



NETWORK *Notification*

Notice Date: January 31, 2025
To: Ohio Medicaid Providers
From: CareSource
Subject: Prior Authorization Requirement Update
Effective Date: April 1, 2025

Summary

This notification announces prior authorization list changes effective April 1, 2025, as well as details from the new codes released from the Centers for Medicare and Medicaid Services (CMS) in 2024. Please read through the full notification for details of the changes.

Impact

CareSource requires prior authorization on the following new codes released by CMS:

- C1601, Q4294, Q4295, E0737, E2298, Q4304, A6523, A6524, A6525, A6526, E0468, A4457, A6586, L1320, A2027, A2028, A2029, A4543, A4544, A4545, A7021, E0469, E0721, E0743, E0767, E2513, L1006, L8720, L8721, Q4334, Q4335, Q4336, Q4337, Q4338, Q4339, Q4340, Q4341, Q4342, Q4343, Q4344, Q4345

Please note, all nonparticipating providers and all requests for inpatient services require prior authorization. Approval or payment of services can be dependent upon the following, but not limited to:

- member eligibility
- members < 21 years old
- medical necessity
- covered benefits
- modifiers
- diagnosis and revenue codes
- limits and number of visit variances
- provider contracts
- provider types
- correct coding and billing practices

Questions?

For more information, please contact Provider Services at **1-800-488-0134**. Hours of availability are Monday through Friday from 8 a.m. to 6 p.m. Eastern Time (ET).

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