

Provider Bulletin

[rdate]

Prior authorization requirement changes	
Effective [Effective Date], prior authorization (PA) requirements will change for the following code(s).	Formatted: Font: Bold, Underline
The medical code(s) listed below will require PA by Healthy Blue for Healthy Louisiana members.	Formatted: Underline
Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services	Formatted: Font: Bold, Underline
guidelines, including definitions and specific contract provisions/exclusions take precedence over these	Tornatted. Forth. Bold, Orderline
PA rules and must be considered first when determining coverage. Non-compliance with new	Formatted: Underline
requirements may result in denied claims,	Formatted: Font: Bold, Underline
Acquirements may result in defined common	Tornatted. Forth. Bold, Orderline
Prior authorization requirements will be added for the following code(s):	Formatted: Font: Bold, Underline
• <u>B4164 — Parenteral nutrition solution; carbohydrates (dextrose), 50% or less (500 ml = 1 unit) -</u>	Formatted: Font: Bold, Underline
home mix	
• B4168 — Parenteral nutrition solution; amino acid, 3.5%, (500 ml = 1 unit) - home mix	Formatted: Font: Bold, Underline
• B4172 — Parenteral nutrition solution; amino acid, 5.5% through 7%, (500 ml = 1 unit) - home	Formatted: Font: Bold, Underline
mix	
• B4176 — Parenteral nutrition solution; amino acid, 7% through 8.5%, (500 ml = 1 unit) - home	Formatted: Font: Bold, Underline
mix	
• B4178 — Parenteral nutrition solution; amino acid, greater than 8.5%, (500 ml = 1 unit) - home	Formatted: Font: Bold, Underline
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• <u>B4180 — Parenteral nutrition solution; carbohydrates (dextrose), greater than 50% (500 ml = 1</u>	Formatted: Font: Bold, Underline
unit) - home mix	
• <u>B4185 — Parenteral nutrition solution, not otherwise specified, 10 grams lipids</u>	Formatted: Font: Bold, Underline
• <u>B4187 — Omegaven, 10 grams lipids</u>	Formatted: Font: Bold, Underline
B4189 — Parenteral nutrition solution; compounded amino acid and carbohydrates with	Formatted: Font: Bold, Underline
electrolytes, trace elements, and vitamins, including preparation, any strength, 10 to 51 grams of	Formatted: Font: Bold, Underline
protein - premix	
B4193 — Parenteral nutrition solution; compounded amino acid and carbohydrates with	Formatted: Font: Bold, Underline
electrolytes, trace elements, and vitamins, including preparation, any strength, 52 to 73 grams of	
protein - premix	
B4197 — Parenteral nutrition solution; compounded amino acid and carbohydrates with	Formatted: Font: Bold, Underline
electrolytes, trace elements, and vitamins, including preparation, any strength, 74 to 100 grams of	
protein - premix	
B4199 — Parenteral nutrition solution; compounded amino acid and carbohydrates with	Formatted: Font: Bold, Underline
electrolytes, trace elements, and vitamins, including preparation, any strength, over 100 grams of	
protein - premix	
• B4216 — Parenteral nutrition; additives (vitamins, trace elements, heparin, electrolytes) home mix	Formatted: Font: Bold, Underline
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per day 2 Page Page Page Page Page Page Page Page	Formattod: Font: Pold Underline
• B4220 — Parenteral nutrition supply kit; premix, per day	Formatted: Font: Bold, Underline
B4222 — Parenteral nutrition supply kit; home mix, per day	Formatted: Font: Bold, Underline
• <u>B4224 — Parenteral nutrition administration kit, per day</u>	Formatted: Font: Bold, Underline

^{*} Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue.

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https://provider.healthybluela.com
Healthy Blue is the trade name of Community Care Health Plan of Louisiana, Inc., an independent licensee of the Blue Cross and Blue Shield Association.
LAHB-CD-018218-23 [rdate]

Healthy Blue Medicaid Managed Care Prior authorization requirement changes effective [Effective Date] Page 2 of 3

 B5000 — Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, renal -Aminosyn-RF, NephrAmine, RenAmine - premix

 B5100 — Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, hepatic, HepatAmine – premix

- B5200 Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, stressbranch chain amino acids FreAmine-HBC premix
- B9004 Parenteral nutrition infusion pump, portable
- <u>B9006 Parenteral nutrition infusion pump, stationary</u>
- B9999 NOC for parenteral supplies
- S9364 Home infusion therapy, total parenteral nutrition (TPN); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem
- S9365 Home infusion therapy, total parenteral nutrition (TPN); one liter per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem
- S9366 Home infusion therapy, total parenteral nutrition (TPN); more than one liter but no
 more than two liters per day, administrative services, professional pharmacy services, care
 coordination, and all necessary supplies and equipment including standard TPN formula (lipids,
 specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded
 separately) per diem
- S9367 Home infusion therapy, total parenteral nutrition (TPN); more than two liters but no
 more than three liters per day, administrative services, professional pharmacy services, care
 coordination, and all necessary supplies and equipment including standard TPN formula (lipids,
 specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded
 separately) per diem
- S9368 Home infusion therapy, total parenteral nutrition (TPN); more than three liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem

To request PA, you may use one of the following methods:

- Web: Once logged in to [availity.com]*
- Fax:
 - o [888-822-5595 (Inpatient)
 - o 888-822-5658 (Outpatient)
- Phone: 844-521-6942]

Not all PA requirements are listed here. Detailed PA requirements are available to contracted providers on the provider website at https://provider.healthybluela.com, > Login or by accessing [availity.com].

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Healthy Blue Medicaid Managed Care Prior authorization requirement changes effective [Effective Date] Page 3 of 3

Providers who are unable to access [availity.com] may call our Provider Services at [844-521-6942] for assistance with PA requirements.

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