

## Important Update: Orthotic Codes that Require Authorization

Alameda Alliance for Health (Alliance) values our dedicated provider partner community. We have an important update we would like to share with you.

Our provider partner satisfaction is a top priority. We are working to improve our Utilization Management and Claims processes to help ensure proper claim payment to our provider partners, and alignment of authorized services. To accomplish this goal, we are reviewing each benefit and we will be sending you updates, as the information is ready to share.

This communication provides an update on orthotic codes that require prior authorization (PA).

This will affect claims with the date(s) of service starting Monday, January 9, 2023, and onward. Enclosed with this notice is a code-specific list of orthotic codes that shows which codes require PA. The list can be found on our website at www.alamedaalliance.org/providers/authorizations. Please refer to our website for the most up-to-date information about codes or benefits that require authorization.

In addition to the codes, our claims system will also validate that claims received match the authorization when an authorization is required.

The following items will be validated:

- Member name
- Provider NPI
- CPT and HCPC coding
- Date(s) of service are within the authorized range
- Number of units and/or visits
- Place of service matches the site of care submitted on the authorization request form

This update has been validated based on current publishable/billable coding for 2022 and was confirmed to be covered by the California Department of Health Care Services (DHCS).

If you have any questions, please call the Alliance Provider Services Department at **1.510.747.4510**.

Thank you for your continued partnership and for providing high-quality care to our members and the community.

Questions? Please call the Alliance Pharmacy Department Monday – Friday, 7:30 am – 5 pm Phone Number: **1.510.747.4541** 

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www.alamedaalliance.org

## ALAMEDA ALLIANCE FOR HEALTH REFERRAL AND PRIOR AUTHORIZATION (PA) PROCEDURE CODES FOR ORTHOTICS

## Before services are provided, please check:

Member Eligibility • Medical Group • Benefit Coverage • Contracted Provider • Medi-Cal Excluded Code Questions? Please call the Alliance Provider Services Department at **1.510.747.4510** 

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Orthotics	A5500	DM ONLY CSTM PREP SHOE MX DNS INSRT	Alameda Alliance for Health or Delegate
	A5501	DM ONLY CSTM PREP SHOE MOLD PTS FT	Alameda Alliance for Health or Delegate
	A5503	DM ONLY MOD SHOE/CSTM ROLLER/ROCKER	Alameda Alliance for Health or Delegate
	A5504	DM ONLY MOD SHOE/CSTM W/WEDGE SHOE	Alameda Alliance for Health or Delegate
	A5505	DM ONLY MOD SHOE/CSTM W/MT BAR SHOE	Alameda Alliance for Health or Delegate
	A5506	DM ONLY MOD SHOE/CSTM OFF SET HEEL	Alameda Alliance for Health or Delegate
	A5507	DM ONLY NOS MOD SHOE/CSTM MOLD SHOE	Alameda Alliance for Health or Delegate
	A5512	FOR DIAB ONLY MX DNSITY INSRT PRFAB	Alameda Alliance for Health or Delegate
	A5513	DIA ONLY MX DN INSRT CSTM MLD P F E	Alameda Alliance for Health or Delegate
	A6504	COMPRS BRN GARMNT GLOV WRST CSTM	Alameda Alliance for Health or Delegate
	A6508	COMPRS BRN GARMNT FT THI LEN CSTM	Alameda Alliance for Health or Delegate
	A6545	GRD CMPRS WRP NONELST BK 30-50 MMHG	Alameda Alliance for Health or Delegate
	A6549	GRADIENT COMP STOCKING/SLEEVE NOS	Alameda Alliance for Health or Delegate
	K0672	ADD LOW EXT ORTHOSIS REPL EACH	Alameda Alliance for Health or Delegate
	L2005	KAFO ANY MATL AUTO RLS ANK JNT CSTM	Alameda Alliance for Health or Delegate
	L2006	KAF DVC ANY MATERIAL ADJ CUSTOM FAB	Alameda Alliance for Health or Delegate
	L2232	ADD LOW EXT ORTHOS ROCKR BOTTM CSTM	Alameda Alliance for Health or Delegate
	L2492	ADD KNEE LIFT LOOP DROP LOCK RING	Alameda Alliance for Health or Delegate
	L3000	FT INSRT MOLD UCB TYPE BERKLY SHELL	Alameda Alliance for Health or Delegate
	L3160	FOOT ADJUSTBL SHOE-STYLD PSTN DEVC	Alameda Alliance for Health or Delegate
	S1040	CRANIAL REMOLD ORTHOT PED CUST FAB	Alameda Alliance for Health or Delegate