

Medical Overview by Prior Authorization Approval or Denial

3rd Quarter 2020

LOB	SPECIALTY	PROCEDURE	DIAGNOSIS	DETERMINATION	REASON FOR DENIAL
HA	Allergy Immunology	J2182	Asthma	Approved	
HA	Allergy Immunology	J2357	Chronic Idiopathic Urticaria	Approved	
HA	Allergy Immunology	J2357	Severe asthma/ COPD	Approved	
HA	Allergy Immunology	J2357	Severe Persistent Asthma	Approved	
HA	Allergy/Immunologist	J2357	CIU	Approved	
HA	Dentistry	OO170	dental caries	Approved	
HA	Dentistry	OO170	Dental caries	Approved	
HA	Endodontist	41899, 00170	Dental caries	Approved	
HA	General Surgery	19318	Breast hypertrophy	Approved	
HA	General Surgery	43774	dysphagia	Approved	
HA	General Surgery	64590	Gastroparesis	Approved	
HA	General Surgery	19318	Macromastia	Approved	
HA	Infusion provider	J1300	Myasthenia Gravis	Approved	
HA	Nurse Practitioner	J0202	Multiple Sclerosis	Approved	
HA	Oral Surgeon	OO170	Dental caries	Approved	
HA	Pediatric Dentistry	OO170	Dental Caries	Approved	
HA	Plastic and Reconstructive Surgery	19318	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318	Breast hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318 and 19318-50	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318, 19318-50	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318, 19318-50	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318, 19318-50	Breast hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318-50	Breast hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318-RT and 19318-LT	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318-RT and 19318-LT	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318-RT and 19318-LT	Breast Hypertrophy	Approved	
HA	Plastic and Reconstructive Surgery	19318-50	Hypertrophy breast	Approved	
HA	Plastic and Reconstructive Surgery	19318	Macromastia	Approved	
HA	Plastic and Reconstructive Surgery	19318 (2 units)	Macromastia	Approved	

LOB	SPECIALTY	PROCEDURE	DIAGNOSIS	DETERMINATION	REASON FOR DENIAL
HA	Plastic and Reconstructive Surgery	19318 (2 units)	Macromastia	Approved	
HA	Plastic and Reconstructive Surgery	19318 (2 units)	Macromastia	Approved	
HA	Plastic and Reconstructive Surgery	19318-50	Macromastia	Approved	
HA	Pulmonology	J2357 (Xolair)	Moderate Persistent Asthma	Approved	
HA	Urogynecologist	64590, 95972, 76000	Urinary urge incontinence	Approved	
PSE	Denistry	OO170	Dental Caries	Approved	NA
PSE	Plastic/Reconstructive Surgery	19318	Macromastia	Approved	NA
ASP	Denistry	OO170	Dental Caries	Approved	NA