



AmeriHealth Caritas™

New Hampshire

To: AmeriHealth Caritas New Hampshire Providers

Date: December 16, 2024

Subject: Changes to Prior Authorization Requirement for certain codes

Summary: Effective October 1, 2024, the prior authorization status has changed for some HCPCS codes and services.

Use the link below to scroll down to our prior authorization look-up tool for the latest code status.

The following changes to prior authorization requirements were effective October 1, 2024:

Procedure Code Category	# of Codes Affected	Procedure Code Category	# of Codes Affected
Diagnostic Radiopharmaceuticals	1	Medical/Surgical Supplies and Devices-Other Implants	3
DME	13	Orthotic Procedures and Devices	5
Immunization-Medicine	2	Pathology and Laboratory Services	1
Injectable Drugs	19	Pharmacy Drugs-Prescription	14
Laboratory Services	45	Radiology	1

As a reminder, when you do need to verify whether a service requires prior authorization, use the Prior Authorization Lookup Tool on the provider website at:

<https://www.amerihealthcaritasnh.com/provider/resources/prior-authorization-lookup.aspx>

Questions: If you have questions about this communication, please contact your Provider Account Executive or the Provider Services department at **1-888-599-1479**.