

## Medical Overview by Prior Authorization Approval or Denial 2nd Quarter 2021

LOB	SPECIALTY	PROCEDURE	DIAGNOSIS	DETERMINATION	REASON FOR DENIAL
НА	Dentistry	00170 (approved), 42899 (denied)	Dental caries	Approved	
НА	Hospital	00170 (approved), 42899, D9999 (denied)	dental caries	Approved	
НА	Pediatric Dentistry	00170, 41899	Extensive dental work needed - unable to coperate	Approved	
НА	Dentistry	41899	Dental caries	Denied	Benefit Certificate
НА	DME Provider	E1007, K0108 (Elevating Seat Module-12in Scissor Lift), E2361 x2 units, E2300 x1 unit	Quadriplegia	Approved	
НА	Infusion Therapy	B4152, B4155, B9002, B4035, E0776	Dysphagia, pharyngeal phase	Approved	
НА	Infusion Therapy	B4160, B9002, B4035, B9998, B4088	Cleft Palate	Approved	
НА	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Plastic and Reconstructive Surgery	19318 (bilateral)	Breast Hypertrophy	Approved	
НА	Plastic and Reconstructive Surgery	19318 (bilateral)	Breast Hypertrophy	Approved	
НА	Plastic and Reconstructive Surgery	19318 and 15830	Breast hypertrophy and panniculitis	Approved	
НА	Rheumatology	J1300 (Soliris)	Osteoporosis and compression fractures	Approved	
НА	Rheumatology	J3241 (Tepezza)	Thyrotoxicosis with diffuse goiter	Approved	
НА	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Hospital	00170,	Dental caries	Approved	
НА	Dentistry	00170,	Dental caries	Approved	
НА	General Surgery	43775	Morbid Obesity	Denied	Benefit Certificate
НА	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Dentistry	00170,	Caries	Approved	
НА	Infusion Therapy	B4035, B9002, B9998, B4155	Feeding Difficulties	Denied	Benefit Certificate
НА	Hospital	B4150, S9342, B9002	Anorexia Nervosa	Approved	
НА	Infusion Therapy	B4160, B4155, B4150	Celiac Disease and Feeding Difficulties	Denied	CMD
НА	Obstetrics, Gynecology	Infertility Dx Testing	Infertility	Denied	CMD
НА	Plastic and Reconstructive Surgery	19303	Gender Dysphoria	Approved	
НА	Plastic & Reconstructive Surgery	19350, 19303	Gender Dysphoria	Denied	CMD
НА	Plastic & Reconstructive Surgery	19318	Breast Hypertrophy	Approved	

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НА	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Plastic and Reconstructive Surgery	19318	Symptomatic rnacromastia	Approved	
НА	Neurology	J0221	Pompe Dx	Approved	
НА	Allergy Immunology	J2357	Chronic Idiopathic Urticaria	Denied	CMD
НА	Endocrinology	J3111 (Evenity	Osteoporosis	Denied	CMD
НА	General Surgery	43644	Morbid Obesity	Denied	Benefit Certificate
НА	General Surgery	43999	Morbid obesity	Denied	Benefit Certificate
НА	InfusionTherapy	B4150	Dysphagia	Denied	Benefit Certificate
НА	Infusion Therapy	B4035, B9998	Dysphagia	Approved	
НА	InfusionTherapy	B4034, B4100, B9998, B4088	Dysphagia	Approved	
НА	Plastic & Reconstructive Surgery	19318	Macromastia	Approved	
НА	Plastic & Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Plastic & Reconstructive Surgery	19318	Macromastia	Approved	
НА	Plastic & Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
НА	Nurse Practitioner	J0517	Severe persistent asthma	Denied	CMD
НА	Pulmonology	J2182 (Nucala)	Severe Persistent Asthma	Approved	
НА	Allergy & Immunology	J2357 (Xolair)	Severe Persistent Asthma	Approved	
НА	Pulmonology	J2357 (Xolair)	Asthma	Approved	
HAX	DME Provider	E0601, E0560	OSA	Approved	
HAX	DME Provider	K0861	C5 Spinal Cord Injury	Approved	
HAX	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
PSE	General Surgery	43774	Morbid Obesity	Approved	
PSE	Plastic & Reconstructive Surgery	19318-50	Macromastia	Approved	
PSE	General Surgery	43774	Morbid Obesity	Approved	
PSE	Denistry	21299	Cranial Facial Anomoly	Approved	
ASE	General Surgery	43775	Morbid Obesity	Denied	Benefit Certificate
PSE	General Surgery	43774	Morbid Obesity	Approved	
PSE	Plastic & Reconstructive Surgery	19318	Macromastia	Approved	