

To: AmeriHealth Caritas New Hampshire Providers

Date: February 24, 2025

Subject: Reduction/Removal of Prior Authorization Requirement for Select Services and

Procedures

Summary: Beginning March 1, 2025, we are removing or reducing prior authorization requirements for 395 select CPT/HCPCS codes.

To verify whether a service requires prior authorization, use the Prior Authorization Lookup Tool on the provider website at:

www.amerihealthcaritasnh.com/provider/resources/prior-authorization-lookup.aspx

Adjustments to prior authorization rules and medical necessity review for these services is part of AmeriHealth Caritas New Hampshire's continued dedication to supporting providers in our shared commitment to high quality health care for our participants.

Questions: If you have questions about this communication or would like a full list of codes affected by this change, please contact your Provider Account Executive or the Provider Services department at **1-888-599-1479.**