



DATE: December 31<sup>st</sup>, 2024  
 TO: All Sendero Health Plans Network Providers  
 RE: Updated Preauthorization Policies Effective 3/1/2025

Dear Sendero Physicians and Providers,

Sendero is sensitive to balancing the administrative burdens of preauthorization with the managed care responsibility to promote clinically appropriate, cost-effective services for our members. To this end, we perform an ongoing review of the criteria of services requiring preauthorization. Our aim is to limit this list to services that have a significant benefit to pre-review from a member risk, clinical appropriateness, and/or cost perspective.

Below is a summary of the changes to the Sendero preauthorization list, **effective 03/01/2025**. The full list of preauthorized healthcare service codes is found at <https://senderohealth.com/preauthorizationsearch/>.

**Healthcare Services That are Added to the Preauthorization Requirement**

HCPCS codes that fall within the existing preauthorization categories									
Drugs administered in Office, Outpatient, or Home setting / Injectable drugs > \$500			Cell and Gene Therapies and Services	Potentially Investigational Services					
J7999	J1749	Q5136	0477U	15011	0482U	0508U	0925T	J0175	
C9169	J2777	Q5139	38225	15012	0485U	0509U	0926T	Q4334	
C9170	J2802	Q5140	38226	15013	0486U	0510U	0927T	Q4335	
C9172	J3392	Q5141	38227	15014	0487U	0511U	0928T	Q4336	
C9173	J7514	Q5142	38228	15015	0488U	0512U	0929T	Q4337	
G0533	J7601	Q5143		15016	0489U	0513U	0930T	Q4338	
J0139	J9026	Q5144		15017	0490U	0514U	0931T	Q4339	
J0870	J9028	Q5145		15018	0491U	0515U	0932T	Q4340	
J0901	J9076	Q5146		51020	0492U	0516U	0933T	Q4341	
J1307	J9292	Q9996	0901T	66683	0493U	0517U	0934T	Q4342	
J1414	Q0155	Q9997	0913T	81195	0494U	0518U	0935T	Q4343	
J1552	Q5135	Q9998	0914T	82233	0495U	0519U	0936T	Q4344	
				82234	0496U	0520U	0941T	Q4345	
<b>Durable Medical Equipment &amp; Prosthetics</b>				83884	0497U	0906T	0942T	Q4346	
C9807	E1804	E1823	G0555	84393	0498U	0907T	0943T	Q4347	
E0683	E1807	E1826	L1006	84394	0499U	0915T	0944T	Q4348	
E0721	E1808	E1827	L1653	87513	0501U	0917T	0947T	Q4349	
E0737	E1813	E1828	L1821	87594	0503U	0919T	A2027	Q4350	
E0743	E1814	E1829	L8721	92137	0504U	0921T	A2028	Q4351	
E1803	E1822	E3200		0476U	0505U	0922T	A2029	Q4352	
				0479U	0506U	0923T	E0767	Q4353	
				0480U	0507U	0924T			
<b>Implantable Pumps and Devices</b>		<b>Joint surgeries</b>	<b>Prosthetics</b>	<b>Genetic Testing</b>			<b>Pain Management Procedures</b>		
0908T		C8003	L8720	0478U	81432	64466	64468	64473	
				0481U	81558	64467	64469	64474	
<b>Lab Testing</b>		<b>Long-term external ECG monitoring</b>		0500U					
83516		0937T	0939T						
		0938T	0940T						

**Additional Notes:**

- The *Preauthorization List and Guidance* document pertains to health care services requiring both notification to Sendero and those requiring preauthorization. This document is also found at [www.senderohealth.com/providers](http://www.senderohealth.com/providers) on the preauthorization tab.
- All covered services must be medically necessary, whether they require preauthorization. As such, they may be subject to periodic retrospective reviews for medical necessity.
- Sendero publishes an interactive healthcare service code lookup tool containing the specific healthcare service codes requiring preauthorization, as well as the criteria used to determine medical necessity or benefit coverage at <https://senderohealth.com/preauthorizationsearch/> and linked from the Preauthorizations tab at [www.senderohealth.com](http://www.senderohealth.com).