54348095020, 54569138800, 54569237400, 54569266000, 54569494301, 54569660800, 54569528100,
54868305900, 54868305901, 54868412100, 54868423000, 54868423001, 54868423002, 54868425000,
54868425001, 55150030610, 55566101001, 55566150101, 55566150201, 55566650001, 55566650002,
55566650003, 55566750102, 55812019801, 55812019802, 58597820101, 58597820102, 58597820104,
58597820106, 58597820108, 58597830201, 58597830202, 58597830203, 58597847101, 58597847103,
58597847104, 58597847106, 58597847107, 58597847108, 58597847109, 58597847203, 58597847204,
58597847206, 58597847207, 58597847208, 58597847209, 58597862204, 58597862206, 58597862207,
58597862208, 58597862209, 59651015201, 59651015301, 60429028101, 60429028201, 60429086801,
60429086901, 60592060701, 60592060705, 60592060710, 60592060711, 60592060725, 61919037530,
62991112301, 62991112302, 62991112303, 62991112304, 62991112308, 62991112309, 62991112401,
62991112402, 62991112403, 62991112404, 62991112405, 62991112407, 62991112408, 62991218401,
62991218402, 62991218403, 62991218404, 62991218405, 62991270201, 62991270202, 62991270203,
62991270204, 62991271303, 62991271304, 62991271401, 62991271403, 62991278401, 62991278402,
62991278403, 62991278404, 62991313901, 62991313902, 62991313903, 63275989905, 63275989908,
63275989909, 63275992105, 63275992108, 63275992109, 63275996402, 63275996404, 63275996405,
63275996409, 63275998105, 63275998108, 63275998109, 63307041011, 63307041015, 63307041025,

63307041027, 63307041049, 63323002510, 63323003011, 63323026110, 63629216501, 63629530201, 63629530202, 63629530206, 63629853001, 65162080710, 65162080810, 68788719903, 68788719906, 68788719909, 68981000501, 68981000502, 68981000503, 68981000504, 68981000505, 68981002801, 68981002802, 68981002803, 69387010101, 69387010201, 69452014820, 69452014920, 69452023320, 69452023420, 69543037210, 69543037230, 69543037310, 69543037330, 69543037410, 69543037510, 70175021301, 70457982701, 70457990401, 70457990402, 70457990403, 70457990404, 70457990405, 70457990406, 70457990407, 70700016201, 70700016301, 70700028622, 71052033801, 71052063105, 71092997401, 71092997402, 71092997403, 71092997404, 71092997405, 71092997406, 71092997407, 71092997408, 71092997409, 71205029330, 71205066930, 71205090211, 71205090230, 71205090255, 71205090260, 71205090272, 71205090290, 71205090311, 71205090330, 71205090355, 71205090360, 71205090372, 71205090390, 71288055480, 71335071301, 72189020490, 72189021790, 72189034790, 72627230001, 72627230101, 72627230201, 72989037230, 72989037330, 75839003701, 75839003705, 78206013801, 82393010107, 82393010108, 82393010110, 82393010111, 82393010207, 82393010208, 82393010210, 82393010211, 82393010217

Topic: High-Cost Drugs including NOC codes

C9161, C9257, J0222, J0223, J0224, J0177, J0178, J0179, J0224, J0225, J0885, J1300, J1303, J1442, J1447, J1449, J1602, J1745, J1748, J2327, J2350, J2506, J2777, J2778, J3357, J3358, J9035, J9311, J9312, J9332, J9334, J9355, J9356, Q5101, Q5103, Q5104, Q5106, Q5107, Q5108, Q5109, Q5110, Q5111, Q5112, Q5113, Q5114, Q5115, Q5116, Q5117, Q5118, Q5119, Q5120, Q5121, Q5122, Q5123, Q5124, Q5125, Q5126, Q5127, Q5128, Q5129, Q5130, Q5137, Q5138

The following NOC codes when billed with NDC 72126000701, 72126000702 billed with C9399, J3490, J3590, J3591, J7699, J7799, J8498, J8499, J8597, J8999, J9999 or Q1081, S5000, S5001

NDC Codes 72126000701, 72126000702, 71336100001, 71336100101, 71336100201, 25682000101 or 73475304105

Topic: Once-In-A-Lifetime Self-Administered Injectable Drugs

The following drugs are only payable once-in-a-lifetime under medical benefits. After that they must be approved and processed by Caremark. covermymeds.com/epa/caremark/

Specific: Auto-immune Drugs

J0135, J1438, J2793, J3357, Q5131

Specific: Multiple Sclerosis Drugs

J1595, J1830, J1826, Q3027, Q3028

Specific: Growth Hormones

J2170, J2941

Specific: Other Drugs

J0364, J1324, J1744, J3110, J9216

Topic: Prescription Drugs and Supplies, Including Medical Foods Administered Orally

To request prior approval or obtain a list of drugs and supplies that require prior approval, call CVS Caremark (FEP’s pharmacy program administrator) at 877-727-3784 from 7:00AM to 9:00PM. Providers may submit prior approval drug requests securely online. To register for electronic prior authorization (EPA), visit covermy meds.com/epa/caremark/.

Category: When FEP is Not the Primary Payor

Topic: When Medicare is the Primary Payor

The table below provides the special situations regarding prior approval and precertification when Medicare is the primary payor.

Service Type	Primary Payor	Precertification	Prior Approval
Inpatient Hospital Admission	Medicare Part A	No	Not Applicable
Medicare hospital benefits exhausted and the Medicare lifetime reserve days are not used	Medicare Part A benefits not provided	Yes	Not Applicable
Gender reassignment surgery when performed during an inpatient admission	Medicare Part A benefits not provided	Yes	Yes
Gender reassignment surgery in an outpatient hospital or Ambulatory Surgical Center (ASC)	Medicare Part B	Not Applicable	Yes
Morbid obesity surgery when performed during an inpatient admission	Medicare Part A	No	Yes
Morbid obesity surgery in an outpatient hospital or Ambulatory Surgical Center (ASC)	Medicare Part B	Not Applicable	Yes
Residential Treatment Center - Outpatient Care	Medicare Part B	Not Applicable	Yes
Applied Behavior Analysis- Inpatient/Outpatient	Medicare Part A Medicare Part B	Yes	Yes
Genetic Testing	Medicare Part B	Not Applicable	Yes
BRCA Testing	Medicare Part B	Not Applicable	Yes
High-Cost Drug	Medicare Part B	Not Applicable	No

Sperm or Egg Storage	Medicare A and B	Not Applicable	Yes
Invitro Fertilization	Medicare A/B Standard Option Only	Not Applicable	Yes
Artificial Insemination Drugs	Medicare A/B Standard Option Only	Not Applicable	Yes
Hearing Aid	Medicare Part A/B	Not Applicable	Yes

Topic: When Another Healthcare Insurance is the Primary Payor

The table below provides the special situations regarding prior approval and precertification when another healthcare is the primary payor.

Service Type	Primary Payor	Precertification	Prior Approval
Inpatient Hospital Admission	Other Healthcare Insurance	No	Not Applicable
Gender reassignment surgery when performed during an inpatient admission	Other Healthcare Insurance	Yes	Yes
Gender reassignment surgery in an outpatient hospital or Ambulatory Surgical Center (ASC)	Other Healthcare Insurance	Not Applicable	Yes
Morbid obesity surgery when performed during an inpatient admission	Other Healthcare Insurance	No	Yes
Morbid obesity surgery in an outpatient hospital or Ambulatory Surgical Center (ASC)	Other Healthcare Insurance	Not Applicable	Yes
Residential Treatment Center - Outpatient Care	Other Healthcare Insurance	Not Applicable	Yes
Applied Behavior Analysis- Inpatient/Outpatient	Other Healthcare Insurance	Yes	Yes

Genetic Testing	Other Healthcare Insurance	Not Applicable	Yes
BRCA Testing	Other Healthcare Insurance	Not Applicable	Yes
High-Cost Drug	Other Healthcare Insurance	Not Applicable	No
Sperm or Egg Storage	Other Healthcare Insurance	Not Applicable	Yes
Invitro Fertilization	Other Healthcare Insurance	Not Applicable	Yes
Artificial Insemination Drugs	Other Healthcare Insurance	Not Applicable	Yes
Hearing Aid	Other Healthcare Insurance	Not Applicable	Yes

. Summary of Changes

Version	Intake Ref #	Date	Affected Section(s)	Summary of Revisions Made	Rationale/Approver
1.0	KM-010924426423	01/11/2024	All	Original Document Created	HPC KM Standard Process/Approver: Jolie Gendel, Lisa Dunlap
2.0	NA	01/11/2024	All	Doc Tagging: Updated Title, Doc Name, and Doc ID fields on Compass	Other: Compass Migration
3.0	KM-012624365879	02/05/2024	All	Updates throughout document	Process Improvement/Update
4.0	KM-050324613888	05/06/2024	Compass	Updated Status to Approved	Update Compass Fields
5.0	KM-050324613888	05/07/2024	All	Code Updates	Process Improvement/Updates/Approver: Jolie Gendel
6.0	KM-060424604641	06/06/2024	All	Code Updates	Process Improvement/Updates/Approver: Jolie Gendel
7.0	KM-062824656168	07/01/2024	All	Code Updates	Process Improvement/Updates/Approver: Jolie Gendel
8.0	KM-123024646203	01/02/2025	All	Code Updates and file name update	Process Improvement/Updates/Approver: Jolie Gendel

