



Important Prior Authorization Updates

(Effective Apr. 1, 2026)

As part of our ongoing work to improve the prior authorization (PA) process for both providers and members, Ambetter from Peach State Health Plan wants to share some important updates to our PA requirements. Our goal is to reduce administrative burden, simplify submission and approval processes, and facilitate timely access to appropriate, high-quality care.

Code change details can be found below. These changes may include:

- Removing PA requirements based on criticality of review and clinical need.
- Creating a more uniform set of prior authorization requirements across our markets and lines of businesses, including adding and changing some PA requirements, to simplify processes, reduce confusion for providers, and support future efforts to expand real-time responses to requests.

If you have questions about specific prior authorization codes or how these changes affect your practice, please reach out to your local Provider Engagement representative.

Service Category	PA Rule	Services	Procedure codes
Behavioral Health	PA Required	Treatment Services	H0017
DME Services	PA Required	Diabetic Drugs And Supplies	A9276, A9277
	No PA Required for PAR providers	Diabetic Drugs And Supplies Wheelchairs	A9279 K0004
Drug Codes	PA Required	Injections	J0887
Genetic Analysis	No PA Required for PAR providers	Genetic Testing	81252
Pain Management	PA Required	Surgery-Nervous System	64495
Physical Medicine	No PA Required for PAR providers	Orthotic & Prosthetic	L5652
Surgery Procedures	PA Required	Surgery-Cardiovascular System	37799
		Surgery-Musculoskeletal System	25111, 29848