SCAN VILLAGE HEALTH PRIOR AUTHORIZATION REQUIREMENTS

Effective: July 1, 2025
Last Revised: January 1, 2026

This list contains inpatient, outpatient, and Part B medication prior authorization requirements for members enrolled with VillageHealth (HMO-POS) Plan in California. (Refer to the member's insurance card to confirm the plan in which member is enrolled):

For members NOT enrolled in SCAN VillageHealth (HMO-POS) Plan, please refer to SCAN Medicare Advantage Prior Authorization Requirements or contact the member's assigned medical group for applicable prior authorization requirements.

Providers should use this list when checking for services, items, and Part B medications which require prior authorization for members in the SCAN VillageHealth (HMO_POS) Plan. **For Prior Authorization Requirements for **Part D** medications, refer to: SCAN 2026 Part D Prior Authorization Criteria.*

For your information:

- This guideline is meant to inform, not direct treatment decisions.
- Prior authorization is not required for emergent, urgent, or stabilization care.
- SCAN only uses prior authorization for one or more the following purposes:
  - To confirm the presence of diagnoses or other medical criteria that are the basis for coverage determinations for the specific item or service
  - For basic benefits, to ensure an item or service is medically necessary based on established standards
  - For supplemental benefits, to ensure that the furnishing of a service or benefit is clinically appropriate
- If you receive an approval for a service or supply, it is for that service or supply ONLY.
- Services that do not require preauthorization are still subject to the coverage terms of the member's plan.
- SCAN reviews this prior authorization list not less than annually. Updates are typically made throughout the year as deemed necessary. Services on the prior authorization list may change at SCAN's discretion.
- Codes newly added to the list will be in **bold red** font with an *.

Category	CPT/HCPCS Code(s)
ALL Inpatient Admissions, to include Skilled Nursing Facility (SNF), Acute Rehab Unit (ARU), and Long-Term Acute Care (LTAC) Stays	As applicable
Durable Medical Equipment (DME): Air & Gel Mattresses	E0277, E0372, E0377
Durable Medical Equipment (DME): Bone Growth Stimulators	E0746, E0747, E0748, E0749, E0760
Durable Medical Equipment (DME): Power Operated Vehicle(s), Wheelchairs, and Accessories	E1050, E1070, E1084, E1087, E1100, E1110, E1161, E1170, E1171, E1172, E1180, E1190, E1195, E1200, E1222, E1224, E1227, E1228, E1229, E1230, E1231, E1232, E1233, E1234, E1235, E1236, E1237, E1238, E1239, E1280, E1295, E1296, E2310, E2311, E2321, K0800, K0801, K0802, K0806, K0808, K0812, K0813, K0814, K0815, K0816, K0820, K0821, K0822, K0823, K0824, K0825, K0826, K0827, K0828, K0829, K0830, K0831, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0843, K0848, K0849, K0851, K0852, K0853, K0854, K0855, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0891, K0898, K0899
Drugs Administered Other Than Oral Method	J0138, J0139, J0175, J0184, J0209, J0211, J0217, J0391, J0402, J0576, J0577, J0578, J0650, J0651, J0652, J0666, J0687, J0688, J0750, J0751, J0799, J0870, J0872, J0873, J0901, J0911, J1105, J1202, J1203, J1304, J1307, J1412, J1413, J1434, J1596, J1597, J1598, J1748, J1749, J1939, J2002, J2003, J2004, J2183, J2246, J2252, J2253, J2277, J2290, J2373, J2404, J2468, J2470, J2471, J2472, J2508, J2601, J2679, J2799, J2801, J2802, J3263, J3392, J3393, J3394, J3401, J3424, J3425, J7330, J7355, J7601, J9028, J9052, M0224, Q5132, Q5133, Q5134, Q5135, Q5136, Q5137, Q5138, Q5139, Q5140, Q5141, Q5142, Q5143, Q5144, Q5145, Q5146, Q9996, Q9997, Q9998
Oral Medications	J0601, J0602, J0603, J0605, J0607, J0608, J0609, J0615
Chimeric Antigen Receptor T-cell Therapy (CAR-T)	0537T, 0538T, 0539T, 0540T, Q2041, Q2042, Q2053, Q2054, Q2055, Q2056
Injectable Medications: Other Vaccines	90593, 90695
Prophylaxis Supplying Fees	Q0516, Q0517, Q0518, Q0519, Q0520

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B)	**Abraxane** J9258, J9264 **Adzynma** J7171 **Adcetris** J9042 **Adriamycin** J9000 **Adrucil** J9190 **Akynzeo, injection** J1454 **Akynzeo, oral** J8655 **Alimta** J9305 **Aliqopa** J9057 **Alkeran** J9245 **Aloxi** J2469 **Alymsys** ***Q5126** **Anktiva** ***J9028** **Aprepitant** J8501 **Aranesp Albumin Free** J0881 **Arranon** J9261 **Arsenic Trioxide** J9017 **Arzerra** J9302 **Asparlas** J9118 **Avastin** C9257, J9035 **Avyxa** J9292 **Azacitidine** J9025 **Azedra** ***A9590**
Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Balfaxar**

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	C1959, J7165 **Bavencio** J9023 **Beleodaq** J9032 **Bendamustine** J9036 **Bendeka** J9034 **Beqvez** ***J1414** **Besponsa** J9229 **Bicnu** J9050 **Bivigam** J1556 **Bleo 15K** J9040 **Blincyto** J9039 **Bortezomib** J9044 **Busulfan** J0594 **Camptosar** J9206 **Carboplatin** J9045 **Carimune Nanofiltered** J1566 **Cesamet** J8650 **Cinvanti** J0185 **Cisplatin** J9060 **Cladribine** J9065 **Clofarabine** J9027 **Columvi** J9286 **Cosentyx** ***J3247,** C9166 **Cosmegen** J9120

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Cuvitru** J1555 **Cyclophosphamide** J9070, J9072, J9073, J9074, J9075, J9076 **Cyramza** J9308 **Cytarabine** J9100 **Dacarbazine** J9130 **Dacogen** J0894 **Darzalex** J9145 **Daunorubicin Hcl** J9150 **Daxxify** ***J0589,** C9160 **Dexrazoxane** J1190 **Docetaxel** J9171 **Docivyx** J9172 **Doxil** Q2050 **Eligard** J9217 **Ellence** J9178 **Eltrexfio** ***J1323** **Elzonris** J9269 **Emend** J1453 **Empliciti** J9176 **Epkinly** J9321 **Epogen** J0885 **Erbitux** J9055 **Erwinaze** J9019 **Ethyol**

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	J0207 **Etopophos** J9181 **Eylea HD** ***J0177** **Faslodex** J9395 **Firmagon** J9155 **Flebogamma DIF** J1572 **Floxuridine** J9200 **Fludarabine Phosphate** J9185 **Fluorouracil** J9190 **Fludeoxyyglucose f18** A9609 **Folotyn** J930 **Fulphila** Q5108 **Fusilev** J0641 **Gammagard Liquid** J1569 **Gammaked** J1561 **Gammaplex** J1557 **Gazyva** J9301 **Gemcitabine** J9201 **Golimumab** J1602 **Granix** J1447 **Halaven** J9179 **Hemady** J8541 **Hepzato** J9248 **Herceptin** J9355

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Herceptin Hylecta** J9356 **Hizentra** J1559 **Hycamtin** J9351 **Idamycin Pfs** J9211 **Ifex** J9208 **Imdelltra** ***J9026** **Imfinzi** J9173 **Immune Globulin** 90283, 90284, J1599 **Infugem** J9199 **Intron A** J9214 **Istodax (Overfill)** J9315 **Ivra** J9249 **Ixempra** J9207 **Izervay** ***J2782** **Jevtana** J9043 **Jylamvo** J8611 **Kadcyla** J9354 **Kanjinti** Q5117 **Kepivance** J2425 **Keytruda** J9271 **Khapzory** C9043, J0642 **Kyprolis** J9047 **Lartruvo** J9285 **Leucovorin Calcium**

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	J0640 **Leukine** J2820 **Leuprolide Acetate** J9218 **Libtayo** J9119 **Lipodox 50** Q2049 **Lumisight** A9615, C9171 **Lumoxiti** J9313 **Lupron Depot** J9217 **Lutathera** A9513 **Methotrexate** J9255 **Methotrexate Sodium** J9260 **Myhibbin** J7514 **Mitomycin** J9280 **Mitoxantrone Hcl** J9293 **Mustargen** J9230 **Mvasi** Q5107 **Mylotarg** J9203 **Navelbine** J9390 **Neulasta** J2505, ***J2506** **Neupogen** J1442 **Nipent** J9268 **Nivestym** Q5110 **Nplate** J2796 **Nypozi** ***Q5148,** C9173

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Octagam** J1568 **Octreotide Acetate** J2354 **Ogivri** ***J2267,** Q5114 **Omvoh** C9168 **Oncaspar** J9266 **Ondansetron Hcl** S0119 **Onivyde** J9205 **Opdivo** J9299 **Oxaliplatin** J9263 **Paclitaxel** J9267 **Pamidronate Disodium** J2430 **Peg-Intron** S0148 **Pemgarda** Q0224 **Pemrydi RTU** J9324 **Perjeta** J9306 **Photofrin** J9600 **Polivy** J9309 **Portrazza** J9295 **Posluma** A9608 **Poteligeo** J9204 **Privigen** J1459 **Procrit** J0885 **Proleukin** J9015 **Prolia**

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	J0897 **Provenge** Q2043 **Retacrit** Q5106 **Rituxan** J9312 **Rituxan Hycela** J9311 **Rystiggo** J9333 **Ryznueta** J9361 **Sandostatin LAR** J2353 **Somatuline Depot** J1930 **Supprelin La** J9226 **Sustol** J1627 **Sylatron** C9399, J9999 **Sylvant** J2860 **Syndros** Q0155 **Synribo** J9262 **Talvey** ***J3055** **Tecentriq** J9022 **Temsirolimus** J9330 **Tepadina** J9340, ***J9342** **Testopel** S0189 **Tevimbra** J9329 **Tice Bcg** J9030 **Treanda** J9033 **Trelstar Mixject** J3315

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Truxima** Q5115 **Udenyca** Q5111 **Unituxin** ***J1246** **Valrubicin** J9357 **Vantas** J9225 **Varubi** J2797 **Vectibix** J9303 **Vegzelma** ***Q5129** **Velcade** J9041 **Veopoz** J9376 **Vinblastine Sulfate** J9360 **Vincasar** J9370 **Vyvgart Hytrulo** J9334 **Vyxeos** J9153 **Xatmap** J8612 **Xeloda** J8522 **Xenoview** A9610 **Xgeva** J0897 **Xofigo** A9606 **Ycanth** ***J7354** **Yervoy** J9228 **Yondelis** J9352 **Zaltrap** J9400 **Zanosar**

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	J9320 **Zarxio** Q5101 **Zevalin** A9543 ***Zirabev** Q5118 **Zoladex** J9202 **Zoledronic Acid** J3489 **Adakveo®** J0791 **Aduhelm™** J0172 **Amvuttra™** J0225 **Botulinim Toxins** J0585, J0586, J0587, J0588 **Crysvita®** J0584 **Enjaymo®** J1302 **Entyvio™** J3380 **EvkeezaTM** J1305 **Fylnetra®** Q5130 **Givlaari®** J0223 **Hemgenix®** J1411 **Immune Globulins (IVIG, SCIG)** 90283, 90284, J1459, J1551, J1552, J1554, J1555, J1556, J1557, J1558, J1559, J1561, J1566, J1568, J1569, J1572, J1575, J1599 **Injectable Medications – Unclassified** C9399, J3490, J3590 **Korsuva®** J0879 **Krystexxa®** J2507 **Leqembi®** J0174 **Leqvio®** J1306

Chemotherapy Agents, Supportive, and Symptom Management Drugs (Part B) (cont.)	**Luxturna™** J3398 **Nexviazyme®** J0219 **Ocrevus™** J2350 **Onpattro™** J0222 **Orencia™** J0129 **OxlumoTM** J0224 **Prolia®** J0897 **Radicava®** J1301 **Reblozyl®** J0896 **Rolvedon®** J1449 **Ryplazim®** J2998 **Saphnelo™** J0491 **Scenesse®** J7352 **Skyrizi®** J2327 **Soliris** J1300 **Spevigo®** J1747 **SpinrazaTM** **J**2326 **Stimufend®** Q5127 **Tepezza®** J3241 **Tezspire™** J2356 **Diagnositic Radiopharmaceuticals** ***A4641** **Therapeutic Radiopharmaceuticals** A9513, A9590, A9606, A9607, A9699 **Ultomiris™** J1303 **Uplizna®**

	J1823 **Vabysmo®** J2777 **Vyvgart™** J9332 **Zolgensma®** J3399 **Bone Density Agents** J3111, J0897 **Colony-Stimulating Factors** J1442, J1447, Q5108, Q5110, Q5111, Q5122, Q5125 **Erythropoiesis-Stimulating Agents** J0885 **Hyaluronic Acid Polymers (FDA approved as medical devices)** J7320, J7321, J7322, J7323, J7324, J7326, J7327, J7329, J7331, J7332 **Immunomodulators** J1745, Q5104 **Intravenous Iron Products** J1437, J1439 **Rituximab** J9311, J9312, Q5123 **Vascular Endothelial Growth Factor (VEGF) Inhibitors** J0178, J0179, J2777, J2778, J2779, ***Q5118,** Q5124, ***Q5126,** Q5128, ***Q5129**