

Provider Notice

December 28, 2021

<u>Reminder – PA Changes Effective 1/1/2022 for CountyCare</u>

As part of our annual PA review process, CountyCare recently updated our PA list with changes effective 1/1/2022. These changes are excerpted from the CPT list found <u>here</u>, and detailed in the grid below.

PA Removals:

• Removed Abortion services.

Code Type	Code	Description	Effective Date	Term date	ls Preauth required	Additional Parameters
СРТ	59812	Treatment of incomplete abortion, any trimester, completed surgically		12/31/2021	NO	Elective Termination of pregnancy services covered under FFS Medicaid; contact HFS directly for coverage. Non- voluntary, medically necessary terminations may be covered under MCO.
СРТ	59820	Treatment of missed abortion, completed surgically; first trimester		12/31/2021	NO	Elective Termination of pregnancy services covered under FFS Medicaid; contact HFS directly for coverage. Non- voluntary, medically necessary terminations may be covered under MCO.
СРТ	59821	Treatment of missed abortion, completed surgically; second trimester		12/31/2021	NO	Elective Termination of pregnancy services covered under FFS Medicaid; contact HFS directly for coverage. Non- voluntary, medically necessary terminations may be covered under MCO.
СРТ	59830	Treatment of septic abortion, completed surgically		12/31/2021	NO	Elective Termination of pregnancy services covered under FFS Medicaid; contact HFS directly for coverage. Non- voluntary, medically necessary terminations may be covered under MCO.



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• Removed Arthroplasty in outpatient settings.

Code Type	Code	Description	Effective Date	Term date	ls Preauth required	Additional Parameters
СРТ	27130	ARTHROPLASTY, ACETABULAR/PROXIMAL FEMORAL PROSTHET	1/1/2004	12/31/9999	YES	No authorization required when performed in an outpatient setting effective 1/1/2022.
СРТ	27134	REVISION, TOTAL HIP ARTHROPLASTY; BOTH COMPONENTS,	1/1/2004	12/31/9999	YES	No authorization required when performed in an outpatient setting effective 1/1/2022.
СРТ	27447	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL AN	1/1/2004	12/31/9999	YES	No authorization required when performed in an outpatient setting effective 1/1/2022.
СРТ	27486	REVISION, TOTAL KNEE ARTHROPLASTY, W/WO ALLOGRAFT;	1/1/2004	12/31/9999	YES	No authorization required when performed in an outpatient setting effective 1/1/2022.
СРТ	27487	REVISION, TOTAL KNEE ARTHROPLASTY; FEMORAL AND ENT	1/1/2004	12/31/9999	YES	No authorization required when performed in an outpatient setting effective 1/1/2022.

PA Additions:

• Chiropractic services for adults in alignment with the benefit expansion, PA required after 10 visits.

Code Type	Code	Description	Effective Date	Term date	ls Preauth required	Additional Parameters
СРТ	99840	Chiropractic manipulative tx, spinal, 1-2 region	1/1/2022	12/31/9999	YES	Prior Auth required for members over age 20 after 10 visits.
СРТ	99841	Chiropractic manipulative tx, spinal, 3-4 region	1/1/2022	12/31/9999	YES	Prior Auth required for members over age 20 after 10 visits.
СРТ	99842	Chiropractic manipulative tx, spinal, 5 regions	1/1/2022	12/31/9999	YES	Prior Auth required for members over age 20 after 10 visits.