# **PROVIDER***Update*

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# **Prior Authorization Required for Wound Care Visits Over 12**

# Services need prior authorization as of October 1, 2022

Prior authorization (PA) is a condition of payment for many services. This update has information about changes to prior authorization (PA) requirements for wound care. Changes start on October 1, 2022, and are listed in the table on page 2.

Prior authorization requests are initiated by the physician and submitted for approval prior to giving specific services.

#### Verify eligibility and benefits

Be sure to verify eligibility and benefits prior to giving services for all members. Payment, regardless of authorization, depends on the member's eligibility at the time service is rendered. You can check eligibility through the provider portal at provider.wellcare.com/California.

#### **Additional information**

If you have questions regarding the information contained in this update, contact Provider Services at 866-999-3945.

#### THIS UPDATE APPLIES TO MEDICARE PROVIDERS:

- Physicians
- Independent Practice Associations

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- Hospitals
- Ancillary Providers

### PROVIDER SERVICES

866-999-3945

**PROVIDER PORTAL** provider.wellcare.com/california

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Service category	Change	Services	Procedure codes
Wound Care	Remove PA	Excision of pressure ulcers	15920, 15922, 15931, 15933, 15934, 15935, 15936, 15937, 15940, 15941, 15944, 15945, 15946, 15950, 15951, 15952, 15953, 15956, 15958
		Burn debridement and dressing	16000, 16020, 16025, 16030, 16035, 16036
		Ablative laser treatment, electromagnetic therapy	0491T, 0492T, G0329
	Add PA	Non-selective debridement, negative pressure wound treatment, low-frequency ultrasound	97602, 97605, 97606, 97607, 97608, 97610
	Add PA after 12 visits per calendar year	Wound Debridement	11004, 11005, 11008, 11011, 11012, 11042, 11043, 11044, 11045, 11046, 11047

## Changes to PA requirements for wound care, effective October 1 2022