



Upper Peninsula Health Plan Prior Authorization/Notification Updates

Important Information

This document is a reference guide to assist providers with UPHP prior authorization/notification **changes** and will be updated as changes are made.

Please utilize the UPHP Prior Authorization and Notification Grid for Prior Authorization/Notification requirements.

All non-urgent/non-emergent out-of-network services require prior authorization.

Some services may not be covered by Medicare or Medicaid. UPHP follows CMS and MDHHS fee schedules. Please review the UPHP Prior Authorization and Notification Grid to verify if a service/item requires prior authorization/notification.

Effective Date	Services	Change/Update	Product Line/Notes
01/01/2019	Durable Medical Equipment	Added: PA required for the following codes: A4421, A6512, A9999, B9998, B9999, E0295, E0297, E0261, E0266, E0655, E0656, E0657, E0660, E0665, E0666, E0667, E0668, E0669, E0671, E0672, E0673, E0731, E0760, E2502, E2506, E2508, E2510, E2599, K0812, K0814, K0815, K0816, K0821, K0822, K0823, K0824, K0825, K0826, K0827, K0828, K0829, K0836, K0837, K0838, K0839, K0840, K0841, K0842,	All UPHP Product Lines



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		K0849, K0850, K0851, K0852, K0853, K0854, K0855, K0856, K0858, K0859, K0860, K0861, K0862, K0863, S5199, S9379, T1999,	
01/01/2019	Durable Medical Equipment	Added: PA required for the following codes: E1229, E1239, K0869-K0871, K0877, K0878, K0879, K0880, K0884 -K0886 K0890, K0891, K0898,	All UPHP Medicaid Product Lines
01/01/2019	Durable Medical Equipment	Added: PA required for the following codes: K0553, K0554	All Medicare Product Lines
01/01/2019	Durable Medical Equipment	Removed: PA not required for the following codes: E0301, E0302, E0303, E0304, E0371 E0373, E0277, E0372, E0193, K0003-K0005	All UPHP Product Lines
01/01/2019	Orthotics and Prosthetics	Added: PA required for code V2629	All UPHP Product Lines
01/01/2019	Orthotics and Prosthetics	Removed: PA not required for the following codes: L0462, L0636, L0637, L0638, L0639, L0640, L0650, L0651, L0810, L0820, L0830, L0859, L1310, L1680, L1685, L1720, L1730, L1846, L1860, L1945, L2000, L2005, L2020, L2030, L2038, L2108, L2126, L2134,	All Medicare Product Lines



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		L2136, L2525, L3674, L3765, L3766, L3900, L3901, L3961, L3967, L3971, L3973, L3975, L3976, L3977, L3978, L4000, L5400, L5420, L5585, L5614, L5639, L5643, L5649, L5651, L5681, L5683, L5705, L5706, L5722, L5780, L5781, L5782, L5795, L5814, L5826, L5840, L5848, L5856, L5857, L5858, L5859, L5930, L5960, L5961, L5964, L5966, L5968, L5973, L5987, L5988, L6026, L6055, L6205, L6310, L6320, L6360, L6370, L6380, L6382, L6384, L6580, L6582, L6584, L6586, L6588, L6590, L6621, L6624, L6638, L6648, L6696, L6697, L6707, L6709, L6712, L6714, L6715, L6880, L6882, L6900 L6905, L6910, L6920, L6925, L6930 L6940, L6945, L6950, L6955 L6960, L6965, L6970, L6975 L7007, L7008, L7009, L7040, L7045 L7170, L7180, L7181, L7185, L7186 L7190, L7191, L7259, L8035, L8040 L8040, L8041, L8041, L8041 L8042, L8042, L8042, L8043, L8043, L8043 L8044, L8044, L8044, L8045, L8045 L8045, L8046, L8046, L8046, L8047	
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		L8047,L8609,L8614,L8619,L8627 L8628,L8631,L8659,L8679,L8681 L8682,L8683,L8689,L8690,L8691 L8693	
01/01/2019	Orthotics and Prosthetics	Removed: PA not required for the following codes: L0112 L0464,L0480,L0482, L0484, L0486, L0632, L0634, L0700, L0710, L1000,L1001, L1005, L1200, L1300, L1690,L1700, L1710, L1755, L1844, L2034, L2036, L2037, L2128,L2627, L2628,L2861, L3160, L3808, L3891, L3904,L3927, L4631, L5010, L5020, L5050,L5060, L5100, L5105, L5150 L5160,L5200, L5210, L5220, L5230, L5250,L5270, L5280, L5301, L5312, L5321, L5331, L5341, L5500, L5505, L5510, L5520, L5530, L5535, L5540, L5560, L5570, L5580, L5590, L5595,L5600, L5610, L5611, L5613, L5616,L5700,L5701, L5702, L5703,L5707, L5724,L5726, L5728, L5822,L5824, L5828, L5830, L5840, L5845, L5979, L5980, L5981, L5990,L6000, L6010, L6020, L6050, L6100,L6110, L6120, L6130, L6200,	All UPHP Product Lines



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		L6250,L6300, L6350, L6400, L6450,L6500, L6550, L6570, L6646, L6693,L6694, L6695, L6696,L6697, L6698,L6706, L6707, L6708, L6709, L6713,L6721, L6722, L6881, L6883,L6884, L6885, L6935, L7186, L8510	
01/01/2019	Genetic and Molecular testing	Added: PA required for the following lab codes: 81162, 81201-81203, 81209,81211 81212, 81213, 81214-81217,81225 81226, 81228, 81229, 81251,81255 81288, 81290, 81291, 81292-81301, 81314-81319, 81321- 81323, 81324-81326, 81328 81330, 81334-81335, 81370-81383 81400-81408, 81410-81417,81422 81425-81427, 81490, 81493,81500 81503, 81507-81512, 81521, 81535,81536, 81538-81541, 81539 81545, 81551, 81599	All UPHP Medicare Product Lines
10/1/2018	In-network inpatient admissions/observation services	Notification required within 1 business day for NICU admissions. All other in-network inpatient admission/observation services do not require notification for UPHP	UPHP Medicaid, HMP, CSHCS only



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		Medicaid Product Lines.	
9/1/2018	Hearing Aids	Hearing Aids are a covered benefit for MI Health Link	MI Health Link
7/1/2018	Genetic and Molecular Testing	PA required for codes 81201-81203, 81209,81211, 81212, 81214-81217,81225, 81226, 81228, 81229, 81251, 81255, 81290, 81292-81301,81314-81319,81321-81323,81330,81370-81383,81400-81408, 81479,81521, 81535, 81536, 81539, 81599	UPHP Medicaid, HMP, CSHCS only