

CareOregon and CareOregon Advantage

No Authorization Required – CPT Code List



Revised October 1, 2024

Please note:

- CPT code changes occur annually and occasionally throughout each year.
- It is important that provider offices determine authorization requirements based on current and valid codes in effect at the time the service is being requested and provided.
- See Authorization Overview document for details regarding Care Oregon's relationship to some of Oregon's Coordinated Care Organizations.
- Provider contracts may have different requirements than below. Please refer to your contract in addition to the details below for accurate requirements.

Instructions

1. Use this code list in conjunction with the Authorization Guidelines based on the member's primary coverage; CareOregon Advantage (COA) or CareOregon OHP.
2. This list only applies when the services are performed in following settings:
a) office, **b)** ancillary, **c)** ASC for ASC approved procedures, and **d)** facility day patient/surgery.

OHP members - additional instructions

- Procedures with a "Yes" in the "MUST Pair Above the Line" column require the diagnosis and procedure code to pair above the line on OHA's prioritized list in order to be billed to a CareOregon Medicaid plan without an authorization.
- OHP's Prioritized List is maintained by OHA and applies to marked procedures being billed to a CareOregon Medicaid plan - Health Share of Oregon, Jackson Care Connect and Columbia Pacific CCO.
- As stated in the CareOregon Utilization Management Procedure Handbook, the following specialties must be contracted for OHP Payment (DOES NOT APPLY to Medicare primary members):
 - » Physical/Occupational Therapy
 - » Acupuncture or Chiropractic
 - » Speech & Hearing Therapy
 - » Vision Services
 - » Ophthalmology/Optometry

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
Anesthesia & Surgical CPT codes: 0001A - 69990		
0001A-0004A	No	
0011A-0013A	No	
0021A-0022A	No	
0031A	No	
0041A-0042A	No	
0019M	No	
0051A-0054A	No	
0064A	No	
0083A	No	
0094A	No	
0111A-0112A	No	
0171A-0174A	No	
0100T-0287T	No	
0295T-0299T	No	No prior authorization for COA only. PA is required for OHP members.
0301T-0311T	No	
0315T	No	
0317T	No	
0319T-0346T	No	
0362T	Yes	
0373T	No	
0575T-0577T	No	
0620T	No	
0623T-0626T	No	
0633T-0639T	No	
0715T	No	
0791T-0806T	No	
0809T-0810T	No	
0223U-0226U	No	0225U and 0226U is no prior authorization for COA only. PA is required for OHP members for these two codes.
0227U-0228U	No	
0240U-0241U	No	
0251U	No	
0323U	No	
0330U	No	
0352U-0354U	No	
0369U-0374U	No	
0381U-0386U	No	
0388U-0390U	No	
0393U-0396U	No	
0399U	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
0402U	No	
0404U	No	
0406U-0410U	No	
0412U-0414U	No	
0416U	No	
0418U	No	
0620T	No	
00100-00103	No	
00120-01999	No	If codes in this range are related to a hysterectomy or sterilization, a consent form will be required upon claim submission.
10004-10012	Yes	
10021-10022	No	
10035-10036	No	
10060-10180	Yes	
11000-11057	Yes	
11102-11107	No	
11200	Yes	
11201	Yes	
11300-11313	Yes	
11600-11772	Yes	
11960-11976	Yes	
11981-11983	Yes	
12001-13160	Yes	
15271-15276	No	
15278	Yes	
15778	No	
15853-15854	No	
17000-17315	Yes	
19000-19030	Yes	
19031-19080	No	
19081-19086	No	
19100-19109	No	Code 19105 is no authorization required for COA members. 19105 requires PA for OHP members.
19110-19120	Yes	
19121-19295	No	
19296-19298	Yes	
20005-20150	Yes	
20151-20199	No	
20200-20251	No	
20560-20561	No	
20600-20611	Yes	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
20650-20664	Yes	
20665-20679	No	
20680	Yes	
20696	No	
20697	Yes	No authorization is required for COA members.
20900	Yes	
21116	No	
21310-21497	Yes	
21501-21550	Yes	
21557-21600	Yes	
21610-21632	Yes	
21811-21825	Yes	
22010-22015	Yes	
22310-22328	Yes	
22856	Yes	
23065-23066	No	
23077-23220	Yes	
23333-23335	No	
23350	No	
23472	No	
23500-23700	Yes	
23930-23931	Yes	
24065-24066	No	
24077-24155	Yes	
24500-24685	Yes	
25000-25040	Yes	
25041-25066	No	
25077-25107	Yes	
25246	No	
25500-25695	Yes	
26010-26037	Yes	
26100-26110	No	
26600-26785	Yes	
26990-26991	Yes	
27040-27041	No	
27093-27096	No	
27200-27295	Yes	
27301-27303	Yes	
27323	No	
27369-27372	Yes	
27486	Yes	
27500-27598	Yes	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
27600-27612	Yes	
27613-27614	No	
27615-27616	Yes	
27645-27647	Yes	
27648	No	
27750-27889	Yes	
28001-28005	Yes	
28400-28825	Yes	
29000	No	
29001-29515	Yes	
29700-29750	Yes	
29805-29863	No	
29870	No	
29871-29899	Yes	
29900	No	
29901-29916	Yes	
30000-30020	No	
30901-30920	Yes	
31231-31235	No	
31500-31546	Yes	
31560-31571	Yes	
31575-31576	No	
31577-31578	Yes	
31579	No	
31592	No	
31615 - 31730	No	
32096-32098	No	
32408	Yes	
32505-32507	No	
32550-32557	Yes	
32601	No	
32604	No	
32606-32609	No	
32650-32656	No	
32658-32659	No	
32661-32701	No	
33016	No	
33017-33019	Yes	
33202-33249	Yes	
33262-33264	No	
33274-33288	Yes	
	Yes	
33340	No	
33361	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
33390-33391	No	
33509	No	
33620-33621	No	
33858	Yes	
33871	Yes	
33894-33897	No	
33900-33904	No	
33946-33969	No	
33984-33993	No	
35702-35703	Yes	
36000-36001	No	
36002	Yes	
36003-36009	No	
36010-36015	Yes	
36016-36099	No	
36100-36218	Yes	
36219-36244	No	
36245-36248	Yes	
36249-36254	No	
36255-36259	No	
36260-36262	Yes	
36400-36455	No	
36456-36466	Yes	
36510	Yes	
36555-36624	No	
36625-36660	Yes	
36800-36870	Yes	
36871-37183	No	
37184-37200	Yes	
37201-37210	No	
37211-37217	Yes	
37218-37253	No	
		These codes are covered under OHP and no authorization is required for services under Adaptive Behavior Assessments, Adaptive Behavior Treatment, and Exposure Adaptive Behavior Treatment With Protocol Modification. All other CPT Category II codes (fifth character of "F") and all other category III codes are NOT covered under OHP.
3751F-3752F	No	
37619	No	
38220-38222	No	
38300	Yes	
38500-38530	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
38571	No	
38900	No	
40490	No	
40800	Yes	No authorization is required for COA members. An auth is required for OHP members.
40808	No	
40809-40816	Yes	
40830-40831	Yes	
41019-41099	Yes	
41100-41108	No	
41250-41252	Yes	
41800-41806	Yes	
41807-41819	No	
41820-41850	Yes	
41851-41874	No	
42000-42100	No	
42180-42182	Yes	
42300-42320	Yes	
42700	Yes	
42826	No	
42961	No	
42975	No	
43180	No	
43191-43206	No	
43211 - 43278	No	
43282-43283	No	43282 does not require PA for COA members only. A prior authorization IS required for OHP members for this code.
43285	No	
43290-43291	No	
43497	No	
43752-43763	No	
44388-44397	No	
44401-44408	No	
44970	Yes	
45100	No	
45300-45393	No	
45398	No	
46600-46615	No	
46900-46924	Yes	
47000-47001	No	
47100	No	
47536	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
48400	No	
49013-49014	Yes	
49082-49180	No	
49320	No	
49327	No	
49400-49401	No	
49402-49436	Yes	
49437-49439	No	
49440-49465	Yes	
49623	No	
49652-49653	Yes	49652 does not require PA for COA members only. A prior authorization IS required for OHP members for this code.
50200	No	
50431	Yes	
50436-50437	Yes	
50551-50589	No	
50590	Yes	
50684-50690	No	
50951-50980	No	
50981-51019	No	
51020-51597	Yes	51597 is a hysterectomy code. While no auth is required, a sterilization consent form should be submitted with the claim.
51598-51698	No	
51700-51720	Yes	
51721-51798	No	
52000 - 52402	No	
52450 - 52649	Yes	52647 - 52648 require a sterilization consent form be submitted with the claim.
53600-53601	Yes	
53620-53661	Yes	
54050-54055	Yes	
54065 - 54100	Yes	
54500 - 54535	No	54150, 54160 – 54161 for circumcision is covered for OHP only up to 2 months old without a prior authorization in the outpatient setting.
54640-54650	Yes	
54670	Yes	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
55250	Yes	While no auth is required, a sterilization consent form should be submitted with the claim.
55300-55400	Yes	No authorization is required for COA members. These codes are excluded (not covered) for OHP.
55700-55706	No	
55867	No	
55875-55876	Yes	
55920	No	
56405-56440	Yes	
56501-56515	Yes	
56516-56606	No	
56820-56821	No	
57022-57023	Yes	
57024-57060	No	
57061-57065	Yes	
57066-57105	No	
57150-57180	Yes	
57400-57422	No	
57423-57452	Yes	
57453-57460	No	
57461	Yes	
57500-57504	No	
57505-57522	Yes	
57523-57529	No	
57530-57531	Yes	
57800	Yes	
57801-58119	No	
58120	Yes	
58150	Yes	While no auth is required, a sterilization consent form should be submitted with the claim.
58300-58340	No	
58558	No	
58565	Yes	No prior authorization required when completed in office for OHP, however a sterilization consent form should be submitted with the claim. Any other place of service or for COA members DOES require a PA.

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
58600-58615	Yes	While no auth is required, a sterilization consent form should be submitted with the claim.
58670-58673	Yes	While no auth is required, a sterilization consent form should be submitted with the claim.
59000-59515	Yes	
59610-59830	Yes	
59840-59857	Yes	
59866	No	
59870-59871	Yes	
59898	No	
60000	Yes	
60001-60198	No	
60200-60281	Yes	
60500-60650	Yes	
61070	Yes	
61781-61783	No	
61796-61800	Yes	
62267	No	
62270-62271	No	
62272-62273	Yes	
62284	No	
62290-62291	No	
62328	No	
62329	Yes	
62365-62370	Yes	
63620-63621	Yes	
63661-63664	Yes	
64566	Yes	
64568-64570	No	
64718-64721	Yes	
65270-65286	Yes	
66183	Yes	
66761-66762	Yes	
66820-66986	Yes	
67005-67040	Yes	
67220-67229	Yes	
67311-67340	Yes	
67810	No	
69000-69098	Yes	
69100-69105	No	
69200	No	
69210	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
69728-69730	No	
69990	No	
Radiology including Nuclear Medicine & Diagnostic Ultrasound CPT codes: 70010 - 79999		
70010-70332	No	
70350-70390	No	
70496-70498	No	
70544-70549	No	
70557-71130	No	
71275	No	
71271	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
71555-72120	No	
72159	No	
72160-72191	No	
72198-73140	No	
73206	No	
73225	No	
73226-73525	No	
73526	Yes	
73527-73528	No	
73529	Yes	
73530-73660	No	
73706	No	
73725-74022	No	
74174-74175	No	
74185-74251	No	
74263-74710	No	
74740-74775	No	
75571- 76145	No	
76380	No	
76496-77081	No	
77085-77086	No	
77090-77092	No	
77261-77384	Yes	
77385-77387	Yes	
77388-77768	No	
77778-78428	No	
78445-78458	No	
78466-78483	No	
78494-78607	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
78610-78808	No	
78999-79999	No	
Pathology & Laboratory CPT codes: 80047 - 89398		
80047-80076	No	
80143	Yes	
80150-80186	No	
80188-80210	No	
80220	No	
80299	No	
80305-80307	No	
80320-80413	No	
80414-80415	No	
80416-81099	No	
81206-81208	No	
81210	No	
81220-81224	No	
81240-81245	No	
81250-81251	No	
81255-81257	No	
81261-81264	No	
81267-81268	No	
81270	No	
81275	No	
81287-81288	No	
81292-81304	No	
81310	No	
81313-81319	No	
81321	No	
81327	No	
81329-81332	No	
81340-81342	No	
81370-81408	No	
81420	No	
81500-81506	No	
81507	No	No authorization is required for OHP members. A prior authorization IS required for COA members.
81508-81514	No	
81519	Yes	
81525-81527	Yes	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
81528	Yes	
81535-81540	Yes	
81545	Yes	
81560	No	
82000-82638	No	
82652-83887	No	
83915-86005	No	
86015	No	
86021-86327	No	
86329-86406	No	
86408-86409	No	No authorization is required for COA. A prior authorization IS required for OHP members.
86413	No	No authorization is required for COA. A prior authorization IS required for OHP members.
86430-86431	No	
86480	No	
86485-86768	No	These codes are not subject to Prioritized List. They do not require an above the line diagnosis or line pairing.
86771-87153	No	
87158-87563	No	
87580-88241	No	
88280-88334	No	
88346-88363	No	
88367-88368	No	
88371-88372	No	
88375	No	
88377	No	
88380-88737	No	
88738-88741	No	No authorization is required for COA. These codes are excluded by OHP.
88740-89240	No	
Medicine CPT codes: 90281-99199 & 99500-99607		
90281-90377	No	
90379 - 90384	No	Injectables do require a prior authorization for the drug. While 90378 does not require a PA for the service, the injectable drug itself should be submitted to pharmacy for a PA.

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
90380-90381	No	No prior authorization for members over age 60 only.
90384-90581	No	
90586	No	
90619-90735	No	
90738-90749	No	
90756	No	
90758-90759	No	
90785-90901	No	
90935- 91112	No	
91117 - 91133	No	
91200	No	
91299	No	
91300-91317	No	
92002-92083	No	While no prior authorization is required, vision coverage is defined by diagnosis. Please review the Provider UM Handbook and Member handbooks for vision benefits.
92225-92270	No	
92283-92504	No	
92511-92516	No	
92507	No	No auth required for COA members only. A prior authorization IS required for OHP members.
92511-92516	No	
92520 - 92524	No	
92531 - 92548	No	
92550-92597	No	
92610-92618	No	
92622 - 92623	No	
92626 - 92633		
92650-92653	No	
92920-93042	No	
93150 - 93153		
93224-93229	No	
93241-93248	No	
93264	No	
93268-93352	No	
93355	No	
93451-93642	No	
93650-93662	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
93668	Yes	No authorization is required for OHP. A prior authorization IS required for COA members.
93701-93790	No	
93793-94799	No	
95076-95079	No	
95249-95251	No	95249 does not require a prior authorization for COA members only. A prior authorization IS required for OHP members.
95700	No	No authorization is required for COA. A prior authorization IS required for OHP members.
95705-95707	No	
95711-95713	No	
95717-95718	No	
95782-96004	No	
96040	No	
96110	No	
96112	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
96125-96127	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
96130-96133	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
96136-96139	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
96156-96171	No	Back (spine) related diagnoses pairing to Guideline Note 56 require a PA
96202-96203	No	
96360-96377	No	
96379-96549	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
96573	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
96920-96921	No	No auth required for COA members only. A prior authorization IS required for OHP members for these codes.
97012	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
97032	No	
97112	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
97151-97152	No	No authorization is required for JCC and CPCCO only.
97161-97172	No	
97550 - 97552		
97597-97602	No	
97606	No	No auth required for COA members only. A prior authorization IS required for OHP members for this code.
97802-97804	No	
98925-98929	No	
98960-98972	No	
98978	No	
99000-99175	No	
99184	No	
99188	No	
99190-99480	No	
99484-99499	No	
99601-99602	No	
A - Codes		
A2001-A2010	No	
A2022	No	
A4206-A4209	No	
A4213-A4225	No	
A4244-A4247	No	
A4261-A4263	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
A4264	No	A4264 does not require a prior authorization, however a sterilization consent form is required with claim submission.
A4266-A4269	No	
A4300-A4334	No	
A4335	No	No prior authorization is required for most incontinence supplies, however quantity limits apply based on OAR 410-122-0630 under OHP.
A4336	No	
A4338-A4465	No	
A4470-A4550	No	
A4555-A4559	No	
A4561-A4565	No	
A4595	No	
A4602-A4620	No	
A4623-A4630	No	
A4635-A4638	No	
A4640-A4649	No	
A4653-A4670	No	
A4714-A4918	No	
A4927	No	No prior authorization is required for gloves, however quantity limits apply based on OAR 410-122-0630 under OHP.
A4928	No	
A5051-A5093	No	
A5102-A5200	No	
A5500	No	
A5512-A5513	No	
A6010-A6513	No	
A6590-A6591	No	
A7000-A7006	No	
A7010-A7018	No	
A7027-A7039	No	
A7044-A7527	No	
A9155	No	
A9500-A9512	No	
A9515-A9573	No	
A9575-A9591	No	
A9595	No	
A9597-A9600	No	
A9602-A9607	No	
A9697-A9698	No	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
A9700	No	
A9800	No	
C - Codes		
C1052	No	
C1062	No	
C1715-C1719	No	
C1747	No	
C1749	No	
C1769	No	
C1825	No	
C1830-C1830	No	
C1839-C1842	No	
C1874-C1877	No	
C1886	No	
C2617	No	
C2623	No	
C2625	No	
C2645	No	
C5271-C5278	No	
C7500-C7555	No	
C7900-C7902	No	
C8900-C8908	No	
C8921-C8924	No	
C8928-C8930	No	
C8931-C8936	No	
C9046	No	
C9057-C9059	No	
C9068	No	
C9087-C9089	No	
C9096	No	
C9113	No	
C9132	No	
C9143-C9145	No	
C9150	No	
C9153	No	
C9154	No	No prior authorization is required for COA only. OHP members require PA for these services. The injectable drug itself should be submitted to pharmacy for a PA.

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
C9156	No	
C9248	No	
C9250-C9260	No	
C9275	No	
C9285	No	
C9290	No	
C9356-C9369	No	
C9447	No	
C9460	No	
C9462-C9463	No	
C9482	No	
C9488	No	
C9507	No	
C9600-C9608	No	
C9733	No	
C9739-C9740	No	
C9754-C9756	No	
C9761	No	
C9768-C9769	No	
C9780	No	
C9788-C9791	No	
C9803	No	
C9898-C9899	No	
G - Codes		
G0008-G0148	Yes	
G0151-G0153	No	
G0162	No	
G0166-G0206	Yes	
G0237-G0248	Yes	
G0250-G0255	No	
G0258-G0280	No	Observation codes do not require a PA for stays 48 hours or less. If the stay is greater than 48 hours, an authorization for extended observation is necessary for claim processing. These are reviewed by the Census/BR team only.
G0288-G0423	No	Observation codes do not require a PA for stays 48 hours or less. If the stay is greater than 48 hours, an authorization for extended observation is necessary for claim processing. These are reviewed by the Census/BR team only.

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
G0425-G0451	Yes	
G0460-G0476	Yes	
G0480	No	
G0481-G0483	No	
G0490-G0514	Yes	
G0516-G0659	No	
G0913-G2066	No	
G2067-G2075	Yes	No prior authorization is required for COA only. OHP members require PA for these services. The injectable drug itself should be submitted to pharmacy for a PA.
G2076-G2081	Yes	
G2086-G2101	Yes	Observation codes do not require a PA for stays 48 hours or less. If the stay is greater than 48 hours, an authorization for extended observation is necessary for claim processing. These are reviewed by the Census/BR team only.
G2105-G2167	Yes	
G2169	Yes	
G2172-G2216	Yes	
G2250-G2252	Yes	
G3002-G3003	Yes	
G4000-G4038	Yes	
G6001-G8698	Yes	
G8708-G9005	Yes	
G9006	Yes	
G9007-G9893	Yes	
G9895-G9999	No	
H - Codes		
H0001-H0006	Yes	No authorization is required for JCC and CPCCO only.
H0015-H0016	Yes	No authorization is required for JCC and CPCCO only.
H0020	Yes	No authorization is required for JCC and CPCCO only.
H0023	Yes	
H0031-H0034	Yes	No authorization is required for JCC and CPCCO only.
H0036	Yes	
H0038	Yes	

Procedure Code	Must Pair Above the Line*	Limitations/Special Instructions
H0039	Yes	No authorization is required for JCC and CPCCO only.
H0045	Yes	No authorization is required for JCC and CPCCO only.
H0048	Yes	No authorization is required for JCC and CPCCO only.
H2000	No	
H2010-H2011	Yes	
H2014	Yes	
H2021	Yes	
H2023	Yes	
H2027	Yes	
H2032-H2033	Yes	No authorization is required for JCC and CPCCO only.
H2040-H2041	No	
T - Codes		
T1001	No	
T1006	Yes	No authorization is required for JCC and CPCCO only.
T1013	Yes	No authorization is required for JCC and CPCCO only.
T1016	Yes	
T1023	No	No authorization is required for JCC and CPCCO only.
T1032-T1033	No	
T1502	Yes	No authorization is required for JCC and CPCCO only.
T2042	No	
T4521-T4544	No	

Changes summary

Month/Year	Code	Changes
December 2023	All code update	No Authorization Lists have been updated in full with improved search/formatting.
January 2024	Corrections to rows	No significant coverage changes, minor edits for numerical order. Adjustment to comments related to OHP exclusions.
February 2024	75571	Code remains no auth required, however it is an excluded code for OHP.
	G0283	Added comment to highlight OHP excludes this service from coverage.
	58300 and 58301	Removed COA excluded comment.
April 2024	G0234-G0423	Added comment around observation reviews.
	Corrections	Box on page 1, 3 rd bullet clarified to “As stated in the CareOregon Utilization Management Procedure Handbook, the following specialties must be contracted for OHP Payment (DOES NOT APPLY to Medicare primary members): <ul style="list-style-type: none"> - Physical/Occupational Therapy - Speech & Hearing Therapy - Acupuncture - Chiropractic - Vision Services (Ophthalmology/Optometry)
	Corrections	92002-92083 does not require line pairing. Entry for 36219 – 36244 corrected for typo.
May 2024	55875-55876	Corrected to ensure 55874 is not included. 55874 is excluded for OHP. This code requires a PA.
	70551-70555	Corrected to reflect that these codes require a PA for both OHP and COA.
	New COA	Codes added for COA to not require PA: 43282, 49652, 71271, 92507, 95249, 95700, 96112, 96116, 96125, 96130-96133, 96136-96139, 96573, 96920-96921, 97012, 97112 and 97606.
	New COA and OHP	Codes added for COA and OHP to not require PA: 11900, 22856, 23472, 27486, 38571, 42826, 49320, 49653, 58150 and 64566.
June 2024	New codes added	Codes for all lines of business that no longer require PA: 20939 81329 92015 96040 96127 96377
	11600-11772	Added no auth codes for range and deleted multiple entries.
	31500-31546	Added no auth codes for range and deleted multiple entries.

	31627	Remove comment as not excluded and no authorization is required.
	77385-77387	Remove comment as no longer excluded for COA.
	75571	Correction as code was on multiple lines with incorrect comments.
	78466-78483	Added no auth codes for range.
	81420	No longer required PA for COA.
	99601-99602	Removed comment as no auth is required for COA.
July 2024	31627	Comment correct as this code is not excluded.
	92531-92548	Correction to previous entry 92548-92531 for transposed numbers: 92531-92548
	77778-78428	Corrected to not require line pairing.
	T codes and U codes	Several adjusted to not require line pairing.
	43260-43278	Corrected this section to listed code range and removed 43271-43751 due to error.
	45300-45393	Corrected section 45300-45393 to listed code range for clarification.
	96127	Added to no auth required for COA.
August 2024	Removal of comments related to "excluded"	Updated comments fields to remove excluded notes and allow billing rules to apply for clarity.
	23472, G0480	Removed pairing requirement
	31615 - 31730	Removed lines and grouped for codes that do not require PA.
	40800, 95700	Correction to comment that auth is required for OHP
	Corrections	43191 – 43206, 43211 – 43278, 52000 – 52402, 52450 – 52649, 52450 – 54535, 57800 – 58340, 74740 – 76145, 90935 – 93153 These code ranges were adjusted to reflect additional CPTs that do not require a prior authorization. Some lines removed for clarity.
	81329, 96040 97550 - 97552	Added as no auth is required.
	96116	Removed as this code does require a PA for all lines of business.
	96156 - 96171	Comment added to reflect back pain diagnoses do require a diagnosis and pairing code.
	96360 - 96377	Added 96377 to the code range as no auth required.

October 2024	52000-52402	Removing comment about OHP exclusion.
	Codes added as no auth required all LOB	32601 32604 32650-32656 32658-32659 32661-32665 33275-33288 33361 47536 50431 93355 97032 G0151- G0153 G0162
	Clarifications	Clarified code range 57800-58120 G0258-G0280 G0288- G0423 Deleted COA auth requirement for C8921-C8930 Removed code G0283