WyoBLUE ADVANTAGE

An independent licensee of the Blue Cross Blue Shield Association

Prior Authorization List

Part B

For Part B drug prior authorization requirements, see document titled "List of Part B Drugs Requiring Prior Authorization" on the Provider Resources webpage.

Inpatient

The following inpatient services require prior authorization:

- Acute inpatient admissions
- 30 day bundling readmissions
- Skilled nursing facility admissions (SNF)
- Inpatient rehabilitation admissions
- Long term acute care admissions (LTAC)

Please note: Per CMS, expedited requests should only be requested when the health care provider believes that waiting for a decision under the standard review time frame may seriously jeopardize the life or health of the patient or the patient's ability to regain maximum function. Please be mindful of this definition when submitting your requests so that we can prioritize and process all requests appropriately.

WyoBlue Advantage follows CMS coverage guidance when reviewing codes when available. CMS coverage documents, including National Coverage Determinations and Local Coverage Determinations, can be found by using the CMS Medicare Coverage Database. WyoBlue also uses InterQual® clinical criteria and medical policies. InterQual® releases new criteria updates throughout the year so criteria may frequently change. For more information, please review the Provider Resources webpage.

Prior authorization is not a guarantee of payment. Benefits are based on eligibility at the time of service and are subject to applicable contract terms.

Revision History

Date of revision	Revision
2/1/2023	Added codes effective 4/1/2023: 19318, 22842, 22845,61850, 61860, 61863, 61867, 61885, 61886, 63042, 63045, 63047, 64553, 64555, 64561, 64566, 64568, 64575, 64580, 64581, 64582, 64590, 66821, 66982, 81162, 81201, 81292, 81293, 81295, 81298, 81317, 81321, 81404, 81405, 81433, 81539, 81541, 81546, A0430, A0431, A0435, A0436, L8682, L8683
4/1/2023	Removed codes: 93241, 93242, 93243, 93244, 93245, 93246, 93247, 93248
9/17/2024	Removed codes: A0430, A0431, A0435, A0436
01/01/2025	Removed all outpatient codes
Last revised: 01/01/2025	