

Prior Authorization Updates April 2022

Cook Children's Health Plan has updated the following procedure codes (s) with an effective date of 05/01/2022. Providers may contact CCHPPriorAuthorizations@cookchildrens.org for with questions specific to authorizations. For additional questions please contact Cook Children's Health Plan Provider Support Services at 888-243-3312 or email CCHPPProviderRelations@cookchildrens.org.

Procedure Code	Code Description	Added, Terminated, Revised	Effective date of change	STAR	CHIP	STAR Kids
E1065	POWER ATTACHMENT (TO CONVERT ANY WHEELCHAIR TO MOTORIZED WHEELCHAIR, E.G., SOLO)	Terminated	1/1/2004	X	X	X
K0560	METACARPAL PHALANGEAL JOINT REPLACEMENT, TWO PIECES, METAL (E.G., STAINLESS STEEL OR COBALT CHROME), CERAMIC-LIKE MATERIAL (E.G., PYROCARBON), FOR SURGICAL IMPLANTATION (ALL SIZES, INCLUDES ENTIRE SYSTEM)	Terminated	1/1/2004	X	X	X
E0192	LOW PRESSURE AND POSITIONING EQUALIZATION PAD, FOR WHEELCHAIR	Terminated	1/1/2005	X	X	X
K0741	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL, INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING, FOR CLUSTER HEADACHES	Terminated	1/1/2013	X	X	X
Q4129	UNITE BIOMATRIX, PER SQ CM	Terminated	1/1/2017	X	X	X
C9028	INJECTION, INOTUZUMAB OZOGAMICIN, 0.1 MG	Terminated	1/1/2019	X	X	X
J9229	INJECTION, INOTUZUMAB OZOGAMICIN, 0.1 MG	Added	5/1/2022	X	X	X
C9049	INJECTION, TAGRAXOFUSP-ERZS, 10 MCG	Terminated	10/1/2019	X	X	X

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J9269	INJECTION, TAGRAXOFUSP-ERZS, 10 MCG	Added	5/1/2022	X	X	X
C9050	INJECTION, EMAPALUMAB-LZSG, 1 MG	Terminated	10/1/2019	X	X	X
J9210	INJECTION, EMAPALUMAB-LZSG, 1 MG	Added	5/1/2022	X	X	X
C9053	INJECTION, CRIZANLIZUMAB-TMCA, 1 MG	Terminated	7/1/2020	X	X	X
J0791	INJECTION, CRIZANLIZUMAB-TMCA, 1 MG	Added	5/1/2022	X	X	X
C9055	INJECTION, BREXANOLONE, 1 MG	Terminated	10/1/2020	X	X	X
J1632	INJECTION, BREXANOLONE, 1 MG	Added	5/1/2022	X	X	X
C9061	INJECTION, TEPROTUMUMAB-TRBW, 10 MG	Terminated	10/1/2020	X	X	X
J3241	INJECTION, TEPROTUMUMAB-TRBW, 10 MG	Added	5/1/2022	X	X	X
99201	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING. COUNSELING AND/OR COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS, OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE PATIENT'S AND/OR FAMILY'S NEEDS. USUALLY, THE PRESENTING PROBLEM(S) ARE SELF LIMITED OR MINOR. TYPICALLY, 10 MINUTES ARE SPENT FACE-TO-FACE WITH THE PATIENT AND/OR FAMILY.	Terminated	1/1/2021	X	X	X
C9071	INJECTION, VILTOLARSEN, 10 MG	Terminated	4/1/2021	X	X	X
J1427	INJECTION, VILTOLARSEN, 10 MG	Added	5/1/2022	X	X	X
C9078	INJECTION, TRILACICLIB, 1 MG	Terminated	10/1/2021	X	X	X
J1448	INJECTION, TRILACICLIB, 1 MG	Added	5/1/2022	X	X	X
C9082	INJECTION, DOSTARLIMAB-GXLY, 100 MG	Terminated	1/1/2022	X	X	X

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J9272	INJECTION, DOSTARLIMAB-GXLY, 100 MG	Added	5/1/2022	X	X	X
C9083	INJECTION, AMIVANTAMAB-VMJW, 10 MG	Terminated	1/1/2022	X	X	X
J9061	INJECTION, AMIVANTAMAB-VMJW, 10 MG	Added	5/1/2022	X	X	X