Prior Authorization Requirements

Children's Health Insurance Program (CHIP)

Effective Mar 1 2023

General Information

This list contains prior authorization requirements for care providers who participate with UnitedHealthcare Community Plan STAR Kids for inpatient and outpatient services. To request prior authorization, please submit your request online, or by phone or fax:

- Online: Use the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard.
- Phone: Call 866-604-3267.
- Fax 877-940-1972. Fax form is available at <u>UHCprovider.com/TXCommunityPlan</u> <u>UHCprovider.com/TXCommunityPlan</u> > Prior Authorization and Notification Resources > Prior Authorization Forms.

Prior authorization is not required for emergency or urgent care. Out-of-network physicians, facilities and other health care providers must request prior authorization for all procedures and services, excluding emergent or urgent care.

Medical

Category	Sub Category Description		Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Cancer Supportive Care	Bone Modifying Agents		Oncology DX Codes	06/01/2018		Prior authorization is required for these codes with Oncology DX codes. Prior authorization is not required for these codes with all other DX Please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors		Oncology DX Codes	10/01/2017		Prior authorization is required for these codes with Oncology DX codes. Prior authorization is not required for these codes with all other DX Please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors	J1442 J1447 J2820 Q5101	Oncology DX Codes	10/01/2017		Requires prior authorization for oncology and non-oncology DX.For non-oncology DX see Injectable medications section below.For Oncology DX please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors	Q5110 Q5111	DX Codes	01/01/2019		Prior authorization is required for these codes with Oncology DX codes. Prior authorization is not required for these codes with all other DX Please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors		Oncology DX Codes	01/01/2019		Requires prior authorization for oncology and non-	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



					oncology DX.For non- oncology DX see Injectable medications section below.For Oncology DX please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888- 397-8129	
Cancer Supportive Care	Colony Stimulating Factors	Q5120	Oncology DX Codes	07/01/2020	Prior authorization is required for these codes with Oncology DX codes. Prior authorization is not required for these codes with all other DX Please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors	Q5122	Oncology DX Codes	01/01/2021	Requires prior authorization for oncology and non-oncology DX. For non-oncology DX see Injectable medications section below. For Oncology DX please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cancer Supportive Care	Colony Stimulating Factors		Oncology DX Codes	01/01/2022	Prior authorization is required for these codes with Oncology DX codes. Prior authorization is not required for these codes with all other DX Please submit requests online using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cerebral Seizure Monitoring –		95718 95720 95722 95724		01/01/2020	Prior authorization required forinpatient services. Prior authorization is not required for outpatient hospital or ambulatory surgical center.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Cerebral Seizure Monitoring –		95726		03/01/2020	Prior authorization required forinpatient services. Prior authorization is not required for outpatient hospital or ambulatory surgical center.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy			Oncology DX Codes	07/01/2022	Prior authorization required for injectable chemotherapy drugs administered in an outpatient setting including intravenous, intravesical and intrathecal for Oncology diagnosisChemotherapy injectable drugs that have not yet received an assigned code and will be billed under a miscellaneous Healthcare Common Procedure Coding System (HCPCS) code will require prior authorization, please call 866-604-3267.*deleted code eff 7/1	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)		J0640 J0641 J9000 J9015 J9017 J9020 J9025 J9027 J9032 J9033 J9034 J9035 J9039 J9040		01/01/2017		Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



	J9042 J9043 J9045 J9047 J9050 J9055 J9060 J9065 J9070 J9098 J9100 J9120 J9130 J9145 J9150 J9151 J9160 J9165 J9171 J9175 J9176 J9178 J9179 J9181 J9185 J9190 J9200 J9201 J9200 J9201 J9208 J9207 J9208 J9207 J9208 J9207 J9208 J9211 J9212 J9213 J9214 J9215 J9216 J9218 J9228 J9230 J9245 J9260 J9261 J9262 J9263 J9264 J9266 J9267 J9268 J9271 J9280 J9299 J9301 J9299 J9301 J9302 J9303 J9305 J9306 J9307 J9308 J9315* J9306 J9307 J9308 J9315* J9300 J9395 J9306 J9307 J9308 J9315* J9320 J9330 J9355 J9306 J9307 J9308 J9315* J9306 J9307 J9308 J9315* J9320 J9330 J9305 J9306 J9307 J9308 J9315* J9307 J9308 J9315* J9320 J9330 J9355 J9357 J9300 J9397 J9300 J9397 J9300 J9397 J9307 J9309 J9317		
Chemotherapy (continued)	Q2050 J9022 J9023 J9203 J9285	04/01/2018	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	J9057 J9153 J9173 J9229 J9311 J9312	01/01/2019	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	J9030 J9036	08/01/2019	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	J9119 J9204 J9210 J9269 J9313	10/01/2019	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	J9309	02/01/2020	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	J0642	03/01/2020	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Category		Proc-	Diagnosis	Effective	Review	Comments	Documentation necessary to obtain prior authorization
	· ·	Code	Codes	Date	Date		
Chemotherapy (continued)		J9177 J9198 J9246 J9358 Q5119		07/01/2020			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Chemotherapy (continued)		Q5107 Q5117		10/01/2020			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Chemotherapy (continued)		J9227 J9304		11/01/2020			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol Requirements-for-Pre-Service.pdf
Chemotherapy		J9118		01/01/2021			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol
(continued)	,	J9144 J9223 J9281 J9316 J9317					Requirements-for-Pre-Service.pdf
Chemotherapy (continued)		J9037 J9349		05/01/2021			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	,	J9348 J9353 Q5123		10/01/2021			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	9	9 J9247 J931 J9318		01/01/2022			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	,		Oncology DX Codes	01/01/2015			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol Requirements-for-Pre-Service.pdf
Chemotherapy (continued)	,	J9155 J9202 J9217 J9225 J9226	Oncology DX Codes	01/01/2017		Requires prior authorization for oncology and non-oncology DX. For non-oncology DX see Injectable medications section below. For Oncology DX please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	
Chemotherapy (continued)		J1950	Oncology DX Codes	07/01/2021		Requires prior authorization for oncology and non-oncology DX. For non-oncology DX see Injectable medications section below. For Oncology DX please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the Provider Portal button in the top right corner. Then, select Prior Authorization and Notification on your Provider Portal dashboard. Or, call 888-397-8129	
Cochlear Implants and Other Auditory Implants		69729	69730	01/01/2023			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Continuous Glucose Monitor		E2102		02/01/2023			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Continuous Glucose Monitor		A4238 A4239	E2103	01/01/2023			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/Requirements-for-Pre-Service.pdf
Continuous Glucose Monitor		A9276 A9278	A9277	10/01/2021			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol/ Requirements-for-Pre-Service.pdf
Cosmetic & Reconstructive		11971		01/01/2015			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/pol Requirements-for-Pre-Service.pdf
Durable medical equipment (DME)		A9279 E0194 E0265 E0300 E0445 E0460 E04483 E0663 E0669 E0700 E0710 E0745 E0762 E0764 E0784 E1003 E1004 E1005 E11001 E1005 E11001 E1229 E1231 E1232 E1233 E1234 E1235 E1236 E1237 E1238 E1239 E2100 E2227 E2228 E2300 E2325		01/01/2015		Prior authorization required only for the codes listed with a retail purchase or a cumulative rental cost of more than \$500 Prosthetics are not DME – see Orthotics and prosthetics. Some home health care services may qualify but are not subject to the cost threshold – see Home health care.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/polRequirements-for-Pre-Service.pdf



	E2327 E2329 E2351 E2373 E2510 E2511 E2599 E2626 E2627 E2628 E2629 E2630 E8001 K0005 K0008 K0013 K0108 K0849 K0850 K0851 K0852 K0853 K0854 K0858 K0858 K0858 K0859 K0860 K0861 K0862 K0863 K0864 K0868 K0869 K0870 K0871 K0877 K0878 K0879 K0880 K0881 K0889 K0889 K0890 K0891 S1040 T1999			
Durable medical equipment (DME)	E0466		Prior authorization required only for the codes listed with a retail purchase or a cumulative rental cost of more than \$500 Prosthetics are not DME – see Orthotics and prosthetics.Some home health care services may qualify but are not subject to the cost threshold – see Home health care.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/polirRequirements-for-Pre-Service.pdf
Durable medical equipment (DME)	E0766		Prior authorization required only for the codes listed with a retail purchase or a cumulative rental cost of more than \$500 Prosthetics are not DME – see Orthotics and prosthetics.Some home health care services may qualify but are not subject to the cost threshold – see Home health care.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/poli-requirements-for-Pre-Service.pdf
equipment (DME)	E0277 E0328 E0329 E0470 E0471 E0652 E1130 E1825 E2310 E2311 E2512		Prior authorization	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/polirequirements-for-Pre-Service.pdf
Durable medical equipment (DME)	A9900 E0465 E0637	05/01/2019	Prior authorization required only for the codes listed with a retail purchase or a cumulative rental cost of more than \$500 Prosthetics are not DME – see Orthotics and prosthetics.Some home health care services may qualify but are not subject to the cost threshold – see Home health care.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/polinequirements-for-Pre-Service.pdf
Investigational (and or linked	36514 64722 66180 A9274	01/01/2015		Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/poli- Requirements-for-Pre-Service.pdf



C	ategory	Sub Category	Proc- Code	Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
8 Ir (a	xperimental nvestigational and or linked ervices)	Description	33477		05/02/2016			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Ν	Genetic and folecular esting	Genetic Testing	0068U 0097U 87481 87482 87505 87506 87510 87511 87512 87623 87797 87799 87800 87801		11/01/2020		Prior authorization required for genetic and molecular testing performed in an outpatient settingCare providers requesting laboratory testing will be required to complete the prior authorization/notification process, which includes indicating the laboratory and test name. Payment will be authorized for those CPT codes registered with the Genetic and Molecular Testing Prior Authorization/Notification Program for each specified genetic test.Notification/prior authorization required for BRCA testing before DNA sequencing is performed. The ordering care provider must notify the laboratory conducting the test and the laboratory will notify UnitedHealthcare.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
N	senetic and folecular esting	Genetic Testing	81278 81351 81352 81353		06/01/2022		Prior authorization required for genetic and molecular testing performed in an outpatient settingCare providers requesting laboratory testing will be required to complete the prior authorization/notification process, which includes indicating the laboratory and test name. Payment will be authorized for those CPT codes registered with the Genetic and Molecular Testing Prior Authorization/Notification Program for each specified genetic test.Notification/prior authorization required for BRCA testing before DNA sequencing is performed. The ordering care provider must notify the laboratory conducting the test and the laboratory will notify UnitedHealthcare.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	njectable ledications	Amvuttra™	J0225		04/01/2023		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210****	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
	njectable Medications	Lanreotide™	J1932		04/01/2023		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination
Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Skyrizi® J2327 04/01/2023 Please check our Review at Refer below link $\frac{https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf}{}$ Medications Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Enjaymo™ J1302 02/01/2023 Please check our Review at Refer below link Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List Pre-

Administration (FDA) and



determination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable J2777 02/01/2023 Please check our Review at Refer below link Vabysmo® Medications Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Actemra® J3262 01/01/2019 Please check our Review at Refer below link $\underline{\text{https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf}$ Medications Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly

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				UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210	
Injectable Medications	Aduhelm®	J0172	05/01/2022	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX. For oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section alove. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or Portal das	
Injectable Medications	Aldurazym®	J1931	04/01/2022	call 877-842-3210 Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies >	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



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Category	Sub Category Description		Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Injectable	EvenityTM	J3111		10/01/2019			Refer below link
Injectable Medications	Evenity I M	J3111		10/01/2019		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or care section above.For nononcology DX submit online at UHCProvider.com>link>Prior Authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Notology and non-oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior	Reter below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
						Provider Portal dashboard or call 877-842-3210	
Injectable Medications	Exondys 51TM	J1428		01/01/2018			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf



				call 877-842-3210	
Injectable Medications	Fabrazyme®	J0180	04/01/2022	Please check our Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
Medications				Medications policy for the most up-to-date information	Record-Requirements-for-Pre-Service.pdf
				on drugs newly approved by the Food & Drug	
				Administration (FDA) and included on our Review at	
				Launch Medication List. Predetermination is highly	
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				Launch for New to Market Medications policy is available at	
				UHCprovider.com > Menu > Policies and Protocols >	
				Community Plan Policies > Medical & Drug Policies and	
				Coverage Determination Guidelines for Community	
				Plan.*Please obtain prior notification for Synagis through OptumRx prior	
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				J9217, J9225 and J9226, prior authorization is	
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				Provider Portal dashboard or call 877-842-3210	
Injectable Medications	FasenraTM	J0517	01/01/2019	Provider Portal dashboard or	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
		J0517	01/01/2019	Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch for New to Market Medications policy for the most up-to-date information	Refer below link
		J0517	01/01/2019	Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
		J0517	01/01/2019	Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre-	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
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Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior

Authorization and Notification tool on your Provider Portal dashboard or

call 877-842-3210



Injectable Lupron Medications Depot®****

Category	Sub Category	Proc- Code	Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Injectable Medications Injectable Medications	Category Description LuxturnaTM					Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, 99155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, 99155, J9202, J9217, J9225 and J9226, prior authorization for Synagis routifications policy for the most up-to-date information on drugs newly approved by the Food & Drug Policies and Covingen English Prior Authorization (FDA) and included on our Review at Launch for New to Market Medications policy is available at Policies on Covingen Portal Covingen Policies and Covingen Policie	Refer below link throul/lower unbenowides com/content/dam/provides/docs/public/policies/protocols/Medical- Record-Regulaments-for-Pre-Service pdf Refer below link This silve with the provides com/content/dam/provides/docs/public/policies/protocols/Medical- Record-Regulaments-for-Pre-Service pdf Refer below link This silve with provides com/content/dam/provides/docs/public/policies/protocols/Medical- Record-Regulaments-for-Pre-Service pdf
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				call 877-842-3210	
Injectable Medications	Makena®	J1726 J1729	01/01/2018	Please check our Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
ivieulcations		31129		Launch for New to Market Medications policy for the most up-to-date information	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
				on drugs newly approved by the Food & Drug	
				Administration (FDA) and included on our Review at	
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				UHCprovider.com > Menu > Policies and Protocols >	
				Community Plan Policies > Medical & Drug Policies and	
				Coverage Determination Guidelines for Community	
				Plan.*Please obtain prior notification for Synagis	
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				Gail 617 6 12 6216	
	Mepsevii®	J3397	04/01/2022	Please check our Review at	Refer below link
Injectable Medications	Mepsevii®	J3397	04/01/2022	Launch for New to Market Medications policy for the	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Mepsevii®	J3397	04/01/2022	Launch for New to Market	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Mepsevii®	J3397	04/01/2022	Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
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	Mepsevii®	J3397	04/01/2022	Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
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	Mepsevii®	J3397	04/01/2022	Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
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	Mepsevii®	J3397	04/01/2022	Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre- determination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800- 310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non- oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
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Medications	Naglazyme®		04/01/2022	Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre- determination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notification services at 800- 310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non- oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and	https://www.uhoprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Nexviazyme® C9085 04/01/2022 Please check our Review at Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications J3490 Launch for New to Market Record-Requirements-for-Pre-Service.pdf J3590 Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Nexviazyme® J0219 05/01/2022 Please check our Review at Refer below link Medications Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information

Launch for New to Market



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on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable **Nplate®** J2796 08/01/2021 Please check our Review at Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Launch for New to Market Medications Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 J2182 04/01/2017 Injectable Nucala® Please check our Review at Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and



Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 OcrevusTM J2350 01/01/2018 Injectable Please check our Review at Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or. call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable OnpattroTM J0222 10/01/2019 Please check our Review at Refer below link $\underline{\text{https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-public/policie$ Medications Launch for New to Market Record-Requirements-for-Pre-Service.pdf Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly

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Medications	Orencia® J0129	01/01/2019	Please check our Review at Launch for New to Market	Refer below link https://www.uh.gorovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
Injectable Medications	ParsabivTM J0606	11/01/2018		Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Injectable	Prohuphine® .	10570	04/01/2017	Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210	Refer below link
Injectable Medications	Probuphine® J	J0570	04/01/2017		Refer below link by the state of the state o
Injectable Medications	Radicava® J	J1301	01/01/2019	Please check our Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



				Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800- 310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non- oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210	
Injectable Medications	Reblozyl ®	J0896	07/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210****	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Injectable Medications	Remicade®	J1745	01/01/2019	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch for New to Market Q5104 01/01/2019 Refer below link Injectable Renflexis® https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior

Authorization and Notification tool on your Provider Portal dashboard or

call 877-842-3210



Category	Sub Category	Proc- Code	Diagnosis Codes			Comments	Documentation necessary to obtain prior authorization
Injectable Medications Injectable Medications	Category Description Revcovi®	J9311	Diagnosis Codes	04/01/2022	Date	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notification for Synagis through OptumRx prior notification services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX please see Chemotherapy section and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization please submit request leafthcare review at Launch for New to Market Medications policy for the most up-to-date information or durance Provider Port	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
		J9311		04/01/2020		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.****Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
						and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or	



				call 877-842-3210	
Injectable Medications	Rituxan®	J9312	04/01/2020	Please check our Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
σαισαιίστιο				Medications policy for the most up-to-date information	Record-Requirements-for-Pre-Service.pdf
				on drugs newly approved by the Food & Drug	
				Administration (FDA) and included on our Review at	
				Launch Medication List. Pre- determination is highly	
				recommended for the drugs on the list. The Review at Launch for New to Market	
				Medications policy is available at	
				UHCprovider.com > Menu > Policies and Protocols >	
				Community Plan Policies > Medical & Drug Policies and Coverage Determination	
				Guidelines for Community Plan.*Please obtain prior	
				notification for Synagis through OptumRx prior	
				notifications services at 800- 310-6826.**For prior	
				authorization, please submit requests online by using the UnitedHealthcare Provider	
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				J1442, J1447, Q5101, and Q5110; White blood cell	
				colony stimulating factors, prior authorization is	
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				Cancer supportive care section above.For non-	
				oncology DX submit online at	
				UHCProvider.com>link>Prior Authorization and	
				Notification tool on your Provider Portal dashboard or call 877-842-3210****	
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				UHCProvider.com>link>Prior Authorization and	
				Notification tool on your Provider Portal dashboard or	
				11 077 0 40 0040	
Injectable	Ruconest®	J0596	10/01/2020	call 877-842-3210 Please check our Review at	Refer below link
Injectable Medications	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols >	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
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	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal button in the	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Protal button in the top right corner. Then, select the Prior Authorization and	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors,	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For non-	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For non-oncology DX submit online at	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226,	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
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	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX. F	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruconest®	J0596	10/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemother Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or Portal dashboard	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Ruxience ®	Q5119	07/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Please check our Review at Refer below link Injectable Sandostatin® J2353 08/01/2021 https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications LAR Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Saphnelo™ J0491 05/01/2022 Please check our Review at Refer below link Medications Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information



on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Signifor® J2502 08/01/2021 Please check our Review at Refer below link Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications LAR Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 J1300 10/01/2017 Injectable Soliris® Please check our Review at Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and



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Injectable Medications	Spravato®	S0013	02/01/2021	recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication, please see Chemotherapy section and Notification tool on your Provider Portal dashboard or call 877-842-3210** Please check our Revie	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
				UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210	
Injectable Medications	Stelara IV®	J3358	04/01/2020	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Injectable	SublocadeTM	Q9991	07/01/2018	Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210 Please check our Review at	Refer below link
Injectable Medications	SublocadeTM	Q9991 Q9992	07/01/2018	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Injectable Medications	Supprelin® LA****	J9226	07/01/2021	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu >	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



				Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800- 310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non- oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210	
Injectable Medications	Susvimo™	C9093	05/01/2022	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210****	
Injectable Medications	Synagis®*	90378	01/01/2015	Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch for New to Market J3241 12/01/2020 Refer below link Injectable Tepezza® https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior

Authorization and Notification tool on your Provider Portal dashboard or

call 877-842-3210



Theraneutic	Ageon		05/01/2010		Please check our Paview of	Refer below link
Therapeutic	A9513		05/01/2019		Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommen-ded for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notification services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For non-oncology DX please see Cancer supportive care section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX please see Cancer supportive care section above. For non-oncology DX please see Chemotherapy section is required for both oncology and non-oncology DX please see Chemotherapy section above. For non-oncology DX please see Chemotherapy section is required for both oncology and non-oncology DX please see Chemotherapy section above. For non-oncology DX please see Chemotherapy section above. For non-oncology DX please see Chemotherapy section spolicy for the most up-to-date information on drugory not please check our Review at Launch Modification tool on your Provider Portal dashboard or call 877-842-3210 Please check our Review at Launch Modification by one of the drugs on the list. The Revi	Refor below link https://www.uhoporedec.com/content/dam/providen/docs/public/policiae/protocols/Medical- Report-Reputements-dor-Pre-Service.pdf Refor below link https://www.uhoporedec.com/content/dam/providen/docs/public/policiaes/protocols/Medical- Refor below link https://www.uhoporedec.com/content/dam/providen/docs/public/policiaes/protocols/Medical- Report-Reputements-dor-Pre-Service.pdf
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				call 877-842-3210	
Injectable Medications	Therapeutic	A9590	03/01/2020	Please check our Review at Launch for New to Market	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
	pharmaceuticals**			Medications policy for the most up-to-date information	Record-Requirements-for-Pre-Service.pdf
				on drugs newly approved by the Food & Drug	
				Administration (FDA) and included on our Review at	
				Launch Medication List. Pre- determination is highly	
				recommended for the drugs on the list. The Review at Launch for New to Market	
				Medications policy is available at	
				UHCprovider.com > Menu > Policies and Protocols >	
				Community Plan Policies > Medical & Drug Policies and	
				Coverage Determination Guidelines for Community	
				Plan.*Please obtain prior notification for Synagis	
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				310-6826.**For prior authorization, please submit	
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				above. For non-oncology DX submit online at	
				UHCProvider.com>link>Prior Authorization and	
				Notification tool on your Provider Portal dashboard or	
Injectable	Trelstar®	J3315	07/01/2021	call 877-842-3210 Please check our Review at	Refer below link
Medications		00010	0770172021	Launch for New to Market	https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-
				Medications policy for the	Record-Requirements-for-Pre-Service.pdf
				Medications policy for the most up-to-date information on drugs newly approved by	Record-Requirements-for-Pre-Service.pdf
				most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and	Record-Requirements-for-Pre-Service.pdf
				most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre-	
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Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 07/01/2020 Injectable Vyondys 53 ® J1429 Please check our Review at Refer below link Medications Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable White blood cell 10/01/2019 Please check our Review at Refer below link Medications colony stimulating J1447 Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medicalfactors*** Q5101 Medications policy for the Record-Requirements-for-Pre-Service.pdf Q5110 most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu >



Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Xembify ® J1558 07/01/2020 Injectable Please check our Review at Refer below link $\underline{\text{https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-public/policie$ Medications Launch for New to Market Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination **Guidelines for Community** Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 J2357 01/01/2015 Injectable Xolair® Please check our Review at Refer below link Medications Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and



Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210*** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210 Injectable Zoladex®**** 07/01/2021 J9202 Please check our Review at Refer below link Launch for New to Market https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Medications Medications policy for the Record-Requirements-for-Pre-Service.pdf most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Predetermination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above. For nononcology DX submit online UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J9155, J9202, J9217, J9225 and J9226, prior authorization is required for both oncology

and non-oncology DX. For oncology DX please see Chemotherapy section above. For non-oncology DX

UHCProvider.com>link>Prior

submit online at

Authorization and Notification tool on your Provider Portal dashboard or

call 877-842-3210



Category	Sub Category Description	Proc- Code	Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Injectable Medications	Zolgensma ®	13399		07/01/2020		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre-determination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.*Please obtain prior notification for Synagis through OptumRx prior notifications services at 800-310-6826.**For prior authorization, please submit requests online by using the UnitedHealthcare Provider Portal. Go to UHCprovider.com and click on the UnitedHealthcare Provider Portal button in the top right corner. Then, select the Prior Authorization and Notification on your Provider Portal dashboard Or, call 888-397-8129.***Codes J1442, J1447, Q5101, and Q5110; White blood cell colony stimulating factors, prior authorization is required for both oncology and non-oncology DX. For oncology DX please see Cancer supportive care section above.For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J1955, J19202, J19217, J1925 and J19226, prior authorization is required for both oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J1925, J19202, J19217, J1925 and J1926, prior authorization is required for both oncology DX please see Chemotherapy section above. For non-oncology DX submit online at UHCProvider.com>link>Prior Authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210**** J1950, J1921*** J1950, J19226, prior authorization and Notification tool on your Provider Portal dashboard or call 877-842-3210****	
Injectable Medications – Unclassified	Cutaquig®Lupaneta PackTM	C9399		01/01/2015		Please check our Review at Launch for New to Market Medications policy for the most up-to-date information on drugs newly approved by the Food & Drug Administration (FDA) and included on our Review at Launch Medication List. Pre-determination is highly recommended for the drugs on the list. The Review at Launch for New to Market Medications policy is available at UHCprovider.com > Menu > Policies and Protocols > Community Plan Policies > Medical & Drug Policies and Coverage Determination Guidelines for Community Plan.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/f Record-Requirements-for-Pre-Service.pdf
Orthotics and prosthetics		L0112 L0170 L0456 L0462 L0464 L0480 L0482 L0484 L0629 L0631 L0632 L0634 L0636 L0637 L0638 L0640 L0700 L0710 L0810 L0820 L0820 L1300 L1310 L1499 L1680 L1310 L1499 L1685 L1700 L1710 L1720 L1730 L1755 L1831 L1836 L1844 L1845 L1846 L1847 L1860 L1945 L1950 L1900 L2020 L2030		01/01/2015		Prior authorization required for the orthotic and prosthetics with a retail purchase or a cumulative rental cost of more than \$500	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/f Record-Requirements-for-Pre-Service.pdf



L2628 L3230		
L3265		
L3649 L3671		
L3674 L3720		
L3730 L3740		
L3764		
L3900 L3901		
L3904 L3905		
L3961 L3971		
L3975		
L3976 L3977		
L3999 L4000		
L4010 L4020		
L5010 L5020		
L5050		
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L5105 L5150		
L5160 L5200		
L5210 L5220		
L5230		
L5250 L5270		
L5280 L5301		
L5312 L5321		
L5331 L5341		
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Orthotics and prosthetics	L1834	03/01/2016	Prior authorization required for the orthotic and prosthetics with a retail purchase or a cumulative rental cost of more than \$500	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Orthotics and prosthetics	L1812 L1820 L1830	01/01/2018	Prior authorization required for the orthotic and prosthetics with a retail	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Orthotics and prosthetics	L3763 L4631 L5647 L5649 L5673 L5683 L5700 L5705 L5845 L5962 L5986 L5999	04/01/2019	Prior authorization required for the orthotic and prosthetics with a retail purchase or a cumulative rental cost of more than \$500	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf
Orthotics and prosthetics	L1832	05/01/2019	Prior authorization required for the orthotic and prosthetics with a retail purchase or a cumulative rental cost of more than \$500	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/NRecord-Requirements-for-Pre-Service.pdf
OutpatientTherapy	92507 92508 92526 97012 97014 97016 97018 97022 97026 97028 97033 97034 97039 97110 97112 97113 97116 97124 97140 97799 G0129 \$8990	01/01/2015	ST/OT and PT services (Re-	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf
OutpatientTherapy	70371 92626 92627 92630 92633 96105 97024 97032 97035 97036 97139 97150 97164	07/01/2017	Prior Authorization is required for all ST/OT and PT services (Revaluations and Therapy visits)Prior authorization should be submitted online using the Prior Authorization and Notification tool at UHCprovider.com>UnitedHealthcare Provider Portal > Prior Authorization and Notification.* Prior authorization not required for DME providers	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf



		97168 97530 97535 97537 97542* 97750 97760 97761			
OutpatientTherapy		419 420 421 422 423 424 429 430 431 432 433 434 439 977 978	01/01/2015	ST/OT and PT services (Re-	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/NRecord-Requirements-for-Pre-Service.pdf
Rhinoplasty and septoplasty		30410 30420 30430 30435 30450 30460 30462 30465	01/01/2015		Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Auditory System	69205	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Cardiovascular System	36590 36832	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Carpal Tunnel Surgery	64721	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital		66821 66982 66984	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	.,	45378 45380 45384 45385	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/N Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Reconstructive	13101 13132 14040 14060 14301 21552 21931	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Necord-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital		42415 42440 43200 43236 43237 43238 43242 43245 43246 43247 43248 43251 43255 43259 44360 44361 45171 45334 45335 45381 45390 45990 46020 46040 46050 46200 46221 46255 46261 46270 46275 46288 46505 46750 46910 46946	07/01/2020	when requesting service in an	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/h Record-Requirements-for-Pre-Service.pdf



Category	Sub Category Description		Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Site of Service (SOS) – outpatient hospital	ENT Procedures	21320 30140 30520 69436 69631		07/01/2020		Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Eye and Ocular Adnexa	65710 65820 66250 66710 66711 66825 66986 67010 67041 67042 67105 67108 67113 67840 68110 68115 68320 68720 68815		07/01/2020		Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Female Genital System	57240 57250 57461 57520 58561 58562		07/01/2020		Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
	Gynecologic Procedures	57522 58353 58558 58563 58565		07/01/2020		Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Hemic and Lymphatic Systems	38500 38510 38525		07/01/2020		Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Hernia Repair	49505 49585 49587 49650 49651 49652 49653 49654 49655		07/01/2020		only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Integumentary System	10121 11440 11450 11624 11770 13121 15100 15120 15240 19020 19120 19125		07/01/2020			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Liver Biopsy	47000		07/01/2020		Prior authorization	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Site of Service (SOS) – outpatient hospital	Male Genital System	54840	07/01/2020	service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC) Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Miscellaneous	20680	07/01/2020	participating Ambulatory Surgery Center (ASC) Prior authorization	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Service (SOS) –	Musculoskeletal System	20553 21012	07/01/2020	authorization not required if performed at a participating Ambulatory Surgery Center (ASC) Prior authorization only required	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
outpatient hospital		21013 21336 21554 21555 21556 21930 22902 22903 23071 23075 24071 27327 27337 27632 28035 28039 28041 28060 28080 28090 28104 28118 28119 28124 28285 28289 28292 28296 28297 28298 28292 28296 28297 28298 28292 28296 28297 28298 28292 28296 28297 28298 28299 29806 29807 29819 29826 29827 29828 29827 29828 29827 29840 29845 29846 29847 29846 29847 29848 29848 29849 29846 29847 29846 29847 29846 29847 29848 29848 29848 29849 29846 29847 29846 29847 29848 29848 29848 29848 29849 29848 29848 29849 29848 29849 29849 29840 29845 29840 29845 29840 29847 29888 29887 29880 29881 29888 29888 29888		when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	
Site of Service (SOS) – outpatient hospital	Nervous System	64561 64640	07/01/2020	Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Ophthalmologic	65426 65730 65855 66170 66761 67028 67036 67040 67228 67311	07/01/2020	Prior authorization	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



		67312		not required if performed at a participating Ambulatory Surgery Center (ASC)	
Site of Service (SOS) – outpatient hospital	Respiratory System	30802 30930 31525 31535 31536 31541 31624	07/01/2020	Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Tonsillectomy & Adenoidectomy	42820 42821 42825 42826 42830	07/01/2020	Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
	Upper Gastrointestinal Endoscopy	43235 43239 43249	07/01/2020		Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Urinary System	52276 52287 52320 52344	07/01/2020	Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Site of Service (SOS) – outpatient hospital	Urologic Procedures	50590 52000 52005 52204 52224 52234 52235 52260 52281 52310 52332 52351 52352 52353 52356 55040 55700 57288	07/01/2020	Prior authorization only required when requesting service in an outpatient hospital setting Prior authorization not required if performed at a participating Ambulatory Surgery Center (ASC)	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf



Category	Sub Category Description	Proc- Code	Diagnosis Codes	Effective Date	Review Date	Comments	Documentation necessary to obtain prior authorization
Spinal Surgery		22514		07/01/2020		Prior authorization is required. In addition, site of service will be reviewed as part of the prior authorization	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Spinal Surgery		22510 22511 22512 22513 22515		04/01/2022			Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Transplants	therapy	Q2056		02/01/2023		For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification number on the back of the member's health plan ID card. For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification number on the back of the member's health plan ID card.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Transplants	Car-T cell therapy	0537T 0538T 0539T 0540T Q2042		01/01/2019		For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification number on the back of the member's health plan ID card.	
Transplants	Car-T cell therapy	Q2053		07/01/2021		For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification	



					number on the back of the member's health	
Transplants	Car-T cell Q2055 therapy		02/01/2022	plan ID card. For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification number on the back of the member's health	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf	
Transplants	Car-T cell therapy	C9098 J9999		07/01/2022	plan ID card. For transplant and CAR T-Cell therapy services including Abecma® (Idecaptagene Cicleucel), Carvykti™ (ciltacabtagene autoleucel), Kymriah™ (tisagenlecleucel) Tecartus™ (brexucabtagene autoleucel) and Yescarta™ (axicabtagene ciloleucel), please call the UnitedHealthcare Community and State Transplant Case Management Team at 888-936-7246 or the notification number on the back of the member's health plan ID card.	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf
Transplants	Transplant services	32850 32851 32852 32853 32854 32855 32856 33930 33943 33945 38208 38209 38210 38212 38213 38214 38242 44132 44133 44135 44136 44137 44715 44720 44721 47713 47140 477141 477142 477143 47145 47144 47145 47146 47147 48551 48552 48552 48552 48552 48552 48552 48552 50340 50360 503		01/01/2015	For transplant and CAR T-Cell	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical- Record-Requirements-for-Pre-Service.pdf
Transplants	Transplant services	38232	Oncology DX Codes	01/01/2015	Code 38232 will only require prior authorization for an oncology diagnosis	Refer below link https://www.uhcprovider.com/content/dam/provider/docs/public/policies/protocols/Medical-Record-Requirements-for-Pre-Service.pdf

Behavioral

Category	Sub Category	Proc-Code	Diagnosis Codes	Effective Date	Review Date	Comments	Documentation
	Description						necessary to obtain
							prior authorization

