

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E0470	Respiratory assist device, bi-level pressure capability, without backup rate
Medicaid	TN	E0601	Continuous positive airway pressure (cpap) device
Medicaid	TN	E0562	Humidifier, heated, used with positive airway pressure device
Medicaid	TN	E0471	Respiratory assist device, bi-level pressure capability, with back-up rate
Medicaid	TN	73706	Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed
Medicaid	TN	20555	Placement of needles or catheters into muscle and/or soft tissue for subsequent interstitial radioelement application (a
Medicaid	TN	70492	Ct Scan, Neck Tissue; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	70486	Ct Scan, Maxillofacial Area; W/O Contrast Matl
Medicaid	TN	70487	Ct Scan, Maxillofacial Area; W/Contrast Matl(S)
Medicaid	TN	70490	Ct Scan, Soft Tissue Neck; W/O Contrast Matl
Medicaid	TN	70482	Ct Scan, Orbit/Sella/Posterior Fossa/ Outer, Middle, Inner Ear; W/O Contrast, Then W/Contrast
Medicaid	TN	70491	Ct Scan, Soft Tissue Neck; W/Contrast Matl(S)
Medicaid	TN	70488	Ct Scan, Maxillofacial Area; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	70480	Ct Scan, Orbit/Sella/Posterior Fossa/Outer, Middle, Inner Ear; W/O Contrast
Medicaid	TN	70481	Ct Scan, Orbit/Sella/Posterior Fossa/ Outer, Middle, Inner Ear; W/Contrast
Medicaid	TN	70450	Ct Scan, Head/Brain; W/O Contrast Matl
Medicaid	TN	70460	Ct Scan, Head/Brain; W/Contrast Matl(S)
Medicaid	TN	70336	Mri, Temporomandibular Joints
Medicaid	TN	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)
Medicaid	TN	71260	Ct Scan, Thorax; W/Contrast Matl(S)
Medicaid	TN	71270	Ct Scan, Thorax; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	71250	Ct Scan, Thorax; W/O Contrast Matl
Medicaid	TN	70552	Mri, Brain; W/Contrast
Medicaid	TN	70549	Mra, Neck; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Sequences
Medicaid	TN	70551	Mri, Brain; W/O Contrast
Medicaid	TN	70544	Mra, Head; W/O Contrast Matl(S)
Medicaid	TN	70548	Mra, Neck; W/Contrast Matl(S)
Medicaid	TN	70547	Mra, Neck; W/O Contrast Matl(S)
Medicaid	TN	70546	Mra, Head; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Sequences
Medicaid	TN	70545	Mra, Head; W/Contrast Matl(S)
Medicaid	TN	70542	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; with contrast material(s)
Medicaid	TN	70543	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast ma
Medicaid	TN	70540	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)

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Updated : 2/11/2026

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Medicaid	TN	70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing
Medicaid	TN	72131	Computed tomography, lumbar spine; without contrast material
Medicaid	TN	72130	Computed tomography, thoracic spine; without contrast material, followed by contrast material(s) and further sections
Medicaid	TN	72127	Computed tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections
Medicaid	TN	72129	Computed tomography, thoracic spine; with contrast material
Medicaid	TN	71555	Mra, Chest (Exclude Myocardium), W/Wo Contrast Matl(S)
Medicaid	TN	71552	Mri, Chest; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Sequences
Medicaid	TN	72126	Computed tomography, cervical spine; with contrast material
Medicaid	TN	72125	Computed tomography, cervical spine; without contrast material
Medicaid	TN	71550	Mri, Chest; W/O Contrast Matl(S)
Medicaid	TN	72157	Mri, Spine W/O Contrast, Then W/Contrast; Thoracic
Medicaid	TN	72156	Mri, Spine W/O Contrast, Then W/Contrast; Cervical
Medicaid	TN	72149	Mri, Lumbar Spine; W/Contrast
Medicaid	TN	72147	Mri, Thoracic Spine; W/Contrast
Medicaid	TN	72146	Mri, Thoracic Spine; W/O Contrast
Medicaid	TN	72141	Mri, Cervical Spine; W/O Contrast
Medicaid	TN	72132	Computed tomography, lumbar spine; with contrast material
Medicaid	TN	72197	Mri, Pelvis; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Sequences
Medicaid	TN	72196	Mri, Pelvis; W/Contrast Matl(S)
Medicaid	TN	72193	Ct Scan, Pelvis; W/Contrast
Medicaid	TN	72192	Ct Scan, Pelvis; W/O Contrast
Medicaid	TN	72195	Mri, Pelvis; W/O Contrast Matl(S)
Medicaid	TN	72191	Computed tomographic angiography, pelvis, with contrast material(s), including noncontrast images, if performed, and ima
Medicaid	TN	72159	Mra, Spine W/Wo Contrast
Medicaid	TN	73701	Ct Scan, Lower Extremity; W/Contrast
Medicaid	TN	73700	Ct Scan, Lower Extremity; W/O Contrast
Medicaid	TN	73223	Mri, Any Joint Of Upper Extremity; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Sequ
Medicaid	TN	73222	Mri, Any Joint, Upper Extremity; W/Contrast Matl(S)
Medicaid	TN	73220	Mri, Upper Extremity, Other Than Joint; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Sequenc
Medicaid	TN	73218	Mri, Upper Extremity, Other Than Joint; W/O Contrast Matl(S)
Medicaid	TN	73206	Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed
Medicaid	TN	73202	Ct Scan, Upper Extremity; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	73201	Ct Scan, Upper Extremity; W/Contrast
Medicaid	TN	73200	Ct Scan, Upper Extremity; W/O Contrast
Medicaid	TN	74261	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material
Medicaid	TN	74182	Mri, Abdomen; W/Contrast Matl(S)

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Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	74183	Mri, Abdomen; W/O Contrast Matl(S) Followed By Contrast Matl(S) & Further Sequences
Medicaid	TN	74181	Mri, Abdomen; W/O Contrast Matl(S)
Medicaid	TN	74178	Computed tomography, abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions
Medicaid	TN	74176	Computed tomography, abdomen and pelvis; without contrast material
Medicaid	TN	74177	Computed tomography, abdomen and pelvis; with contrast material(s)
Medicaid	TN	74174	Computed Tomographic Angiography, Abdomen And Pelvis, With Contrast Material(S), Including Noncontrast Images, If Performed, And Image Postprocessing
Medicaid	TN	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and im
Medicaid	TN	74170	Ct Scan, Abdomen; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	74160	Computed tomography, abdomen; with contrast material(s)
Medicaid	TN	73721	Mri, Any Joint, Lower Extremity; W/O Contrast Matl
Medicaid	TN	73725	Mra, Lower Extremity, W/Wo Contrast
Medicaid	TN	73723	Mri, Any Joint, Lower Extremity; W/O Contrast Matl(S), Followed By Contrast Matl(S) & Further Seq
Medicaid	TN	73720	Mri, Lower Extremity, Other Than Joint; W/O Contrast Matl(S), Followed Contrast Matl(S) & Furthr Seq
Medicaid	TN	73719	Mri, Lower Extremity Other Than Joint; W/Contrast Matl(S)
Medicaid	TN	73702	Ct Scan, Lower Extremity; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	77078	Computed tomography, bone mineral density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)
Medicaid	TN	73718	Mri, Lower Extremity Other Than Joint; W/O Contrast Matl(S)
Medicaid	TN	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral
Medicaid	TN	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral
Medicaid	TN	77046	Magnetic resonance imaging, breast, without contrast material; unilateral
Medicaid	TN	76965	Us Guided, Interstitial Radioelement Application
Medicaid	TN	75635	Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast materi
Medicaid	TN	75580	Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, wit
Medicaid	TN	75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of
Medicaid	TN	75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, inc

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Line of Business	State	Procedure Code	Description
Medicaid	TN	75563	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast materi
Medicaid	TN	75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D ima
Medicaid	TN	75561	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast materi
Medicaid	TN	75557	Cardiac magnetic resonance imaging for morphology and function without contrast material;
Medicaid	TN	75559	Cardiac magnetic resonance imaging for morphology and function without contrast material; with stress imaging
Medicaid	TN	74263	Computed tomographic (CT) colonography, screening, including image postprocessing
Medicaid	TN	74712	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single of first gestation
Medicaid	TN	77522	Proton Treatment Delivery; Simple W/Compensation
Medicaid	TN	77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed
Medicaid	TN	77318	Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)
Medicaid	TN	77338	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT
Medicaid	TN	77301	Intensity Modulated Radiotherapy Plan W/Dose Volume Histograms
Medicaid	TN	77084	Magnetic resonance (eg, proton) imaging, bone marrow blood supply
Medicaid	TN	78451	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall mo
Medicaid	TN	78433	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan
Medicaid	TN	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan
Medicaid	TN	78453	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall mo
Medicaid	TN	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan
Medicaid	TN	77790	Supervision, Handling, Loading, Radiation Source
Medicaid	TN	77772	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels

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Medicaid	TN	77771	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels
Medicaid	TN	77770	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel
Medicaid	TN	77525	Proton Treatment Delivery; Complex
Medicaid	TN	78494	Cardiac Blood Pool Imaging, Gated Equilibrium, Rest, Spect, & Ejection Fraction W/Wo Quantification
Medicaid	TN	78491	Myocardial Pet; Single Study, Rest/Stress
Medicaid	TN	78492	Myocardial Pet; Multiple Studies, Rest &/Or Stress
Medicaid	TN	78483	Cardiac Blood Pool Imaging, Planar, 1st Pass; Mult Studies, Rest & Stress & Eject Fractn W/Wo Quant
Medicaid	TN	78473	Cardiac Blood Pool Imaging, Gated Equilibrium; Planar, Multiple Studies, Rest/Stress
Medicaid	TN	78481	Cardiac Blood Pool Imaging, Planar, 1st Pass; Single Study & Ejection Fraction W/Wo Quantification
Medicaid	TN	78472	Cardiac Blood Pool Imaging, Gated Equilibrium; Planar, Single Study, Rest/Stress
Medicaid	TN	78468	Myocardial Imaging, Infarct Avid, Planar; W/Ejection Fraction, 1st Pass Technique
Medicaid	TN	78469	Myocardial Imaging, Infarct Avid, Planar; Tomographic Spect W/Wo Quantification
Medicaid	TN	78466	Myocardial Imaging, Infarct Avid, Planar; Qualitative/Quantitative
Medicaid	TN	78459	Myocardial Imaging, Positron Emission Tomography (Pet), Metabolic Evaluation
Medicaid	TN	78454	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall mo
Medicaid	TN	93315	Echocardiography, Transesophageal, Congenital Anomalies; W/Probe, Image, Intepretation & Report
Medicaid	TN	93316	Echocardiography, Transesophageal, Congenital Anomalies; Transesophageal Probe Placement Only
Medicaid	TN	93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional
Medicaid	TN	93317	Echocardiography, Transesophageal, Congenital Anomalies; Image, Interpretation & Report
Medicaid	TN	93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acq
Medicaid	TN	93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement
Medicaid	TN	93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including

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Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	93978	Duplex Scan, Aorta, Inferior Vena Cava, Iliac Vasculature/Bypass Grafts; Complete Study
Medicaid	TN	93979	Duplex Scan, Aorta, Inferior Vena Cava, Iliac Vasculature/Bypass Grafts; Unilat/Limited
Medicaid	TN	93924	Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, (ie, bidirectional Doppler waveform or volume plethysmography recording and analysis at rest with ankle/brachial indices immediately after and at timed intervals following performance of a standardized protocol on a motorized treadmill plus recording of time of onset of claudication or other symptoms, maximal walking time, and time to recovery) complete bilateral study
Medicaid	TN	93882	Duplex Scan, Extracranial Arteries; Unilat/Limited Study
Medicaid	TN	93880	Duplex Scan, Extracranial Arteries; Complete Bilat Study
Medicaid	TN	93922	Limited bilateral noninvasive physiologic studies of upper or lower extremity arteries, (eg, for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus bidirectional, Doppler waveform recording and analysis at 1-2 levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus volume plethysmography at 1-2 levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries with, transcutaneous oxygen tension measurement at 1-2 levels)
Medicaid	TN	93923	Complete bilateral noninvasive physiologic studies of upper or lower extremity arteries, 3 or more levels (eg, for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental blood pressure measurements with bidirectional Doppler waveform recording and analysis, at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental volume plethysmography at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental transcutaneous oxygen tension measurements at 3 or more levels), or single level study with provocative functional maneuvers (eg, measurements with postural provocative tests, or measurements with reactive hyperemia)
Medicaid	TN	A7045	Repl exhalation port for PAP
Medicaid	TN	A7046	Water chamber for humidifier, used with positive airway pressure device, replacement, each
Medicaid	TN	A7039	Filter, Non Disposable, Used With Positive Airway Pressure Device
Medicaid	TN	A7038	Filter, Disposable, Used With Positive Airway Pressure Device
Medicaid	TN	A7032	Cushion for use on nasal mask interface, replacement only, each
Medicaid	TN	A7031	Face Mask Interface, Replacement For Full Face Mask, Each
Medicaid	TN	A7029	Nasal pillows for combination oral/nasal mask, replacement only, pair
Medicaid	TN	A7036	Chinstrap Used With Positive Airway Pressure Device
Medicaid	TN	A7037	Tubing Used With Positive Airway Pressure Device
Medicaid	TN	A7035	Headgear Used With Positive Airway Pressure Device

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	A7028	Oral cushion for combination oral/nasal mask, replacement only, each
Medicaid	TN	A7027	Combination oral/nasal mask, used with continuous positive airway pressure
Medicaid	TN	A4604	Tubing with integrated heating element for use with positive airway pressure device
Medicaid	TN	Q3001	Brachytherapy Radioelements
Medicaid	TN	G0400	Home sleep test (HST) with type IV portable monitor, unattended; minimum of 3 channels
Medicaid	TN	S8030	Scleral application of tantalum ring(s) for localization of lesions for proton beam therapy
Medicaid	TN	95807	Sleep Study, Attended
Medicaid	TN	95783	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist
Medicaid	TN	95801	Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (eg, by airflow or peripheral arterial tone)
Medicaid	TN	95805	Multiple Sleep Latency Test, Multiple Trails
Medicaid	TN	95800	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (eg, by airflow or peripheral arterial tone), and sleep time
Medicaid	TN	95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist
Medicaid	TN	95808	Polysomnography; any age, sleep staging with 1-3 additional parameters of sleep, attended by a technologist
Medicaid	TN	95806	Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory
Medicaid	TN	95811	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist
Medicaid	TN	95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist
Medicaid	TN	92972	Percutaneous transluminal coronary lithotripsy (List separately in addition to code for primary procedure)
Medicaid	TN	70555	Magnetic resonance imaging, brain, functional MRI; requiring physician or psychologist administration of entire neurofun

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Line of Business	State	Procedure Code	Description
Medicaid	TN	78816	Positron emission tomography (PET) produces thin slice images of the body that can be reassembled into three-dimensional representations by detecting positron-emitting radionuclides from a radiopharmaceutical introduced into the body. Computed tomography (CT) directs multiple narrow beams of x-rays around a body structure to produce thin, cross-sectional views of anatomical layers (or slices) of the body. The PET scan is highly sensitive to metabolic activity of the tumor while CT provides a detailed internal picture of the size, shape, and location of the tumor. PET, alone, has a definite limitation with respect to spatial resolution and physiological uptake of the radiopharmaceutical tracer, in some areas, can be underestimated or misinterpreted without accurate, anatomical correlations. Scanners that concurrently utilize PET with CT imaging correct for this limitation of PET, by fusing the data for precise anatomical location together with highly sensitive metabolic imaging. Report 78814 for concurrently acquired PET/CT imaging of a limited area, such as the head and neck alone; 78815 for imaging from the skull base to the mid-thigh; and 78816 for whole body scanning.
Medicaid	TN	78815	Positron emission tomography (PET) produces thin slice images of the body that can be reassembled into three-dimensional representations by detecting positron-emitting radionuclides from a radiopharmaceutical introduced into the body. Computed tomography (CT) directs multiple narrow beams of x-rays around a body structure to produce thin, cross-sectional views of anatomical layers (or slices) of the body. The PET scan is highly sensitive to metabolic activity of the tumor while CT provides a detailed internal picture of the size, shape, and location of the tumor. PET, alone, has a definite limitation with respect to spatial resolution and physiological uptake of the radiopharmaceutical tracer, in some areas, can be underestimated or misinterpreted without accurate, anatomical correlations. Scanners that concurrently utilize PET with CT imaging correct for this limitation of PET, by fusing the data for precise anatomical location together with highly sensitive metabolic imaging. Report 78814 for concurrently acquired PET/CT imaging of a limited area, such as the head and neck alone; 78815 for imaging from the skull base to the mid-thigh; and 78816 for whole body scanning
Medicaid	TN	78813	Positron emission tomography (PET) imaging; whole body
Medicaid	TN	78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)
Medicaid	TN	78609	Brain Imaging, Positron Emission Tomography (Pet); Perfusion Evaluation
Medicaid	TN	76390	Mr Spectroscopy
Medicaid	TN	78812	Positron emission tomography (PET) imaging; skull base to mid-thigh
Medicaid	TN	32701	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment
Medicaid	TN	19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial rad

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube and button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes imaging guidance
Medicaid	TN	57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy
Medicaid	TN	58346	Insertion, Heyman Capsules, Clinical Brachytherapy
Medicaid	TN	63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separat
Medicaid	TN	63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion
Medicaid	TN	77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, en
Medicaid	TN	77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consist
Medicaid	TN	77762	Intracavitary Radiation Source Application; Intermediate
Medicaid	TN	77763	Intracavitary Radiation Source Application; Complex
Medicaid	TN	77435	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image g
Medicaid	TN	77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)
Medicaid	TN	77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)
Medicaid	TN	93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography
Medicaid	TN	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed
Medicaid	TN	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography
Medicaid	TN	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation;

## List of items and service that require Prior Authorization

Updated : 2/11/2026

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Medicaid	TN	93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization
Medicaid	TN	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization
Medicaid	TN	31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of catheter(s) for intr
Medicaid	TN	41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transn
Medicaid	TN	57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy
Medicaid	TN	78608	Brain Imaging, Positron Emission Tomography (Pet); Metabolic Evaluation
Medicaid	TN	G0399	Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/airflow,
Medicaid	TN	78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan
Medicaid	TN	93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, dur
Medicaid	TN	70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing
Medicaid	TN	72133	Computed tomography, lumbar spine; without contrast material, followed by contrast material(s) and further sections
Medicaid	TN	72198	Mra, Pelvis, W/Wo Contrast
Medicaid	TN	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium
Medicaid	TN	77047	Magnetic resonance imaging, breast, without contrast material; bilateral
Medicaid	TN	74262	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including
Medicaid	TN	73722	Mri, Any Joint, Lower Extremity; W/Contrast Matl(S)
Medicaid	TN	77317	Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)
Medicaid	TN	19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial rad

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography
Medicaid	TN	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed
Medicaid	TN	55874	Transperineal placement of biodegradable material, peri-prostatic, single or multiple injection(s), including image guidance, when performed
Medicaid	TN	A7034	Nasal Interface (Mask Or Cannula Type) Used With Positive Airway Press
Medicaid	TN	G0339	Robot lin-radsurg com, first
Medicaid	TN	G0340	Robt lin-radsurg fractx 2-5
Medicaid	TN	73221	Mri, Any Joint, Upper Extremity; W/O Contrast Matl(S)
Medicaid	TN	73225	Mra, Upper Extremity, W/Wo Contrast
Medicaid	TN	78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability);
Medicaid	TN	77520	Proton Treatment Delivery; Simple W/O Compensation
Medicaid	TN	77523	Proton Treatment Delivery; Intermediate
Medicaid	TN	70470	Ct Scan, Head/Brain; W/O Contrast, Then W/Contrast
Medicaid	TN	72148	Mri, Lumbar Spine; W/O Contrast
Medicaid	TN	72142	Mri, Cervical Spine; W/Contrast
Medicaid	TN	73219	Mri, Upper Extremity, Other Than Joint; W/Contrast Matl(S)
Medicaid	TN	70554	Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part m
Medicaid	TN	77761	Intracavitary Radiation Source Application; Simple
Medicaid	TN	77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consist
Medicaid	TN	77778	Interstitial Radioelement Application; Complex

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	78814	Positron emission tomography (PET) produces thin slice images of the body that can be reassembled into three-dimensional representations by detecting positron-emitting radionuclides from a radiopharmaceutical introduced into the body. These radionuclides must be produced in a cyclotron or generator that can bombard chemicals with neutrons to produce unstable, short-lived radioisotopes, such as carbon-11, nitrogen-13, and oxygen-15. These can be readily incorporated into common and important, biological body compounds for administration. Data from this kind of imaging yields metabolic or biochemical function information depending on the type of molecule tagged. In PET tumor imaging, information about the tumor's glucose and oxygen utilization is obtained, which reveals the tumor's behavior compared to normal tissue or benign tumors. Report 78811 for PET imaging of a limited area such as the chest alone; 78812 for imaging from the skull base to the mid-thigh; and 78813 for imaging of the whole body.
Medicaid	TN	A7033	Pillow for use on nasal cannula type interface, replacement only, pair
Medicaid	TN	A7044	Oral Interface Used With Positive Airway Pressure Device, Each
Medicaid	TN	A7030	Full Face Mask Used With Positive Airway Pressure Device, Each
Medicaid	TN	G0398	Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart r
Medicaid	TN	78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall mo
Medicaid	TN	70553	Mri, Brain; W/O Contrast, Then W/Contrast & Further Sequences
Medicaid	TN	71551	Mri, Chest; W/Contrast Mat(S)
Medicaid	TN	72128	Computed tomography, thoracic spine; without contrast material
Medicaid	TN	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing
Medicaid	TN	72158	Mri, Spine W/O Contrast, Then W/Contrast; Lumbar
Medicaid	TN	74150	Ct Scan, Abdomen; W/O Contrast
Medicaid	TN	72194	Ct Scan, Pelvis; W/O Contrast, Then W/Contrast & Further Sections
Medicaid	TN	77316	Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)
Medicaid	TN	74185	Mra, Abdomen, W/Wo Contrast
Medicaid	TN	61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (Li
Medicaid	TN	77370	Special Medical Radiation Physics Consultation
Medicaid	TN	61800	Application of stereotactic headframe for stereotactic radiosurgery (List separately in addition to code for primary procedure)
Medicaid	TN	61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (Lis
Medicaid	TN	61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion
Medicaid	TN	61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81445	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, NRAS, MET, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed
Medicaid	TN	81176	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg, exon 12)
Medicaid	TN	81175	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence
Medicaid	TN	81166	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
Medicaid	TN	81167	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
Medicaid	TN	81165	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis
Medicaid	TN	81120	IDH1 (isocitrate dehydrogenase 1 [NADP+], soluble) (eg, glioma), common variants (eg, R132H, R132C)
Medicaid	TN	81121	IDH2 (isocitrate dehydrogenase 2 [NADP+], mitochondrial) (eg, glioma), common variants (eg, R140W, R172M)
Medicaid	TN	81206	Bcr/Abl1 (T(9;22)) (Eg, Chronic Myelogenous Leukemia) Translocation Analysis; Major Breakpoint, Qualitative Or Quantitative
Medicaid	TN	81208	Bcr/Abl1 (T(9;22)) (Eg, Chronic Myelogenous Leukemia) Translocation Analysis; Other Breakpoint, Qualitative Or Quantitative
Medicaid	TN	81207	Bcr/Abl1 (T(9;22)) (Eg, Chronic Myelogenous Leukemia) Translocation Analysis; Minor Breakpoint, Qualitative Or Quantitative
Medicaid	TN	81202	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; known familial variants
Medicaid	TN	81203	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants
Medicaid	TN	81201	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; full gene sequence
Medicaid	TN	81193	NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis
Medicaid	TN	81194	NTRK (neurotrophic-tropomyosin receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis
Medicaid	TN	81192	NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis
Medicaid	TN	81191	NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis
Medicaid	TN	81235	EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81237	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large B-cell lymphoma) gene analysis, common variant(s) (eg, codon 646)
Medicaid	TN	81236	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence
Medicaid	TN	81218	CEBPA (CCAAT/enhancer binding protein [C/EBP], alpha) (eg, acute myeloid leukemia), gene analysis, full gene sequence
Medicaid	TN	81219	CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9
Medicaid	TN	81217	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant
Medicaid	TN	81216	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis
Medicaid	TN	81215	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant
Medicaid	TN	81212	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants
Medicaid	TN	81210	Braf (V-Raf Murine Sarcoma Viral Oncogene Homolog B1) (Eg, Colon Cancer), Gene Analysis, V600E Variant
Medicaid	TN	81270	Jak2 (Janus Kinase 2) (Eg, Myeloproliferative Disorder) Gene Analysis, P.Val617Phe (V617F) Variant
Medicaid	TN	81272	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [GIST], acute myeloid leukemia, melanoma), gene analysis, targeted sequence analysis (eg, exons 8, 11, 13, 17, 18)
Medicaid	TN	81273	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, D816 variant(s)
Medicaid	TN	81245	Flt3 (Fms-Related Tyrosine Kinase 3) (Eg, Acute Myeloid Leukemia), Gene Analysis, Internal Tandem Duplication (Itd) Variants (Ie, Exons 14, 15)
Medicaid	TN	81246	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836)
Medicaid	TN	81300	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81320	PLCG2 (phospholipase C gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, R665W, S707F, L845F)
Medicaid	TN	81319	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81321	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis
Medicaid	TN	81317	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81314	PDGFRA (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastrointestinal stromal tumor [GIST]), gene analysis, targeted sequence analysis (eg, exons 12, 18)
Medicaid	TN	81310	Npm1 (Nucleophosmin) (Eg, Acute Myeloid Leukemia) Gene Analysis, Exon 12 Variants
Medicaid	TN	81309	PIK3CA (phosphatidylinositol-4, 5-biphosphate 3-kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9,
Medicaid	TN	81302	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Full Sequence Analysis
Medicaid	TN	81298	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis
Medicaid	TN	81297	Msh2 (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81296	Msh2 (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants
Medicaid	TN	81295	Msh2 (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis
Medicaid	TN	81294	Mlh1 (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81292	Mlh1 (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis
Medicaid	TN	81293	Mlh1 (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants
Medicaid	TN	81279	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)
Medicaid	TN	81275	Kras (V-Ki-Ras2 Kirsten Rat Sarcoma Viral Oncogene) (Eg, Carcinoma) Gene Analysis, Variants In Codons 12 And 13
Medicaid	TN	81276	KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146)
Medicaid	TN	81325	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis
Medicaid	TN	81326	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; known familial variant
Medicaid	TN	81324	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81323	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant
Medicaid	TN	81413	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A
Medicaid	TN	81322	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant
Medicaid	TN	81410	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBN1, TGFBR1, TGFBR2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK
Medicaid	TN	81416	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure)
Medicaid	TN	81411	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/deletion analysis panel, must include analyses for TGFBR1, TGFBR2, MYH11, and COL3A1
Medicaid	TN	81353	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant
Medicaid	TN	81360	ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs)
Medicaid	TN	81334	RUNX1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy), gene analysis, targeted sequence analysis (eg, exons 3-8)
Medicaid	TN	81347	SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F, R625C, R625L)
Medicaid	TN	81338	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R)
Medicaid	TN	81440	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCS1L, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP
Medicaid	TN	81442	Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MAP2K1, MAP2K2, NRAS, PTPN11, RAF1, RIT1, SHOC2, and SOS1

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81431	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analyses for STRC and DFNB1 deletions in GJB2 and GJB6 genes
Medicaid	TN	81439	Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PKP2, TTN)
Medicaid	TN	81437	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL
Medicaid	TN	81435	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis); genomic sequence analysis panel, must include sequencing of at least 10 genes, including APC, BMPR1A, CDH1, MLH1, MSH2, MSH6, MUTYH, PTEN, SMAD4, and STK11
Medicaid	TN	81434	Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RP1, RP2, RPE65, RPGR, and USH2A
Medicaid	TN	81432	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 10 genes, always including BRCA1, BRCA2, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53
Medicaid	TN	81427	Genome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome)
Medicaid	TN	81430	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3, USH1C, USH1G, USH2A, and WFS1
Medicaid	TN	81426	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)
Medicaid	TN	81417	Exome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome)
Medicaid	TN	81419	Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBP1, SYNGAP1, TCF4, TPP1, TSC1, TSC2, and ZEB2
Medicaid	TN	81425	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81415	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis
Medicaid	TN	81414	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication/deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1
Medicaid	TN	81546	Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)
Medicaid	TN	81522	Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported
Medicaid	TN	81519	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes, utilizing formalin-fixed paraffin embedded tissue, algorithm reported as recurrence score
Medicaid	TN	81493	Coronary artery disease, mRNA, gene expression profiling by real-time RT-PCR of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score
Medicaid	TN	81521	Oncology (breast), mRNA, microarray gene expression profiling of 70 content genes and 465 housekeeping genes, utilizing fresh frozen or formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk of distant metastasis
Medicaid	TN	81520	Oncology (breast), mRNA gene expression profiling by hybrid capture of 58 genes (50 content and 8 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence risk score
Medicaid	TN	81455	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm, DNA analysis, and RNA analysis when performed, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NPM1, NRAS, MET, NOTCH1, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed
Medicaid	TN	81471	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); duplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2
Medicaid	TN	81451	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, 5-50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NOTCH1, NPM1,
Medicaid	TN	81450	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KRAS, KIT, MLL, NRAS, NPM1, NOTCH1), interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81449	Targeted genomic sequence analysis panel, solid organ neoplasm, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, MET, NRAS, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET),
Medicaid	TN	81448	Hereditary peripheral neuropathies (eg, Charcot-Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1)
Medicaid	TN	81554	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])
Medicaid	TN	81595	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score
Medicaid	TN	0207U	Neurology (Alzheimer disease); quantitative imaging of phosphorylated ERK1 and ERK2 in response to bradykinin treatment by in situ immunofluorescence, using cultured skin fibroblasts, reported as a probability index for Alzheimer disease (List separately in addition to code for primary procedure)
Medicaid	TN	81599	Unlisted Multianalyte Assay With Algorithmic Analysis
Medicaid	TN	81536	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination (List separately in addition to code for primary procedure)
Medicaid	TN	81535	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; first single drug or drug combination
Medicaid	TN	84999	Unlisted Chemistry Proc
Medicaid	TN	0343U	Oncology (prostate), exosome-based analysis of 442 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RT-qPCR), urine, reported as
Medicaid	TN	81222	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81252	GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence
Medicaid	TN	81251	Gba (Glucosidase, Beta, Acid) (Eg, Gaucher Disease) Gene Analysis, Common Variants (Eg, N370S, 84Gg, L444P, Ivs2+1G>A)
Medicaid	TN	81250	G6Pc (Glucose-6-Phosphatase, Catalytic Subunit) (Eg, Glycogen Storage Disease, Type 1A, Von Gierke Disease) Gene Analysis, Common Variants (Eg, R83C, Q347X)
Medicaid	TN	81244	FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status)
Medicaid	TN	81243	Fmr1 (Fragile X Mental Retardation 1) (Eg, Fragile X Mental Retardation) Gene Analysis; Evaluation To Detect Abnormal (Eg, Expanded) Alleles

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81242	Fancc (Fanconi Anemia, Complementation Group C) (Eg, Fanconi Anemia, Type C) Gene Analysis, Common Variant (Eg, lvs4+4A>T)
Medicaid	TN	81238	F9 (coagulation factor IX) (eg, hemophilia B), full gene sequence
Medicaid	TN	81229	Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants for chromosomal abnormalities
Medicaid	TN	81228	Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number variants (eg, bacterial artificial chromosome [BAC] or oligo-based comparative genomic hybridization [CGH] microarray analysis)
Medicaid	TN	81224	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Intron 8 Poly-T Analysis (Eg, Male Infertility)
Medicaid	TN	81223	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Full Gene Sequence
Medicaid	TN	81162	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (ie, detection of large gene rearrangements)
Medicaid	TN	81304	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Duplication/Deletion Variants
Medicaid	TN	81303	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Known Familial Variant
Medicaid	TN	81301	Microsatellite instability analysis (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) of markers for mismatch repair deficiency (eg, BAT25, BAT26), includes comparison of neoplastic and normal tissue, if performed
Medicaid	TN	81288	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; promoter methylation analysis
Medicaid	TN	81269	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; duplication/deletion variants
Medicaid	TN	81209	Blm (Bloom Syndrome, Recq Helicase-Like) (Eg, Bloom Syndrome) Gene Analysis, 2281Del6Ins7 Variant
Medicaid	TN	81205	Bckdhd (Branched-Chain Keto Acid Dehydrogenase E1, Beta Polypeptide) (Eg, Maple Syrup Urine Disease) Gene Analysis, Common Variants (Eg, R183P, G278S, E422X)
Medicaid	TN	81164	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
Medicaid	TN	81163	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis
Medicaid	TN	81307	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81260	IKBKAP (inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg, 2507+6T>C, R696P)
Medicaid	TN	81259	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; full gene sequence
Medicaid	TN	81258	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; known familial variant
Medicaid	TN	81257	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; common deletions or variant (eg, Southeast Asian, Thai, Filipino, Mediterranean, alpha3.7, alpha4.2, alpha20.5, Constant Spring)
Medicaid	TN	81256	Hfe (Hemochromatosis) (Eg, Hereditary Hemochromatosis) Gene Analysis, Common Variants (Eg, C282Y, H63D)
Medicaid	TN	81254	GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)])
Medicaid	TN	81313	PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer)
Medicaid	TN	81407	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8
Medicaid	TN	81551	Oncology (prostate), promoter methylation profiling by real-time PCR of 3 genes (GSTP1, APC, RASSF1), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a likelihood of prostate cancer detection on repeat biopsy
Medicaid	TN	81542	Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score
Medicaid	TN	81541	Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a disease-specific mortality risk score
Medicaid	TN	81540	Oncology (tumor of unknown origin), mRNA, gene expression profiling by real-time RT-PCR of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and subtype, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a probability of a predicted main cancer type and subtype
Medicaid	TN	81529	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis
Medicaid	TN	81504	Oncology (tissue of origin), microarray gene expression profiling of > 2000 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as tissue similarity scores

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81422	Fetal chromosomal microdeletion(s) genomic sequence analysis (eg, DiGeorge syndrome, Cri-du-chat syndrome) circulating cell-free fetal DNA in maternal blood
Medicaid	TN	81408	MOLECULAR PATHOLOGY PROCEDURE LEVEL 9
Medicaid	TN	81402	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3
Medicaid	TN	81406	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7
Medicaid	TN	81405	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6
Medicaid	TN	81404	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5
Medicaid	TN	81403	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4
Medicaid	TN	81330	Smpd1(Sphingomyelin Phosphodiesterase 1, Acid Lysosomal) (Eg, Niemann-Pick Disease, Type A) Gene Analysis, Common Variants (Eg, R496L, L302P, Fsp330)
Medicaid	TN	81400	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1
Medicaid	TN	81364	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); full gene sequence
Medicaid	TN	81363	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); duplication/deletion variant(s)
Medicaid	TN	81362	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); known familial variant(s)
Medicaid	TN	81351	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence
Medicaid	TN	81349	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass
Medicaid	TN	81332	SERPINA1 (serpin peptidase inhibitor, clade A, alpha-1 antiproteinase, antitrypsin, member 1) (eg, alpha-1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z)
Medicaid	TN	81552	Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis
Medicaid	TN	0229U	BCAT1 (Branched chain amino acid transaminase 1) or IKZF1 (IKAROS family zinc finger 1) (eg, colorectal cancer) promoter methylation analysis
Medicaid	TN	0173U	Psychiatry (ie, depression, anxiety), genomic analysis panel, includes variant analysis of 14 gene
Medicaid	TN	0349U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 27 gene report, with variant analysis, including reported phenotypes and imp
Medicaid	TN	0348U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 25 gene report, with variant analysis and reported phenotypes
Medicaid	TN	0340U	Oncology (pan-cancer), analysis of minimal residual disease (MRD) from plasma, with assays personalized to each patient based on prior next-generation sequencing of the patient

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0347U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 16 gene report, with variant analysis and reported phenotypes
Medicaid	TN	0326U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 83 or more genes, interrogation for sequence variants, gene copy number a
Medicaid	TN	0350U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 27 gene report, with variant analysis and reported phenotypes
Medicaid	TN	0409U	Oncology (solid tumor), DNA (80 genes) and RNA (36 genes), by next-generation sequencing from plasma, including single nucleotide variants, insertions/deletions, copy number a
Medicaid	TN	0411U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication ana
Medicaid	TN	0410U	Oncology (pancreatic), DNA, whole genome sequencing with 5-hydroxymethylcytosine enrichment, whole blood or plasma, algorithm reported as cancer detected or not detected
Medicaid	TN	0419U	Neuropsychiatry (eg, depression, anxiety), genomic sequence analysis panel, variant analysis of 13 genes, saliva or buccal swab, report of each gene phenotype
Medicaid	TN	81460	Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection
Medicaid	TN	81465	Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed
Medicaid	TN	0153U	Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement
Medicaid	TN	0130U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis), targeted mRNA sequence analysis panel (APC, CDH1, CHEK2, MLH1, MSH2, MSH6, MUTYH, PMS2, PTEN, and TP53) (List separately in addition to code for primary procedure)
Medicaid	TN	0230U	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation), full sequence analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0234U	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0203U	Autoimmune (inflammatory bowel disease), mRNA, gene expression profiling by quantitative RT-PCR, 17 genes (15 target and 2 reference genes), whole blood, reported as a continuous risk score and classification of inflammatory bowel disease aggressiveness
Medicaid	TN	0155U	Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status
Medicaid	TN	0172U	Oncology (solid tumor as indicated by the label), somatic mutation analysis of BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) and analysis of homologous recombination deficiency pathways, DNA, formalin-fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score
Medicaid	TN	0134U	Hereditary pan cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (18 genes) (List separately in addition to code for primary procedure)
Medicaid	TN	0262U	Oncology (solid tumor), gene expression profiling by real-time RT-PCR of 7 gene pathways (ER, AR, PI3K, MAPK, HH, TGFB, Notch), formalin-fixed paraffin-embedded (FFPE), algori
Medicaid	TN	0238U	Oncology (Lynch syndrome), genomic DNA sequence analysis of MLH1, MSH2, MSH6, PMS2, and EPCAM, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0250U	Oncology (solid organ neoplasm), targeted genomic sequence DNA analysi
Medicaid	TN	0237U	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia), genomic sequence analysis panel including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0231U	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) gene expansions, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0236U	SMN1 (survival of motor neuron 1, telomeric) and SMN2 (survival of motor neuron 2, centromeric) (eg, spinal muscular atrophy) full gene analysis, including small sequence changes in exonic and intronic regions, duplications and deletions, and mobile element insertions

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0235U	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0233U	FXN (frataxin) (eg, Friedreich ataxia), gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0232U	CSTB (cystatin B) (eg, progressive myoclonic epilepsy type 1A, Unverricht-Lundborg disease), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions
Medicaid	TN	0339U	Oncology (prostate), mRNA expression profiling of HOXC6 and DLX1, reverse transcription polymerase chain reaction (RT-PCR), first-void urine following digital rectal examinati
Medicaid	TN	0336U	Rare diseases (constitutional/heritable disorders), whole genome sequence analysis, including small sequence changes, copy number variants, deletions, duplications, mobile ele
Medicaid	TN	0414U	Oncology (lung), augmentative algorithmic analysis of digitized whole slide imaging for 8 genes (ALK, BRAF, EGFR, ERBB2, MET, NTRK1-3, RET, ROS1), and KRAS G12C and PD-L1, if
Medicaid	TN	0413U	Oncology (hematolymphoid neoplasm), optical genome mapping for copy number alterations, aneuploidy, and balanced/complex structural rearrangements, DNA from blood or bone marr
Medicaid	TN	0417U	Rare diseases (constitutional/heritable disorders), whole mitochondrial genome sequence with heteroplasmy detection and deletion analysis, nuclear-encoded mitochondrial gene a
Medicaid	TN	81225	Cyp2C19 (Cytochrome P450, Family 2, Subfamily C, Polypeptide 19) (Eg, Drug Metabolism), Gene Analysis, Common Variants (Eg, *2, *3, *4, *8, *17)
Medicaid	TN	81230	CYP3A4 (cytochrome P450 family 3 subfamily A member 4) (eg, drug metabolism), gene analysis, common variant(s) (eg, *2, *22)
Medicaid	TN	81231	CYP3A5 (cytochrome P450 family 3 subfamily A member 5) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *7)
Medicaid	TN	81227	Cyp2C9 (Cytochrome P450, Family 2, Subfamily C, Polypeptide 9) (Eg, Drug Metabolism), Gene Analysis, Common Variants (Eg, *2, *3, *5, *6)
Medicaid	TN	81350	Ugt1A1 (Udp Glucuronosyltransferase 1 Family, Polypeptide A1) (Eg, Irinotecan Metabolism), Gene Analysis, Common Variants (Eg, *28, *36, *37)
Medicaid	TN	81355	Vkorc1 (Vitamin K Epoxide Reductase Complex, Subunit 1) (Eg, Warfarin Metabolism), Gene Analysis, Common Variants (Eg, -1639/3673)
Medicaid	TN	81291	Mthfr (5,10-Methylenetetrahydrofolate Reductase) (Eg, Hereditary Hypercoagulability) Gene Analysis, Common Variants (Eg, 677T, 1298C)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81335	TPMT (thiopurine S-methyltransferase) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3)
Medicaid	TN	81328	SLCO1B1 (solute carrier organic anion transporter family, member 1B1) (eg, adverse drug reaction), gene analysis, common variant(s) (eg, *5)
Medicaid	TN	81232	DPYD (dihydropyrimidine dehydrogenase) (eg, 5-fluorouracil/5-FU and capecitabine drug metabolism), gene analysis, common variant(s) (eg, *2A, *4, *5, *6)
Medicaid	TN	81241	F5 (Coagulation Factor V) (Eg, Hereditary Hypercoagulability) Gene Analysis, Leiden Variant
Medicaid	TN	81240	F2 (Prothrombin, Coagulation Factor II) (Eg, Hereditary Hypercoagulability) Gene Analysis, 20210G>A Variant
Medicaid	TN	81381	Hla Class I Typing, High Resolution (Ie, Alleles Or Allele Groups); One Allele Or Allele Group (Eg, B*57:01P), Each
Medicaid	TN	G9143	Warfarin responsiveness testing by genetic technique using any method, any number of specimen(s)
Medicaid	TN	81479	Unlisted molecular pathology procedure
Medicaid	TN	81401	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2
Medicaid	TN	81418	Drug metabolism (eg, pharmacogenomics) genomic sequence analysis panel, must include testing of at least 6 genes, including CYP2C19, CYP2D6, and CYP2D6 duplication/deletion an
Medicaid	TN	88363	Examination and selection of retrieved archival (ie, previously diagnosed) tissue(s) for molecular analysis (eg, KRAS mutational analysis)
Medicaid	TN	81506	Endocrinology, Biochemical Assays Of Seven Analytes Utilizing Serum Or Plasma, Algorithm Reporting A Risk Score
Medicaid	TN	81352	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology)
Medicaid	TN	81525	Oncology (colon), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence score
Medicaid	TN	81253	GJB2 (gap junction protein, beta 2, 26kDa; connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants
Medicaid	TN	81170	ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib tyrosine kinase inhibitor resistance), gene analysis, variants in the kinase domain
Medicaid	TN	81331	Snrpn/Ube3A (Small Nuclear Ribonucleoprotein Polypeptide N And Ubiquitin Protein Ligase E3A) (Eg, Prader-Willi Syndrome And/Or Angelman Syndrome), Methylation Analysis
Medicaid	TN	81233	BTK (Bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, C481S, C481R, C481F)
Medicaid	TN	81412	Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes, including ASPA, BLM, CFTR, FANCC, GBA, HEXA, IKBKAP, MCOLN1, and SMPD1

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	81346	TYMS (thymidylate synthetase) (eg, 5-fluorouracil/5-FU drug metabolism), gene analysis, common variant(s) (eg, tandem repeat variant)
Medicaid	TN	81299	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants
Medicaid	TN	81339	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10
Medicaid	TN	81315	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative
Medicaid	TN	81308	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant
Medicaid	TN	0129U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis and deletion/duplication analysis panel (ATM, BRCA1, BRCA2, CDH1, CHEK2, PALB2, PTEN, and TP53)
Medicaid	TN	81200	Aspa (Aspartoacylase) (Eg, Canavan Disease) Gene Analysis, Common Variants (Eg, E285A, Y231X)
Medicaid	TN	81226	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN)
Medicaid	TN	0403U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch post-digital rectal examination urine (or processed first-catch urine), algorithm reported as per
Medicaid	TN	0005U	Oncology (prostate) gene expression profile by real-time RT-PCR of 3 genes (ERG, PCA3, and SPDEF), urine, algorithm reported as risk score
Medicaid	TN	0345U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication ana
Medicaid	TN	0405U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected
Medicaid	TN	81290	Mcoln1 (Mucolipin 1) (Eg, Mucopolipidosis, Type Iv) Gene Analysis, Common Variants (Eg, lvs3-2A>G, Del6.4Kb)
Medicaid	TN	81361	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); common variant(s) (eg, HbS, HbC, HbE)
Medicaid	TN	81221	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Known Familial Variants
Medicaid	TN	81255	Hexa (Hexosaminidase A [Alpha Polypeptide]) (Eg, Tay-Sachs Disease) Gene Analysis, Common Variants (Eg, 1278Instatc, 1421+1G>C, G269S)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0206U	Neurology (Alzheimer disease); cell aggregation using morphometric imaging and protein kinase C-epsilon (PKCe) concentration in response to amylospheroid treatment by ELISA, cultured skin fibroblasts, each reported as positive or negative for Alzheimer disease
Medicaid	TN	81316	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative
Medicaid	TN	81318	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants
Medicaid	TN	81470	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2
Medicaid	TN	81523	Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffin-embedded tissue,
Medicaid	TN	D7996	Implant-Mandible For Augmentation Purposes (Excluding Alveolar Ridge), By Report
Medicaid	TN	D7947	Lefort I (Maxilla - Segmented)
Medicaid	TN	D7949	Lefort II Or Lefort III - With Bone Graft
Medicaid	TN	D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft
Medicaid	TN	D7946	LeFort I (maxilla - total)
Medicaid	TN	D7945	osteotomy - body of mandible
Medicaid	TN	D7944	OSTEOTOMY-SEGMENTED OR SUBAPICAL
Medicaid	TN	D7943	Osteotomy - Mandibular Rami With Bone Graft; Includes Obtaining The Graft
Medicaid	TN	D7941	Osteotomy - Mandibular Rami
Medicaid	TN	D7940	Osteoplasty - For Orthognathic Deformities
Medicaid	TN	77402	Radiation Treatment Delivery, Single Area, Single/Parallel Opposed Ports; Up To 5 Mev
Medicaid	TN	77412	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational
Medicaid	TN	77407	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple bl
Medicaid	TN	66989	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsif
Medicaid	TN	L5827	Endoskeletal knee-shin system, single axis, electromechanical swing and stance phase control, with or without shock absorption and stance extension damping
Medicaid	TN	E0982	Wheelchair accessory, back upholstery, replacement only, each
Medicaid	TN	38230	Bone marrow harvesting for transplantation; allogeneic

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2510	Speech generating device, synthesized speech, permitting multiple methods
Medicaid	TN	Q5147	Injection, aflibercept-ayyh (Pavblu), biosimilar, 1 mg
Medicaid	TN	0030U	Drug metabolism (warfarin drug response), targeted sequence analysis (ie, CYP2C9, CYP4F2, VKORC1, rs12777823)
Medicaid	TN	J1554	Injection, immune globulin (asceniv), 500 mg
Medicaid	TN	J3380	Injection, vedolizumab, 1 mg
Medicaid	TN	97156	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes
Medicaid	TN	J3393	Injection, betibeglogene autotemcel, per treatment
Medicaid	TN	64596	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode arra
Medicaid	TN	C9796	Repair of enterocutaneous fistula small intestine or colon (excluding anorectal fistula) with plug (e.g., porcine small intestine submucosa [SIS])
Medicaid	TN	J7208	Injection, factor viii, (antihemophilic factor, recombinant), pegylated-aucl, (jivi), 1 i.u.
Medicaid	TN	J2508	Injection, pegunigalsidase alfa-iwxj, 1 mg
Medicaid	TN	J2781	Injection, pegcetacoplan, intravitreal, 1 mg
Medicaid	TN	J1426	Injection, casimersen, 10 mg
Medicaid	TN	J0517	Injection, benralizumab, 1 mg
Medicaid	TN	J0599	Injection, C-1 esterase inhibitor (human), (Haegarda), 10 units
Medicaid	TN	J0593	Injection, lanadelumab-flyo, 1 mg (code may be used for Medicare when drug administered under direct supervision of a physician, not for use when drug is self-administered)
Medicaid	TN	55862	Exposure, Prostate, Any Approach, Radiation Insertion; W/Lymph Node Bx (Limited Pelvic Lymphadenect)
Medicaid	TN	J2267	Injection, mirikizumab-mrkz, 1 mg
Medicaid	TN	J7355	Injection, travoprost, intracameral implant, 1 mcg
Medicaid	TN	J9312	Injection, rituximab, 10 mg
Medicaid	TN	J9324	Injection, pemetrexed (pemrydi rtu), 10 mg
Medicaid	TN	Q0138	Injection, Ferumoxytol, For Treatment Of Iron Deficiency Anemia, 1 Mg (Non-Esrd Use)
Medicaid	TN	Q2055	Idecabtagene vicleucel, up to 460 million autologous b-cell maturation antigen (bcma) directed car-positive t cells, including leukapheresis and dose preparation procedures, per therapeutic dose
Medicaid	TN	Q5116	Injection, trastuzumab-qyyp, biosimilar, (trazimera), 10 mg
Medicaid	TN	Q5118	Injection, bevacizumab-bvzr, biosimilar, (Zirabev), 10 mg
Medicaid	TN	Q5127	Injection, pegfilgrastim-fpgk (stimufend), biosimilar, 0.5 mg
Medicaid	TN	Q5130	Injection, pegfilgrastim-pbbk (fynetra), biosimilar, 0.5 mg
Medicaid	TN	J7351	Injection, bimatoprost, intracameral implant, 1 microgram
Medicaid	TN	J0584	Injection, burosumab-twza 1 mg
Medicaid	TN	Q4307	American Amnion, per sq cm

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	C1734	Orthopedic/device/drug matrix for opposing bone-to-bone or soft tissue-to-bone (implantable)
Medicaid	TN	Q5133	Injection, tocilizumab-bavi (Tofidence), biosimilar, 1 mg
Medicaid	TN	J9334	Injection, efgartigimod alfa, 2 mg and hyaluronidase-qvfc
Medicaid	TN	Q5124	Injection, ranibizumab-nuna, biosimilar, (Byooviz), 0.1 mg
Medicaid	TN	S9359	Home infusion therapy, anti-tumor necrosis factor intravenous therapy; (e.g., Infliximab)
Medicaid	TN	J0802	Injection, corticotropin (ANI), up to 40 units
Medicaid	TN	63042	Laminotomy W/Partl Facetectomy/Foraminotomy/Herniated Discect, Re-Explor, Sngle Interspc; Lumbar
Medicaid	TN	J0177	Injection, aflibercept HD, 1 mg
Medicaid	TN	J1323	Injection, elranatamab-bcmm, 1 mg
Medicaid	TN	J2782	Injection, avacincaptad pegol, 0.1 mg
Medicaid	TN	99600	Unlisted Home Visit Service/Procedure
Medicaid	TN	G0089	Professional services, initial visit, for the administration of subcutaneous immunotherapy or other subcutaneous infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 min
Medicaid	TN	64582	Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array
Medicaid	TN	C9772	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies), with intravascular lithotripsy, includes angioplasty within the same vessel(s), when performed
Medicaid	TN	0045U	Oncology (breast ductal carcinoma in situ), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score
Medicaid	TN	J2786	Injection, reslizumab, 1 mg
Medicaid	TN	97152	Behavior identification-supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes
Medicaid	TN	Q5144	Injection, adalimumab-aacf (idacio), biosimilar, 1 mg
Medicaid	TN	0036U	Exome (ie, somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses
Medicaid	TN	0037U	Targeted genomic sequence analysis, solid organ neoplasm, DNA analysis of 324 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden
Medicaid	TN	55881	Transurethral ablation of prostate tissue, using thermal ultrasound
Medicaid	TN	97763	Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower extremity(ies), and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15 minutes

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	96133	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)
Medicaid	TN	S5121	Home Care Training, Family, Per Diem/TX LTC Pest Control
Medicaid	TN	T2022	Case management, per month
Medicaid	TN	J9313	Injection, moxetumomab pasudotox-tdfk, 0.01 mg
Medicaid	TN	Q5138	Injection, ustekinumab-auub (Wezlana), biosimilar, IV, 1 mg
Medicaid	TN	64597	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electr
Medicaid	TN	J9057	Injection, copanlisib, 1 mg
Medicaid	TN	J9223	Injection, lurbinectedin, 0.1 mg
Medicaid	TN	J7203	Injection Factor IX, (antihemophilic factor, recombinant), glycopegylated, (Rebinyn), 1 IU
Medicaid	TN	J1429	Injection, golodirsen, 10 mg
Medicaid	TN	31243	Nasal/sinus endoscopy, surgical; with destruction by cryoablation, posterior nasal nerve
Medicaid	TN	J9348	Injection, naxitamab-gqgk, 1 m
Medicaid	TN	Q5119	Injection, rituximab-pwvr, biosimilar, (RUXIENCE), 10 mg
Medicaid	TN	47999	Unlisted Proc, Biliary Tract
Medicaid	TN	0048U	Oncology (solid organ neoplasia), DNA, targeted sequencing of protein-coding exons of 468 cancer-associated genes, including interrogation for somatic mutations and microsatellite instability, matched with normal specimens, utilizing formalin-fixed paraffin-embedded tumor tissue, report of clinically significant mutation(s)
Medicaid	TN	J9276	Injection, zanidatamab-hrii, 2 mg
Medicaid	TN	J1556	Injection, immune globulin (bivigam), 500 mg
Medicaid	TN	J2840	Injection, sebelipase alfa, 1 mg
Medicaid	TN	J1602	Injection, golimumab, 1 mg, for intravenous use
Medicaid	TN	Q5136	Injection, denosumab-bbdz (Jubbonti/Wyost), biosimilar, 1 mg
Medicaid	TN	96132	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
Medicaid	TN	66991	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsif
Medicaid	TN	33277	Insertion of phrenic nerve stimulator transvenous sensing lead (List separately in addition to code for primary procedure)
Medicaid	TN	B9006	Parenteral nutrition infusion pump, stationary

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	43889	Gastric restrictive procedure, transoral, endoscopic sleeve gastroplasty (ESG), including argon plasma coagulation, when performed
Medicaid	TN	E2513	Accessory for speech generating device, electromyographic sensor
Medicaid	TN	E0446	Topical oxygen delivery system, not otherwise specified, includes all supplies and accessories
Medicaid	TN	E0210	Electric Heat Pad Standard
Medicaid	TN	J9256	Injection, nipocalimab-aahu, 3 mg
Medicaid	TN	J9326	Injection, telisotuzumab vedotin-tllv, 1 mg
Medicaid	TN	E0221	Infrared heating pad system
Medicaid	TN	E0215	Electric Heat Pad Moist
Medicaid	TN	Q5160	Injection, bevacizumab-nwgd (jobevne), biosimilar, 10 mg
Medicaid	TN	S5100	Day Care Services, Adult, Per 15 Minutes
Medicaid	TN	J1599	Injection, immune globulin, intravenous, non-lyophilized (e.g. liquid), not otherwise specified, 500 mg
Medicaid	TN	J2797	Injection, rolapitant, 0.5 mg
Medicaid	TN	J1572	Injection, immune globulin, (Flebogamma/Flebogamma Dif), intravenous, nonlyophilized (e.g., liquid), 500 mg
Medicaid	TN	J1073	Testosterone pellet, implant, 75 mg
Medicaid	TN	J3490	Unclassified drugs
Medicaid	TN	J3590	Unclassified Biologics
Medicaid	TN	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti-CD19 CAR positive T cells, including leukapheresis and dose preparation procedures, per therapeutic dose
Medicaid	TN	C9399	Unclassified Drugs Or Biologicals
Medicaid	TN	0620T	Endovascular venous arterialization, tibial or peroneal vein, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed
Medicaid	TN	96131	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)
Medicaid	TN	96130	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
Medicaid	TN	96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	96137	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
Medicaid	TN	96138	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
Medicaid	TN	96139	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)
Medicaid	TN	55865	Exposure, Prostate, Any Approach, Radiation Insertion; W/Bilat Pelvic Lymphadenectomy
Medicaid	TN	63047	Laminectomy. Facetectomy & Foraminotomy, 1 Segment; Lumbar
Medicaid	TN	J0217	Injection, velmanase alfa-tycv, 1 mg
Medicaid	TN	J0589	Injection, daxibotulinumtoxina-lanm, 1 unit
Medicaid	TN	J1203	Injection, cipaglucoisidase alfa-atga, 5 mg
Medicaid	TN	J2277	Injection, motixafortide, 0.25 mg
Medicaid	TN	J3055	Injection, talquetamab-tgvs, 0.25 mg
Medicaid	TN	J7353	Anacaulase-bcdb, 8.8% gel, 1 gm
Medicaid	TN	J7354	Cantharidin for topical administration, 0.7%, single unit dose applicator (3.2 mg)
Medicaid	TN	J9376	Injection, pozelimab-bbfg, 1 mg
Medicaid	TN	Q5134	Injection, natalizumab-sztn (Tyruko), biosimilar, 1 mg
Medicaid	TN	J1748	Injection, infliximab-dyyb (Zymfentra), 10 mg
Medicaid	TN	J3247	Injection, secukinumab, IV, 1 mg
Medicaid	TN	J3263	Injection, toripalimab-tpzi, 1 mg
Medicaid	TN	J7171	Injection, ADAMTS13, recombinant-krhn, 10 IU
Medicaid	TN	J9361	Injection, efbemalenograstim alfa-vuxw, 0.5 mg
Medicaid	TN	Q5137	Injection, ustekinumab-auub (Wezlana), biosimilar, SC, 1 mg
Medicaid	TN	31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve
Medicaid	TN	Q5105	Injection, epoetin alfa, biosimilar, (retacrit) (for esrd on dialysis), 100 units
Medicaid	TN	Q5106	Injection, epoetin alfa, biosimilar, (retacrit) (for non-esrd use), 1000 units
Medicaid	TN	Q5107	Injection, bevacizumab-awwb, biosimilar, (Mvasi), 10 mg
Medicaid	TN	Q5108	Injection, pegfilgrastim-jmdb, biosimilar, (fulphila), 0.5 mg
Medicaid	TN	Q5110	Injection, filgrastim-aafi, biosimilar, (nivestym), 1 microgram
Medicaid	TN	Q5111	Injection, pegfilgrastim-cbqv, biosimilar, (Udenyca), 0.5 mg
Medicaid	TN	Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg
Medicaid	TN	Q5113	Injection, trastuzumab-pkrb, biosimilar, (herzuma), 10 mg
Medicaid	TN	Q5115	Injection, rituximab-abbs, biosimilar, 10 mg
Medicaid	TN	Q5120	Injection, pegfilgrastim-bmez, biosimilar, (ZIEXTENZO), 0.5 mg
Medicaid	TN	Q5114	Injection, trastuzumab-dkst, biosimilar, (Ogivri), 10 mg
Medicaid	TN	Q5123	Injection, rituximab-arrx, biosimilar, (riabni), 10 m
Medicaid	TN	Q5125	Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram
Medicaid	TN	Q5126	Injection, bevacizumab-maly, biosimilar, (alymys), 10 mg
Medicaid	TN	Q5122	Injection, pegfilgrastim-apgf, biosimilar, (nyvepria), 0.5 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	Q5128	Injection, ranibizumab-eqrn (cimerli), biosimilar, 0.1 mg
Medicaid	TN	Q5129	Injection, bevacizumab-adcd (vegzelma), biosimilar, 10 mg
Medicaid	TN	J9349	Injection, tafasitamab-cxix, 2 mg
Medicaid	TN	J9350	Injection, mosunetuzumab-axgb, 1 mg
Medicaid	TN	J9353	Injection, margetuximab-cmkb, 5 m
Medicaid	TN	J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg
Medicaid	TN	J9393	Injection, fulvestrant (teva) not therapeutically equivalent to j9395, 25 mg
Medicaid	TN	J9394	Injection, fulvestrant (fresenius kabi) not therapeutically equivalent to j9395, 25 mg
Medicaid	TN	Q2042	Tisagenlecleucel, up to 600 million CAR-positive viable T cells, including leukapheresis and dose preparation procedures, per therapeutic dose
Medicaid	TN	Q2053	Brexucabtagene autoleucel, up to 200 million autologous anti-cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose
Medicaid	TN	Q2054	Lisocabtagene maraleucel, up to 110 million autologous anti-CD19 CAR-positive viable T cells, including leukapheresis and dose preparation procedures, per therapeutic dose
Medicaid	TN	Q2056	Ciltacabtagene autoleucel, up to 100 million autologous b-cell maturation antigen (bcma) directed car-positive t cells, including leukapheresis and dose preparation procedures
Medicaid	TN	J9177	Injection, enfortumab vedotin-efv, 0.25 mg
Medicaid	TN	J9227	Injection, isatuximab-irfc, 10 mg
Medicaid	TN	J9229	Injection, inotuzumab ozogamicin, 0.1 mg
Medicaid	TN	J9269	Injection, tagraxofusp-erzs, 10 micrograms
Medicaid	TN	J9274	Injection, tebentafusp-tebn, 1 microgram
Medicaid	TN	J9286	Injection, glofitamab-gxbm, 2.5 mg
Medicaid	TN	J9294	Injection, pemetrexed (hospira) not therapeutically equivalent to j9305, 10 mg
Medicaid	TN	J9296	Injection, pemetrexed (accord) not therapeutically equivalent to j9305, 10 mg
Medicaid	TN	J9297	Injection, pemetrexed (sandoz), not therapeutically equivalent to j9305, 10 mg
Medicaid	TN	J9298	Injection, nivolumab and relatlimab-rmbw, 3 mg/1 mg
Medicaid	TN	J9304	Injection, pemetrexed (pemfexy), 10 mg
Medicaid	TN	J9314	Injection, pemetrexed (Teva) not therapeutically equivalent to J9305, 10 mg
Medicaid	TN	J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg
Medicaid	TN	J9309	Injection, polatuzumab vedotin-piiq, 1 mg
Medicaid	TN	J9319	Injection, romidepsin, lyophilized, 0.1 mg
Medicaid	TN	J9321	Injection, epcoritamab-bysp, 0.16 mg
Medicaid	TN	J9322	Injection, pemetrexed (bluepoint) not therapeutically equivalent to j9305, 10 mg
Medicaid	TN	J9323	Injection, pemetrexed (hospira) not therapeutically equivalent to j9305, 10 mg
Medicaid	TN	J9317	Injection, sacituzumab govitecan-hziy, 2.5 mg
Medicaid	TN	J9333	Injection, rozanolixizumab-noli, 1 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J9345	Injection, retifanlimab-dlwr, 1 mg
Medicaid	TN	J9029	Injection, nadofaragene firadenovec-vncg, per therapeutic dose
Medicaid	TN	J9035	Bevacizumab injection
Medicaid	TN	J9036	Injection, bendamustine hydrochloride, (Belrapzo), 1 mg
Medicaid	TN	J9056	Injection, bendamustine hydrochloride (vivimusta), 1 mg
Medicaid	TN	J9064	Injection, cabazitaxel (Sandoz), not therapeutically equivalent to J9043, 1 mg
Medicaid	TN	J9118	Injection, calaspargase pegol-mknl, 10 units
Medicaid	TN	J9119	Injection, cemiplimab-rwlc, 1 mg
Medicaid	TN	J9173	Injection, durvalumab, 10 mg
Medicaid	TN	J9144	Injection, daratumumab, 10 mg and hyaluronidase-fihj
Medicaid	TN	J9210	Injection, emapalumab-lzsg, 1 mg
Medicaid	TN	J9021	Injection, asparaginase, recombinant, (rylaze), 0.1 mg
Medicaid	TN	J1632	Injection, brexanolone, 1 mg
Medicaid	TN	J7352	Afamelanotide implant, 1 mg
Medicaid	TN	J7314	Injection, fluocinolone acetonide, intravitreal implant (Yutiq), 0.01 mg
Medicaid	TN	J7212	Factor via (antihemophilic factor, recombinant)-jncw (sevenfact), 1 microgram
Medicaid	TN	J7213	Injection, coagulation factor ix (recombinant), ixinity, 1 i.u.
Medicaid	TN	J7214	Injection, Factor VIII/von Willebrand factor complex, recombinant (Altuviiiio), per Factor VIII IU
Medicaid	TN	J7170	Injection, emicizumab-kxwh, 0.5 mg
Medicaid	TN	J7177	Injection, human fibrinogen concentrate (Fibryga), 1 mg
Medicaid	TN	J7187	Injection, von Willebrand factor complex (Humate-P), per IU vWF-RC0
Medicaid	TN	J2506	Injection, pegfilgrastim, excludes biosimilar, 0.5 mg
Medicaid	TN	J2777	Injection, faricimab-sova, 0.1 mg
Medicaid	TN	J2916	Injection, sodium ferric gluconate complex in sucrose injection, 12.5 mg
Medicaid	TN	J3032	Injection, eptinezumab-jjmr, 1 mg
Medicaid	TN	J3111	Injection, romosozumab-aqqg, 1 mg
Medicaid	TN	J3245	Injection, tildrakizumab, 1 mg
Medicaid	TN	J3299	Injection, triamcinolone acetonide (xipere), 1 mg
Medicaid	TN	J3304	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg
Medicaid	TN	J3316	Injection, triptorelin, extended-release, 3.75 mg
Medicaid	TN	J3401	Beremagene geperpavec-svdt for topical administration, containing nominal $5 \times 10^9$ pfu/ml vector genomes, per 0.1 ml
Medicaid	TN	J1750	Injection, Iron Dextran, 50mg
Medicaid	TN	J1756	Injection, Iron Sucrose, 1 Mg
Medicaid	TN	J1823	Injection, inebilizumab-cdon, 1 mg
Medicaid	TN	J1932	Injection, lanreotide, (cipla), 1 mg
Medicaid	TN	J1951	Injection, leuprolide acetate for depot suspension (fensolvi), 0.25 m
Medicaid	TN	J2327	Injection, risankizumab-rzaa, intravenous, 1 mg
Medicaid	TN	J2356	Injection, tezepelumab-ekko, 1 mg
Medicaid	TN	J1448	Injection, trilaciclib, 1 mg
Medicaid	TN	J1449	Injection, eflapegrastim-xnst, 0.1 mg
Medicaid	TN	J1454	Injection, fosnetupitant 235 mg and palonosetron 0.25 mg
Medicaid	TN	J1558	Injection, immune globulin (xembify), 100 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J1576	Injection, immune globulin (panzyga), intravenous, non-lyophilized (e.g., liquid), 500 mg
Medicaid	TN	J1628	Injection, guselkumab, 1 mg
Medicaid	TN	J1301	Injection, edaravone, 1 mg
Medicaid	TN	J1302	Injection, sutimlimab-jome, 10 mg
Medicaid	TN	J1304	Injection, tofersen, 1 mg
Medicaid	TN	J1305	Injection, evinacumab-dgnb, 5 mg
Medicaid	TN	J1427	Injection, viltolarsen, 10 mg
Medicaid	TN	J1437	Injection, ferric derisomaltose, 10 mg
Medicaid	TN	J1439	Injection, ferric carboxymaltose, 1mg
Medicaid	TN	J1440	Fecal microbiota, live - jsml, 1 ml
Medicaid	TN	J0491	Injection, anifrolumab-fnia, 1 mg
Medicaid	TN	J0567	Injection, cerliponase alfa, 1 mg
Medicaid	TN	J3398	Injection, voretigene neparvovec-rzyl, 1 billion vector genomes
Medicaid	TN	J0642	Injection, levoleucovorin (khapzory), 0.5 mg
Medicaid	TN	J0801	Injection, corticotropin (Acthar Gel), up to 40 units
Medicaid	TN	J0896	Injection, luspatercept-aamt, 0.25 mg
Medicaid	TN	J0224	Injection, lumasiran, 0.5 m
Medicaid	TN	J0225	Injection, vutrisiran, 1 mg
Medicaid	TN	J0179	Injection, brolicizumab-dbl, 1 mg
Medicaid	TN	A9607	Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie
Medicaid	TN	C9047	Injection, caplacizumab-yhdp, 1 mg
Medicaid	TN	64624	Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed
Medicaid	TN	L5615	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control
Medicaid	TN	L5926	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type
Medicaid	TN	Q4306	American Amnion AC, per sq cm
Medicaid	TN	Q4308	Sanopellis, per sq cm
Medicaid	TN	Q4305	American Amnion AC Tri-Layer, per sq cm
Medicaid	TN	Q4309	VIA Matrix, per sq cm
Medicaid	TN	Q4310	Procenta, per 100 mg
Medicaid	TN	64569	Revision or replacement of cranial nerve (eg, vagus nerve) neurostimulator electrode array, including connection to existing pulse generator
Medicaid	TN	A2026	Restrata MiniMatrix, 5 mg
Medicaid	TN	A4438	Adhesive clip applied to the skin to secure external electrical nerve stimulator controller, each
Medicaid	TN	E2298	Complex rehabilitative power wheelchair accessory, power seat elevation system, any type
Medicaid	TN	0323U	Infectious agent detection by nucleic acid (DNA and RNA), central nervous system pathogen, metagenomic next-generation sequencing, cerebrospinal fluid (CSF), identification of

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	61889	Insertion of skull-mounted cranial neurostimulator pulse generator or receiver, including craniectomy or craniotomy, when performed, with direct or inductive coupling, with co
Medicaid	TN	61891	Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver with connection to depth and/or cortical strip electrode array(s)
Medicaid	TN	61715	MRI guided focused ultrasound high intensity stereotactic intracranial ablation
Medicaid	TN	22800	Arthrodesis, Posterior, Spinal Deformity, W/Wo Cast; Up To 6 Vertebral Segments
Medicaid	TN	22802	Arthrodesis, Posterior, Spinal Deformity, W/Wo Cast; 7 To 12 Vertebral Segments
Medicaid	TN	0329U	Oncology (neoplasia), exome and transcriptome sequence analysis for sequence variants, gene copy number amplifications and deletions, gene rearrangements, microsatellite insta
Medicaid	TN	50365	Renal Allotransplantation, Implantation, Graft; W/Recipient Nephrectomy
Medicaid	TN	0217U	Neurology (inherited ataxias), genomic DNA sequence analysis of 51 genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants
Medicaid	TN	0218U	Neurology (muscular dystrophy), DMD gene sequence analysis, including small sequence changes, deletions, duplications, and variants in non-uniquely mappable regions, blood or
Medicaid	TN	0244U	Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin-embedded tumor tissue
Medicaid	TN	0245U	Oncology (thyroid), mutation analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage
Medicaid	TN	0211U	Oncology (pan-tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded tissue, interpretative report for single nucleotide variants, copy
Medicaid	TN	0212U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0213U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator genome (eg, parent, sibling)
Medicaid	TN	0209U	Cytogenomic constitutional (genome-wide) analysis, interrogation of genomic regions for copy number, structural changes and areas of homozygosity for chromosomal abnormalities
Medicaid	TN	0216U	Neurology (inherited ataxias), genomic DNA sequence analysis of 12 common genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants
Medicaid	TN	0103U	Hereditary ovarian cancer (eg, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (24 genes [sequencing and deletion/duplication], EPCAM [deletion/duplication only])
Medicaid	TN	0154U	Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3) utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status
Medicaid	TN	0026U	Oncology (thyroid), DNA and mRNA of 112 genes, next-generation sequencing, fine needle aspirate of thyroid nodule, algorithmic analysis reported as a categorical result ("Positive, high probability of malignancy" or "Negative, low probability of malignancy")
Medicaid	TN	0049U	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, quantitative
Medicaid	TN	0046U	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia) internal tandem duplication (ITD) variants, quantitative
Medicaid	TN	0050U	Targeted genomic sequence analysis panel, acute myelogenous leukemia, DNA analysis, 194 genes, interrogation for sequence variants, copy number variants or rearrangements
Medicaid	TN	0101U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatous polyposis), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (15 genes [sequencing and deletion/duplication], EPCAM and GREM1 [deletion/duplication only])

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0102U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (17 genes [sequencing and deletion/duplication])
Medicaid	TN	0018U	Oncology (thyroid), microRNA profiling by RT-PCR of 10 microRNA sequences, utilizing fine needle aspirate, algorithm reported as a positive or negative result for moderate to high risk of malignancy
Medicaid	TN	48160	Pancreatectomy, Total/Subtotal W/Autologous Transplantation Pancreas/Pancreatic Islets
Medicaid	TN	0214U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband
Medicaid	TN	0215U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator exome (eg, parent, sibling)
Medicaid	TN	Q5103	Injection, infliximab-dyyb, biosimilar, (inflectra), 10 mg
Medicaid	TN	Q5104	Injection, infliximab-abda, biosimilar, (renflexis), 10 mg
Medicaid	TN	Q5121	Injection, infliximab-axxq, biosimilar, (AVSOLA), 10 mg
Medicaid	TN	J1322	Injection, elosulfase alfa, 1mg
Medicaid	TN	J1458	INJECTION, GALSULFASE, 1 MG
Medicaid	TN	J1459	Injection, immune globulin (Privigen), intravenous, nonlyophilized (e.g., liquid), 500 mg
Medicaid	TN	J1557	Injection, immune globulin, (Gammaplex), intravenous, nonlyophilized (e.g., liquid), 500 mg
Medicaid	TN	J2323	Injection, natalizumab, 1 mg
Medicaid	TN	J2350	Injection, ocrelizumab, 1 mg
Medicaid	TN	J2357	Injection, omalizumab, 5 mg
Medicaid	TN	J2507	Injection, pegloticase, 1 mg
Medicaid	TN	J3060	Injection, taliglucerase alfa, 10 units
Medicaid	TN	J3262	Injection, tocilizumab, 1 mg
Medicaid	TN	J3385	Injection, velaglucerase alfa, 100 units
Medicaid	TN	J1561	Injection, immune globulin, (Gamunex/Gamunex-C/Gammaked), nonlyophilized (e.g., liquid), 500 mg
Medicaid	TN	J1566	Injection, immune globulin, intravenous, lyophilized (e.g., powder), not otherwise specified, 500 mg
Medicaid	TN	J1568	Injection, immune globulin, (Octagam), intravenous, nonlyophilized (e.g., liquid), 500 mg
Medicaid	TN	J1569	Injection, immune globulin, (Gammagard liquid), nonlyophilized, (e.g., liquid), 500 mg
Medicaid	TN	J1743	Injection, idursulfase, 1 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J1745	Injection, infliximab, excludes biosimilar, 10 mg
Medicaid	TN	J1786	Injection, imiglucerase, 10 units
Medicaid	TN	J1931	Laronidase injection
Medicaid	TN	J3397	Injection, vestronidase alfa-vjvk, 1 mg
Medicaid	TN	H2014	Skills training and development, per 15 minutes
Medicaid	TN	J0129	Injection, abatacept, 10 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)
Medicaid	TN	J0180	Agalsidase beta injection
Medicaid	TN	J0221	Injection, alglucosidase alfa, (Lumizyme), 10 mg
Medicaid	TN	J0256	Injection, alpha 1-proteinase inhibitor (human), not otherwise specified, 10 mg
Medicaid	TN	J0257	Injection, alpha 1 proteinase inhibitor (human), (GLASSIA), 10 mg
Medicaid	TN	J0485	Injection, belatacept, 1 mg
Medicaid	TN	J0490	Injection, belimumab, 10 mg
Medicaid	TN	J0791	Injection, crizanlizumab-tmca, 5 mg
Medicaid	TN	J1303	Injection, ravulizumab-cwvz, 10 mg
Medicaid	TN	J0222	Injection, Patisiran, 0.1 mg
Medicaid	TN	97151	Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan
Medicaid	TN	97153	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient, each 15 minutes
Medicaid	TN	97154	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15 minutes
Medicaid	TN	97155	Adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes
Medicaid	TN	97157	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, each 15 minutes
Medicaid	TN	97158	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes
Medicaid	TN	J1560	Injection, gamma globulin, intramuscular, over 10 cc
Medicaid	TN	J1460	Gamma Globulin 1 Cc Inj

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	S9123	Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when CPT codes 99500-99602 can be used)
Medicaid	TN	S9124	Nursing care, in the home; by licensed practical nurse, per hour
Medicaid	TN	S9131	Physical therapy, in the home, per diem
Medicaid	TN	J0139	Injection, adalimumab, 1 mg
Medicaid	TN	J0175	Injection, donanemab-azbt, 2 mg
Medicaid	TN	J0870	Injection, imetelstat, 1 mg
Medicaid	TN	J1307	Injection, crovalimab-akkz, 10 mg
Medicaid	TN	J1552	Injection, immune globulin (alyglo), 500 mg
Medicaid	TN	J2802	Injection, romiplostim, 1 microgram
Medicaid	TN	J9026	Injection, tarlatamab-dlle, 1 mg
Medicaid	TN	J9028	Injection, nogapendekin alfa inbakicept-pmln, for intravesical use, 1 microgram
Medicaid	TN	J9329	Injection, tislelizumab-jsgr, 1mg
Medicaid	TN	Q5135	Injection, tocilizumab-aazg (Tyenne), biosimilar, 1 mg
Medicaid	TN	Q5140	Injection, adalimumab-fkjp, biosimilar, 1 mg
Medicaid	TN	Q5141	Injection, adalimumab-aaty, biosimilar, 1 mg
Medicaid	TN	Q5142	Injection, adalimumab-ryvk biosimilar, 1 mg
Medicaid	TN	Q5143	Injection, adalimumab-adbm, biosimilar, 1 mg
Medicaid	TN	Q5145	Injection, adalimumab-afzb (abrilada), biosimilar, 1 mg
Medicaid	TN	Q5146	Injection, trastuzumab-strf (hercessi), biosimilar, 10 mg
Medicaid	TN	0373T	Adaptive behavior treatment with protocol modification, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior.
Medicaid	TN	S5180	Home Health Respiratory Therapy, Initial Evaluation
Medicaid	TN	0205U	Ophthalmology (age-related macular degeneration), analysis of 3 gene variants (2 CFH gene, 1 ARMS2 gene), using PCR and MALDI-TOF, buccal swab, reported as positive or negative for neovascular age-related macular-degeneration risk associated with zinc supplements
Medicaid	TN	0242U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements
Medicaid	TN	0175U	Psychiatry (eg, depression, anxiety), genomic analysis panel, variant analysis of 15 genes
Medicaid	TN	0076U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 3' gene duplication/multiplication) (List separately in addition to code for primary procedure)
Medicaid	TN	J1072	Injection, testosterone cypionate (Azmiro), 1 mg
Medicaid	TN	J1299	Injection, eculizumab, 2 mg
Medicaid	TN	J1954	Injection, leuprolide acetate for depot suspension (Lutrate), 7.5 mg
Medicaid	TN	J2351	Injection, ocrelizumab, 1 mg and hyaluronidase-ocsq

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J9038	Injection, axatilimab-csfr, 0.1 mg
Medicaid	TN	J9161	Injection, denileukin diftitox-cxdl, 1 mcg
Medicaid	TN	J9382	Injection, zenocutuzumab-zbco, 1 mg
Medicaid	TN	Q5100	Injection, ustekinumab-kfce (yesintek), biosimilar, 1 mg
Medicaid	TN	Q5148	Injection, filgrastim-txid (Nypozi), biosimilar, 1 mcg
Medicaid	TN	Q5149	Injection, aflibercept-abzv (Enzeevu), biosimilar, 1 mg
Medicaid	TN	Q5150	Injection, aflibercept-mrbb (Ahzantive), biosimilar, 1 mg
Medicaid	TN	0075U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 5' gene duplication/multiplication) (List separately in addition to code for primary procedure)
Medicaid	TN	0072U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D6-2D7 hybrid gene) (List separately in addition to code for primary procedure)
Medicaid	TN	0073U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D7-2D6 hybrid gene) (List separately in addition to code for primary procedure)
Medicaid	TN	0074U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, non-duplicated gene when duplication/multiplication is trans) (List separately in addition to code for primary procedure)
Medicaid	TN	0032U	COMT (catechol-O-methyltransferase)(drug metabolism) gene analysis, c.472G>A (rs4680) variant
Medicaid	TN	0070U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, common and select rare variants (ie, *2, *3, *4, *4N, *5, *6, *7, *8, *9, *10, *11, *12, *13, *14A, *14B, *15, *17, *29, *35, *36, *41, *57, *61, *63, *68, *83, *xN)
Medicaid	TN	0031U	CYP1A2 (cytochrome P450 family 1, subfamily A, member 2)(eg, drug metabolism) gene analysis, common variants (ie, *1F, *1K, *6, *7)
Medicaid	TN	0029U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis (ie, CYP1A2, CYP2C19, CYP2C9, CYP2D6, CYP3A4, CYP3A5, CYP4F2, SLCO1B1, VKORC1 and rs12777823)
Medicaid	TN	0011M	Oncology, prostate cancer, mRNA expression assay of 12 genes (10 content and 2 housekeeping), RT-PCR test utilizing blood plasma and urine, algorithms to predict high-grade prostate cancer risk
Medicaid	TN	J3394	Injection, lovotibeglogene autotemcel, per treatment
Medicaid	TN	38243	Hematopoietic progenitor cell (HPC); HPC boost
Medicaid	TN	64415	Injection, Anesthetic Agent; Brachial Plexus, Single
Medicaid	TN	64447	Injection, Anesthetic Agent; Femoral Nerve, Single
Medicaid	TN	64450	Injection, Anesthetic Agent; Other Peripheral Nerve/Branch
Medicaid	TN	22614	Arthrodesis, Posterior/Posterolateral Technique, Single Level; Add'l Segment
Medicaid	TN	15838	Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad
Medicaid	TN	43499	Unlisted Proc, Esophagus

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	C9766	Revascularization, endovascular, open or percutaneous, lower extremity artery(ies), except tibial/peroneal; with intravascular lithotripsy and atherectomy, includes angioplasty within the same vessel(s), when performed
Medicaid	TN	C9774	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery(ies); with intravascular lithotripsy and atherectomy, includes angioplasty within the same vessel(s), when performed
Medicaid	TN	0327U	Fetal aneuploidy (trisomy 13, 18, and 21), DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy, includes sex r
Medicaid	TN	0331U	Oncology (hematolymphoid neoplasia), optical genome mapping for copy number alterations and gene rearrangements utilizing DNA from blood or bone marrow, report of clinically s
Medicaid	TN	0047U	Oncology (prostate), mRNA, gene expression profiling by real-time RT-PCR of 17 genes (12 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a risk score
Medicaid	TN	0016M	Oncology (bladder), mRNA, microarray gene expression profiling of 209 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as molecular subtype (luminal, luminal infiltrated, basal, basal claudin-low, neuroendocrine-like)
Medicaid	TN	0156U	Copy number (eg, intellectual disability, dysmorphology), sequence analysis
Medicaid	TN	0157U	APC (APC regulator of WNT signaling pathway) (eg, familial adenomatosis polyposis [FAP]) mRNA sequence analysis (List separately in addition to code for primary procedure)
Medicaid	TN	0158U	MLH1 (mutL homolog 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)
Medicaid	TN	0159U	MSH2 (mutS homolog 2) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)
Medicaid	TN	0160U	MSH6 (mutS homolog 6) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)
Medicaid	TN	0161U	PMS2 (PMS1 homolog 2, mismatch repair system component) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)
Medicaid	TN	L6026	Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm section, electrodes and cables, two batteries, charger, myoelectric control of terminal device, excludes terminal device(s)
Medicaid	TN	A4544	Electrode for external lower extremity nerve stimulator for restless legs syndrome
Medicaid	TN	J9248	Injection, melphalan (Hepzato), 1 mg
Medicaid	TN	L5841	Addition, endoskeletal knee-shin system, polycentric, pneumatic swing, and stance phase control

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	21255	Reconstruction, Zygomatic Arch/Glenoid Fossa W/Bone & Cartilage (Includes Obtaining Autografts)
Medicaid	TN	G2168	Services performed by a physical therapist assistant in the home health setting in the delivery of a safe and effective physical therapy maintenance program, each 15 minutes
Medicaid	TN	G2169	Services performed by an occupational therapist assistant in the home health setting in the delivery of a safe and effective occupational therapy maintenance program, each 15
Medicaid	TN	J3399	Injection, onasemnogene abeparvovec-xioi, per treatment, up to 5x10 <sup>15</sup> vector genomes
Medicaid	TN	G0068	Professional services for the administration of anti-infective, pain management, chelation, pulmonary hypertension, inotropic, or other intravenous infusion drug or biological (excluding chemotherapy or other highly complex drug or biological) for each infusion drug administration calendar day in the individual's home, each 15 min
Medicaid	TN	G0090	Professional services, initial visit, for the administration of intravenous chemotherapy or other highly complex infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 min
Medicaid	TN	G0088	Professional services, initial visit, for the administration of anti-infective, pain management, chelation, pulmonary hypertension, inotropic, or other intravenous infusion drug or biological (excluding chemotherapy or other highly complex drug or biological) for each infusion drug administration calendar day in the individual's home, each 15 min
Medicaid	TN	E2398	Wheelchair accessory, dynamic positioning hardware for back
Medicaid	TN	E2301	Wheelchair accessory, power standing system, any type
Medicaid	TN	E1035	Multi-Positional Patient Transfer System, With Integrated Seat, Operated By Care Giver, Patient Weight Capacity Up To An
Medicaid	TN	E0995	Wheelchair accessory, calf rest/pad, replacement only, each
Medicaid	TN	E0967	Manual wheelchair accessory, hand rim with projections, any type, replacement only, each
Medicaid	TN	E0467	Home ventilator, multi-function respiratory device, also performs any or all of the additional functions of oxygen concentration, drug nebulization, aspiration, and cough stimulation, includes all accessories, components and supplies for all functions
Medicaid	TN	J1414	Injection, fidanacogene elaparvovec-dzkt, per therapeutic dose
Medicaid	TN	E0198	Water Pressure Pad For Mattr
Medicaid	TN	E0217	Water Circ Heat Pad W Pump
Medicaid	TN	C9734	Focused ultrasound ablation/therapeutic intervention, other than uterine leiomyomata, with magnetic resonance (mr) guidance
Medicaid	TN	C9807	Nerve stimulator, percutaneous, peripheral (e.g., sprint peripheral nerve stimulation system), including electrode and all disposable system components, non-opioid medical dev
Medicaid	TN	A9276	Sensor; invasive (e.g., subcutaneous), disposable, for use with interstitial continuous glucose monitoring system, 1 unit = 1 day supply
Medicaid	TN	A9278	Receiver (monitor); external, for use with nondurable medical equipment interstitial continuous glucose monitoring system (CGM)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J3392	Injection, exagamlogene autotemcel, per treatment
Medicaid	TN	A4239	Supply allowance for non-adjunctive, non-implanted continuous glucose monitor (cgm), includes all supplies and accessories, 1 month supply = 1 unit of service
Medicaid	TN	33995	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; right heart, venous access only
Medicaid	TN	33979	Insertion, Ventricular Assist Device, Implantable Intracorporeal, Single Ventricle
Medicaid	TN	0117U	Pain management, analysis of 11 endogenous analytes (methylmalonic acid, xanthurenic acid, homocysteine, pyroglutamic acid, vanilmandelate, 5-hydroxyindoleacetic acid, hydroxymethylglutarate, ethylmalonate, 3-hydroxypropyl mercapturic acid (3-HPMA), quinolinic acid, kynurenic acid), LC-MS/MS, urine, algorithm reported as a pain-index score with likelihood of atypical biochemical function associated with pain
Medicaid	TN	0092U	Oncology (lung), three protein biomarkers, immunoassay using magnetic nanosensor technology, plasma, algorithm reported as risk score for likelihood of malignancy
Medicaid	TN	0093U	Prescription drug monitoring, evaluation of 65 common drugs by LC-MS/MS, urine, each drug reported detected or not detected
Medicaid	TN	53451	Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance
Medicaid	TN	53452	Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance
Medicaid	TN	53453	Periurethral transperineal adjustable balloon continence device; removal, each balloon
Medicaid	TN	53454	Periurethral transperineal adjustable balloon continence device; percutaneous adjustment of balloon(s) fluid volume
Medicaid	TN	55899	Unlisted Proc, Male Genital System
Medicaid	TN	95976	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with simple cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional
Medicaid	TN	95977	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with complex cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	33276	Insertion of phrenic nerve stimulator system (pulse generator and stimulating lead[s]), including vessel catheterization, all imaging guidance, and pulse generator initial ana
Medicaid	TN	33249	Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber
Medicaid	TN	E0735	Non-invasive vagus nerve stimulator
Medicaid	TN	L6700	Upper extremity addition, external powered feature, myoelectronic control module, additional EMG inputs, pattern-recognition decoding intent movement
Medicaid	TN	E1032	Wheelchair accessory, manual swingaway, retractable or removable mounting hardware used with joystick or other drive control interface
Medicaid	TN	E1033	Wheelchair accessory, manual swingaway, retractable or removable mounting hardware for headrest, cushioned, any type
Medicaid	TN	E1034	Wheelchair accessory, manual swingaway, retractable or removable mounting hardware for lateral trunk or hip support, any type
Medicaid	TN	S9122	Home health aide or certified nurse assistant, providing care in the home; per hour
Medicaid	TN	E0784	Ext Amb Infusn Pump Insulin
Medicaid	TN	E0787	External ambulatory infusion pump, insulin, dosage rate adjustment using therapeutic continuous glucose sensing
Medicaid	TN	G0458	Low dose rate (ldr) prostate brachytherapy services, composite rate
Medicaid	TN	Q5157	Injection, denosumab-bmwo (Stoboclo/Osenvelt), biosimilar, 1 mg
Medicaid	TN	97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(ies), lower extremity(ies) and/or trunk, initial orthotic(s) encounter, each 15 minutes
Medicaid	TN	Q5158	Injection, denosumab-bnht (Bomynta/Conexence), biosimilar, 1 mg
Medicaid	TN	Q5159	Injection, denosumab-dssb (Ospomyv/Xbryk), biosimilar, 1 mg
Medicaid	TN	Q5155	Injection, aflibercept-jbvf (Yesafili), biosimilar, 1 mg
Medicaid	TN	Q5154	Injection, omalizumab-igec (Omlyclo), biosimilar, 5 mg
Medicaid	TN	J7356	Injection, foscarbidopa 0.25 mg/foslevodopa 5 mg
Medicaid	TN	69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); unilateral
Medicaid	TN	69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); bilateral
Medicaid	TN	S5165	Home Modifications, Per Service
Medicaid	TN	T1016	Case Management, Each 15 Minutes
Medicaid	TN	T2027	Specialized childcare, waiver; per 15 minutes
Medicaid	TN	19330	Removal, Mammary Implant Matl
Medicaid	TN	15835	Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock
Medicaid	TN	15879	Suction Assisted Lipectomy; Lower Extremity
Medicaid	TN	B5000	Parenteral Sol Renal-Amirosy
Medicaid	TN	19105	Ablation, cryosurgical, of fibroadenoma, including ultrasound guidance, each fibroadenoma
Medicaid	TN	S2403	Repair, extralobar pulmonary sequestration in the fetus, procedure performed in utero

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	21195	Reconstruction, Mandibular Rami &/Or Body, Sagittal Split; W/O Int Rigid Fixation
Medicaid	TN	54400	Insertion, Penile Prosthesis; Non-Inflatable (Semi-Rigid)
Medicaid	TN	36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated
Medicaid	TN	E1016	Shock Absorber For Power Wheelchair, Each
Medicaid	TN	E2612	Gen use back cush wtdh>=22in
Medicaid	TN	E2627	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, adjustable Rancho type
Medicaid	TN	E2322	Power wheelchair accessory, hand control interface, multiple mechanical switches
Medicaid	TN	E2328	Power wheelchair accessory, head control or extremity control interface, electronic, proportional
Medicaid	TN	E2342	Power wheelchair accessory, nonstandard seat frame depth, 20 or 21 inches
Medicaid	TN	E1223	Wheelchair Spec Size W Foot
Medicaid	TN	E1230	Power Operated Vehicle
Medicaid	TN	E0641	Standing frame/table system, multi-position (e.g., 3-way stander), any size including pediatric, with or without wheels
Medicaid	TN	E0985	Wheelchair accessory, seat lift mechanism
Medicaid	TN	E1011	Modification To Pediatric Wheelchair, Width Adjustment Package (Not To
Medicaid	TN	K0830	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 30
Medicaid	TN	K0823	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0824	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	L2034	KAFO, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without f
Medicaid	TN	20979	Low Intensity Ultrasound Stimulation To Aid Bone Healing; Noninvasive
Medicaid	TN	S8085	Fluorine-18 Fluorodeoxygluco
Medicaid	TN	L6925	Wrist Disart Myoelectronic C
Medicaid	TN	S2235	Implantation of auditory brain stem implant
Medicaid	TN	22804	Arthrodesis, Posterior, Spinal Deformity, W/Wo Cast; 13+ Vertebral Segments
Medicaid	TN	32856	Backbench Standard Preparation Of Cadaver Donor Lung Allograft; Bilateral
Medicaid	TN	38205	Blood-Derived Hematopoietic Progenitor Cell Harvesting, Transplantation/Collection; Allogenic
Medicaid	TN	50329	Backbench Reconstruction Of Cadaver Or Living Donor Renal Allograft Prior To Transplantation; Ureteral Anastomosis, Each
Medicaid	TN	S9961	Ambulance service, conventional air service, nonemergency transport, one way (rotary wing)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	S9366	Home infusion therapy, total parenteral nutrition (TPN); more than one liter but no more than two liters per day
Medicaid	TN	33935	Heart-Lung Transplant W/Recipient Cardiectomy-Pneumonectomy
Medicaid	TN	47381	Ablation, Open, 1+ Liver Tumor(S); Cryosurgical
Medicaid	TN	22856	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes
Medicaid	TN	H2019	Therapeutic behavioral services, per 15 minutes
Medicaid	TN	J9308	Injection, ramucirumab, 5 mg
Medicaid	TN	J9330	Injection, tamsulosin, 1 mg
Medicaid	TN	J9400	Injection, ziv-aflibercept, 1 mg
Medicaid	TN	S2112	Arthroscopy, knee, surgical for harvesting of cartilage (chondrocyte cells)
Medicaid	TN	J3145	Injection, testosterone undecanoate, 1 mg
Medicaid	TN	J0587	Injection, Rimabotulinumtoxinb, 100 Units
Medicaid	TN	E0986	Manual wheelchair accessory, push-rim activated power assist, each
Medicaid	TN	42145	Palatopharyngoplasty
Medicaid	TN	S5102	Day Care Services, Adult, Per Diem
Medicaid	TN	S5120	Chore Services, Per 15 Minutes
Medicaid	TN	S5161	Emergency Response System, Service Fee Per Month
Medicaid	TN	C2622	Prosthesis, penile, noninflatable
Medicaid	TN	E0191	Protector Heel Or Elbow
Medicaid	TN	J7179	Injection, von willebrand factor (recombinant), (vonvendi), 1 i.u. vwf:rc0
Medicaid	TN	J7190	Factor VIII
Medicaid	TN	J1826	Injection, interferon beta-1a, 30 mcg
Medicaid	TN	J2354	Injection, octreotide, non-depot form for subcutaneous or intravenous
Medicaid	TN	J0881	Injection, darbepoetin alfa, 1 mcg (non-ESRD use)
Medicaid	TN	64864	Suture, Facial Nerve; Extracranial
Medicaid	TN	64734	Transection/Avulsion; Infraorbital Nerve
Medicaid	TN	J9042	Injection, brentuximab vedotin, 1 mg
Medicaid	TN	0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi
Medicaid	TN	29915	Arthroscopy, subtalar joint, surgical; with acetabuloplasty (ie, treatment of pincer lesion)
Medicaid	TN	E1029	Wheelchair accessory, ventilator tray, fixed
Medicaid	TN	E0693	Ultraviolet Light Therapy System Panel, Includes Bulbs/Lamps, Timer An
Medicaid	TN	E0968	Wheelchair Commode Seat
Medicaid	TN	E0273	Bed Board
Medicaid	TN	E1399	Durable medical equipment, miscellaneous
Medicaid	TN	A4630	Replacement batteries, medically necessary, transcutaneous electrical stimulator, owned by patient
Medicaid	TN	E2629	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, friction arm support (friction dampening to proximal and distal joints)
Medicaid	TN	E2206	Manual wheelchair accessory, wheel lock assembly, complete, replacement only, each
Medicaid	TN	E2212	Manual wheelchair accessory, tube for pneumatic propulsion tire, any size, each

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2216	Manual wheelchair accessory, foam filled propulsion tire, any size, each
Medicaid	TN	E2325	Power wheelchair accessory, sip and puff interface, nonproportional
Medicaid	TN	E1220	Whlchr Special Size/Constrc
Medicaid	TN	E1233	Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adj, Wo Seating
Medicaid	TN	K0008	Custom manual wheelchair/base
Medicaid	TN	K0808	POWER OPERATED VEHICLE, GROUP 2 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0829	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
Medicaid	TN	L8683	Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver
Medicaid	TN	50320	Donor Nephrectomy, Open, Living Donor W/O Allograft Preparation & Maintenance
Medicaid	TN	64505	Injection, Anesthetic Agent; Sphenopalatine Ganglion
Medicaid	TN	17380	Electrolysis epilation, each 30 minutes
Medicaid	TN	22554	Arthrodesis, Anterior Interbody, W/Minimal Diskectomy; Cervical Below C2
Medicaid	TN	47140	Donor Hepatectomy, with Preparation and Maintenance of Allograft, Living Donor; Left Lateral Segment Only
Medicaid	TN	54417	Removal & Replace, Non-Inflatable/Inflatable Penile Prosthesis Infect, W/Irrig & Debride
Medicaid	TN	17107	Destruction, Cutaneous Vascular Proliferative Lesions; 10.0-50.0 Sq Cm
Medicaid	TN	15821	Blepharoplasty, Lower Eyelid; W/Extensive Herniated Fat Pad
Medicaid	TN	93352	Use of echocardiographic contrast agent during stress echocardiography (List separately in addition to code for primary
Medicaid	TN	27138	Revision, Total Hip Arthroplasty; Femoral Component Only, W/Wo Allograft
Medicaid	TN	0495T	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (eg, pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; first two hours in sterile field
Medicaid	TN	32851	Lung Transplant, Single; W/O Cardiopulmonary Bypass
Medicaid	TN	32852	Lung Transplant, Single; W/Cardiopulmonary Bypass
Medicaid	TN	B4224	Parenteral Administration Ki
Medicaid	TN	0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles
Medicaid	TN	63005	Laminectomy W/O Facetectomy/Foraminotomy/Diskectomy, 1/2 Segments; Lumbar
Medicaid	TN	J7178	Injection, human fibrinogen concentrate, not otherwise specified, 1 mg
Medicaid	TN	J7191	Factor Viii (Porcine)
Medicaid	TN	J7198	Anti-Inhibitor
Medicaid	TN	J2941	Injection, somatropin, 1 mg
Medicaid	TN	J0887	Injection, epoetin beta, 1 microgram, (for esrd on dialysis)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J0207	Amifostine
Medicaid	TN	90283	Immune Globulin (Igiv), Human, Iv Use
Medicaid	TN	S2061	Donor Lobectomy (Lung)
Medicaid	TN	J9043	Injection, cabazitaxel, 1 mg
Medicaid	TN	J9145	Injection, daratumumab, 10 mg
Medicaid	TN	H2015	Comprehensive community support services, per 15 minutes
Medicaid	TN	48556	Removal, Transplanted Pancreatic Allograft
Medicaid	TN	50325	Backbench Standard Preparation Of Living Donor Renal Allograft (Open Or Laparoscopic)
Medicaid	TN	19367	Breast Reconstruction W/Myocutaneous (Tram) Flap, Single Pedicle W/Closure Donor Site;
Medicaid	TN	15833	Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg
Medicaid	TN	22513	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic
Medicaid	TN	27120	Acetabuloplasty;
Medicaid	TN	E2210	Wheelchair accessory, bearings, any type, replacement only, each
Medicaid	TN	90869	Therapeutic Repetitive Transcranial Magnetic Stimulation (Tms) Treatment; Subsequent Motor Threshold Re-Determination With Delivery And Management
Medicaid	TN	L5856	Elec knee-shin swing/stance
Medicaid	TN	50300	Donor Nephrectomy; Cadaver Donor, Unilat/Bilat W/Prep & Maintenance, Allograft
Medicaid	TN	33982	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, without cardiopulmonary
Medicaid	TN	E0189	Lambswool Sheepskin Pad
Medicaid	TN	E2396	POWER WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH
Medicaid	TN	E2392	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED
Medicaid	TN	E2213	Manual wheelchair accessory, insert for pneumatic propulsion tire (removable), any type, any size, each
Medicaid	TN	E2214	Manual wheelchair accessory, pneumatic caster tire, any size, each
Medicaid	TN	E1171	Wheelchair Amputee W/O Leg R
Medicaid	TN	E0955	Wheelchair accessory, headrest, cushioned, prefabricated, including fixed mounting hardware, each
Medicaid	TN	E1014	Reclining Back, Addition To Pediatric Wheelchair
Medicaid	TN	E1028	Wheelchair accessory, manual swingaway, retractable or removable mounting hardware
Medicaid	TN	E0760	Osteogen Ultrasound Stimltor
Medicaid	TN	K0828	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
Medicaid	TN	E2609	Custom fabricate w/c cushion
Medicaid	TN	E2626	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, adjustable

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2327	Power wheelchair accessory, head control interface, mechanical, proportional
Medicaid	TN	L5981	Flex-Walk Sys Low Ext Prosth
Medicaid	TN	L6880	Electric hand, switch or myoelectric controlled, independently articulating digits, any grasp pattern or combination of grasp patterns, includes motor(s)
Medicaid	TN	43257	Esophagogastroduodenoscopy, flexible, transoral; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease
Medicaid	TN	K0880	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 451 TO 600 POUNDS
Medicaid	TN	L8688	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension
Medicaid	TN	L6965	Shldr Disartic Myoelectronic
Medicaid	TN	L5702	Replace Socket Hip
Medicaid	TN	T1019	Personal Care Services, Per 15 Minutes, Not For An Inpatient Or Reside
Medicaid	TN	H0043	Supported housing, per diem
Medicaid	TN	H0044	Supported housing, per month
Medicaid	TN	93318	Tee For Monitoring, W/Probe, Real Time 2d Acquis & Interpret, Cont Assess Cardiac Pump & Therapeutic
Medicaid	TN	J1675	Injection, histrelin acetate, 10 mcg
Medicaid	TN	T1502	Administration of oral, intramuscular and/or subcutaneous medication by health care agency/professional, per visit
Medicaid	TN	S5151	Unskilled Respite Care, Not Hospice, Per Diem
Medicaid	TN	C1813	Prosthesis, penile, inflatable
Medicaid	TN	E0270	Hospital Bed Institutional T
Medicaid	TN	S5101	Day Care Services, Adult, Per Half Day
Medicaid	TN	S5105	Day Care Services, Center Based, Not Incl In Program Fee, Per Diem
Medicaid	TN	S5130	Homemaker Service, NOS, Per 15 Minutes
Medicaid	TN	J7199	Hemophilia Clot Factor Noc
Medicaid	TN	0007U	Drug test(s), presumptive, with definitive confirmation of positive results, any number of drug classes, urine, includes specimen verification including DNA authentication in comparison to buccal DNA, per date of service
Medicaid	TN	T2030	Assisted living, waiver; per month
Medicaid	TN	S5140	Foster Care, Adult, Per Diem
Medicaid	TN	93025	Microvolt T-Wave Alternans, Assessment, Ventricular Arrhythmias
Medicaid	TN	H0019	Behavioral health; long-term residential (nonmedical, nonacute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem
Medicaid	TN	H0025	Behavioral health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior)
Medicaid	TN	S5126	Attendant Care Services, Per Diem
Medicaid	TN	S5135	Companion Care, Adult, Per 15 Minutes
Medicaid	TN	S5136	Companion Care, Adult, Per Diem

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	H0008	Alcohol and/or drug services; subacute detoxification (hospital inpatient)
Medicaid	TN	E0472	Respiratory assist device, bi-level pressure capability, with backup rate
Medicaid	TN	H2012	Behavioral health day treatment, per hour
Medicaid	TN	S5125	Attendant Care Services, Per 15 Minutes
Medicaid	TN	S5160	Emergency Response System, Installation And Testing
Medicaid	TN	E1037	Transport Chair, Pediatric Size
Medicaid	TN	Q0515	Injection, sermorelin acetate, 1 mcg
Medicaid	TN	J9285	Injection, olaratumab, 10 mg
Medicaid	TN	S5170	Home Delivered Meals, Including Preparation, Per Meal
Medicaid	TN	H0032	Mental health service plan development by nonphysician
Medicaid	TN	T2031	Assisted living; waiver, per diem
Medicaid	TN	S5150	Unskilled Respite Care, Not Hospice, Per 15 Minutes
Medicaid	TN	L6100	Elb Mold Sock Flex Hinge Pad
Medicaid	TN	J9999	NOC, antineoplastic drug
Medicaid	TN	C9727	Insertion of implants into the soft palate; minimum of 3 implants
Medicaid	TN	H0036	Community psychiatric supportive treatment, face-to-face, per 15 minutes
Medicaid	TN	53860	Transurethral radiofrequency micro-remodeling of the female bladder neck and proximal urethra for stress urinary incontinence
Medicaid	TN	0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles
Medicaid	TN	63035	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; each additional interspace, cervical or lumbar (List separately in addition to code for primary procedure)
Medicaid	TN	L8600	Implant Breast Silicone/Eq
Medicaid	TN	29914	Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)
Medicaid	TN	29916	Arthroscopy, hip, surgical; with labral repair
Medicaid	TN	63012	Laminectomy W/Removal, Abnormal Facets, Lumbar
Medicaid	TN	63017	Laminectomy W/O Facetectomy/Foraminotomy/Diskectomy, > 2 Segments; Lumbar
Medicaid	TN	30999	Unlisted Proc, Nose
Medicaid	TN	41512	Tongue base suspension, permanent suture technique
Medicaid	TN	30117	Excision/Destruction, Intranasal Lesion; Int Approach
Medicaid	TN	J9355	Injection, trastuzumab, excludes biosimilar, 10 mg
Medicaid	TN	J9395	Injection, fulvestrant, 25 mg
Medicaid	TN	Q4081	INJECTION, EPOETIN ALFA, 100 UNITS (FOR ESRD ON DIALYSIS)
Medicaid	TN	Q5101	Injection, filgrastim-sndz, biosimilar, (zarxio), 1 microgram
Medicaid	TN	Q3027	Injection, interferon beta-1a, 1 mcg for intramuscular use
Medicaid	TN	Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use
Medicaid	TN	Q4074	Iloprost, Inhalation Solution, Fda-Approved Final Product, Non-Compounded, Administered Through Dme, Unit Dose Form, Up
Medicaid	TN	S0155	Sterile dilutant for epoprostenol, 50 ml
Medicaid	TN	S2340	Chemodenervation Of Abductor

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	S2341	Chemodervation of adductor muscle(s) of vocal cord
Medicaid	TN	S9338	Home infusion therapy, immunotherapy therapy
Medicaid	TN	S2118	Metal-on-metal total hip resurfacing including acetabular and femoral components
Medicaid	TN	S9347	Home infusion therapy, uninterrupted, long-term, controlled rate intravenous infusion therapy (e.g., Epoprostenol)
Medicaid	TN	S9559	Home injectable therapy; interferon
Medicaid	TN	S9562	Home Injectable Therapy, Palivizumab, Including Administrative Service
Medicaid	TN	27437	Arthroplasty, Patella; W/O Prosthesis
Medicaid	TN	S9558	Home injectable therapy; growth hormone,
Medicaid	TN	27447	Arthroplasty, Knee, Condyle & Plateau; Medial & Lateral Compartments, W/Wo Patella Resurfacing
Medicaid	TN	J9034	Injection, bendamustine hcl (bendecka), 1 mg
Medicaid	TN	J9032	Injection, belinostat, 10 mg
Medicaid	TN	J9033	Injection, bendamustine HCl (Treanda), 1 mg
Medicaid	TN	J9039	Injection, blinatumomab, 1 microgram
Medicaid	TN	J9055	Cetuximab injection
Medicaid	TN	J9047	Injection, carfilzomib, 1 mg
Medicaid	TN	J9176	Injection, elotuzumab, 1 mg
Medicaid	TN	T1000	Private duty/independent nursing service(s) - licensed, up to 15 minutes
Medicaid	TN	J9155	Injection, Degarelix, 1 Mg
Medicaid	TN	J9207	Injection, ixabepilone, 1 mg
Medicaid	TN	J9179	Injection, eribulin mesylate, 0.1 mg
Medicaid	TN	J9202	Goserelin Acetate Implant
Medicaid	TN	J9203	Injection, gemtuzumab ozogamicin, 0.1 mg
Medicaid	TN	J9216	Injection, interferon, gamma-1B, 3 million units
Medicaid	TN	J9226	Histrelin implant (supprelin LA), 50 mg
Medicaid	TN	J9228	Injection, ipilimumab, 1 mg
Medicaid	TN	J9262	Injection, omacetaxine mepesuccinate, 0.01 mg
Medicaid	TN	J9264	Injection, paclitaxel protein-bound particles, 1 mg
Medicaid	TN	J9271	Injection, pembrolizumab, 1 mg
Medicaid	TN	J9266	Injection, pegaspargase, per single dose vial
Medicaid	TN	J9299	Injection, nivolumab, 1 mg
Medicaid	TN	J9301	Injection, obinutuzumab, 10 mg
Medicaid	TN	J9302	Injection, ofatumumab, 10 mg
Medicaid	TN	J9303	Injection, panitumumab, 10 mg
Medicaid	TN	J9305	Pemetrexed injection
Medicaid	TN	J9306	Injection, pertuzumab, 1 mg
Medicaid	TN	J9354	Injection, ado-trastuzumab emtansine, 1 mg
Medicaid	TN	27416	Osteochondral autograft(s), knee, open (eg, mosaicplasty) (includes harvesting of autograft(s))
Medicaid	TN	S2053	Transplantation Of Small Int
Medicaid	TN	S2054	Transplantation Of Multivisc
Medicaid	TN	S2060	Lobar Lung Transplantation
Medicaid	TN	S2065	Simultaneous pancreas kidney transplantation
Medicaid	TN	J7686	Treprostinil, inhalation solution, fda-approved final product, non-compounded, administered through dme, unit dose form, 1.74 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	S2066	Breast reconstruction with gluteal artery perforator (GAP) flap, including
Medicaid	TN	S2067	Breast reconstruction of a single breast with "stacked" deep inferior
Medicaid	TN	J7999	Compounded drug, not otherwise classified
Medicaid	TN	S2068	Breast reconstruction with deep inferior epigastric perforator (DIEP) flap or superficial inferior epigastric artery (SI
Medicaid	TN	S2080	Laser-assisted uvulopalatoplasty (LAUP)
Medicaid	TN	J9015	Injection, aldesleukin, per single use vial
Medicaid	TN	S2117	Arthroereisis, subtalar
Medicaid	TN	J9022	Injection, atezolizumab, 10 mg
Medicaid	TN	J9023	Injection, avelumab, 10 mg
Medicaid	TN	H2016	Comprehensive community support services, per diem
Medicaid	TN	27412	Autologous Chondrocyte Implantation, Knee
Medicaid	TN	J7340	Carbidopa 5 mg/levodopa 20 mg enteral suspension, 100 ml
Medicaid	TN	27415	Osteochondral allograft, knee, open
Medicaid	TN	J7311	Injection, fluocinolone acetonide, intravitreal implant (Retisert), 0.01 mg
Medicaid	TN	J7312	Injection, dexamethasone, intravitreal implant, 0.1 mg
Medicaid	TN	93580	Perc Transcatheter Closure, Congenital Interatrial Communication W/Implant
Medicaid	TN	J7313	Injection, fluocinolone acetonide, intravitreal implant (Iluvien), 0.01 mg
Medicaid	TN	J7189	Factor VIIa (antihemophilic Factor, recombinant), per 1 mcg
Medicaid	TN	J7192	Factor VIII (Antihemophilic Factor, Recombinant) Per I.U., Not Otherwise Specified
Medicaid	TN	J7193	Factor IX (antihemophilic factor, purified, non-recombinant) per IU
Medicaid	TN	J7194	Factor IX Complex
Medicaid	TN	J7195	Factor IX (antihemophilic factor, recombinant) per IU
Medicaid	TN	J7200	Injection, factor ix, (antihemophilic factor, recombinant), rixubis, per iu
Medicaid	TN	J7201	Injection, factor IX, Fc fusion protein, (recombinant), Alprolix, 1 IU
Medicaid	TN	J7202	Injection, factor ix, albumin fusion protein, (recombinant), idelvion, 1 i.u.
Medicaid	TN	J7205	Injection, factor viii fc fusion (recombinant), per iu
Medicaid	TN	J7207	Injection, factor viii, (antihemophilic factor, recombinant), pegylated, 1 i.u.
Medicaid	TN	J7209	Injection, factor viii, (antihemophilic factor, recombinant), (nuwiq), 1 i.u.
Medicaid	TN	J7210	Injection, Factor VIII, (antihemophilic factor, recombinant), (Afstyla), 1 IU
Medicaid	TN	J7211	Injection, Factor VIII, (antihemophilic factor, recombinant), (Kovaltry), 1 IU
Medicaid	TN	J3489	Injection, zoledronic acid, 1 mg
Medicaid	TN	J7175	Injection, factor x, (human), 1 i.u.
Medicaid	TN	J7180	Injection, factor XIII (antihemophilic factor, human), 1 IU
Medicaid	TN	J7181	Injection, factor xiii a-subunit, (recombinant), per iu
Medicaid	TN	J7186	Injection, antihemophilic factor VIII/von Willebrand factor complex (human), per factor VIII i.u.
Medicaid	TN	J7188	Injection, factor viii (antihemophilic factor, recombinant), (obizur), per i.u.
Medicaid	TN	J7182	Injection, factor viii, (antihemophilic factor, recombinant), (novoeight), per iu
Medicaid	TN	J7183	Injection, von Willebrand factor complex (human), Wilate, 1 IU vWF:RCO

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J7185	Injection, Factor Viii (Antihemophilic Factor, Recombinant) (Xyntha), Per I.U.
Medicaid	TN	J2326	Injection, nusinersen, 0.1 mg
Medicaid	TN	J2278	Injection, ziconotide, 1 mcg
Medicaid	TN	J2353	Injection, octreotide, depot form for intramuscular injection, 1 mg
Medicaid	TN	J2502	Injection, pasireotide long acting, 1 mg
Medicaid	TN	J2562	Injection, Plerixafor, 1 Mg
Medicaid	TN	J2778	Injection, ranibizumab, 0.1 mg
Medicaid	TN	J2793	Injection, Rilonacept, 1 Mg
Medicaid	TN	J2820	Sargramostim Injection
Medicaid	TN	J2860	Injection, siltuximab, 10 mg
Medicaid	TN	J3110	Teriparatide injection
Medicaid	TN	J3121	Injection, testosterone enanthate, 1mg
Medicaid	TN	J3285	Injection, treprostinil, 1 mg
Medicaid	TN	J3241	Injection, teprotumumab-trbw, 10 mg
Medicaid	TN	J3357	Ustekinumab, for subcutaneous injection, 1 mg
Medicaid	TN	J3358	Ustekinumab, for intravenous injection, 1 mg
Medicaid	TN	J1744	Injection, icatibant, 1 mg
Medicaid	TN	J1746	Injection, ibalizumab-uiyk, 10 mg
Medicaid	TN	J1830	Interferon Beta-1b / .25 Mg
Medicaid	TN	J1930	Injection, lanreotide, 1 mg
Medicaid	TN	27130	Arthroplasty, Acetabular/Proximal Femoral Prosthetic Replacement, W/Wo Autograft/Allograft
Medicaid	TN	J2170	INJECTION, MECASERMIN, 1 MG
Medicaid	TN	J2182	Injection, mepolizumab, 1 mg
Medicaid	TN	J1290	Injection, ecallantide, 1 mg
Medicaid	TN	J1324	INJECTION, ENFUVIRTIDE, 1 MG
Medicaid	TN	J1325	Epoprostenol Injection
Medicaid	TN	J1428	Injection, eteplirsen, 10 mg
Medicaid	TN	J1438	Etanercept Injection
Medicaid	TN	J1442	5G-CSFexcludes biosimilars, 1 microgram
Medicaid	TN	J1447	Injection, tbo-filgrastim, 1 microgram
Medicaid	TN	J1555	Injection, immune globulin (Cuvitru), 100 mg
Medicaid	TN	J1575	Injection, immune globulin/hyaluronidase, (hyqvia), 100 mg immunoglobulin
Medicaid	TN	J1595	Injection, glatiramer acetate, 20 mg
Medicaid	TN	27125	Hemiarthroplasty, Hip, Partial
Medicaid	TN	J0597	Injection, c-1 esterase inhibitor (human), berinert, 10 units
Medicaid	TN	J0598	Injection, c-1 esterase inhibitor (human), cinryze, 10 units
Medicaid	TN	J0638	Injection, canakinumab, 1 mg
Medicaid	TN	J0641	Injection, levoleucovorin, 0.5 mg
Medicaid	TN	J0596	Injection, c1 esterase inhibitor (recombinant), ruconest, 10 units
Medicaid	TN	J0717	Injection, certolizumab pegol, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)
Medicaid	TN	J0885	Injection, epoetin alfa, (for non-ESRD use), 1000 units
Medicaid	TN	J0775	Injection, collagenase, clostridium histolyticum, 0.01 mg

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	J0882	Injection, darbepoetin alfa, 1 mcg (for ESRD on dialysis)
Medicaid	TN	J0897	Injection, denosumab, 1 mg
Medicaid	TN	J1071	Injection, testosterone cypionate, 1mg
Medicaid	TN	J0888	Injectin, epoetin beta, 1 microgram, (for non esrd use)
Medicaid	TN	69955	Total Facial Nerve Decompression &/Or Repair, (May Include Graft)
Medicaid	TN	J0585	Injection, Onabotulinumtoxina, 1 Unit
Medicaid	TN	J0586	Injection, Abobotulinumtoxina, 5 Units
Medicaid	TN	J0565	Injection, bezlotoxumab, 10 mg
Medicaid	TN	J0588	Injection, incobotulinumtoxinA, 1 unit
Medicaid	TN	69300	Otoplasty, Protruding Ear, W/Wo Size Reduction
Medicaid	TN	J0178	Injection, aflibercept, 1 mg
Medicaid	TN	J0202	Injection, alemtuzumab, 1 mg
Medicaid	TN	64865	Suture, Facial Nerve; Infratemporal, W/Wo Grafting
Medicaid	TN	64866	Anastomosis; Facial-Spinal Accessory
Medicaid	TN	64868	Anastomosis; Facial-Hypoglossal
Medicaid	TN	90284	Immune globulin (SCIg), human, for use in subcutaneous infusions, 100mg, each
Medicaid	TN	90378	Respiratory syncytial virus, monoclonal antibody, recombinant, for intramuscular use, 50 mg, each
Medicaid	TN	64736	Transection/Avulsion; Mental Nerve
Medicaid	TN	64738	Transection/Avulsion; Inferior Alveolar Nerve, Osteotomy
Medicaid	TN	64740	Transection/Avulsion; Lingual Nerve
Medicaid	TN	64732	Transection/Avulsion; Supraorbital Nerve
Medicaid	TN	64742	Transection/Avulsion; Facial Nerve, Differential/Complete
Medicaid	TN	64640	Destruction, Neurolytic; Other Peripheral Nerve/Branch
Medicaid	TN	64716	Neuroplasty &/Or Transposition; Cranial Nerve (Specify)
Medicaid	TN	64581	Incision for implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)
Medicaid	TN	64590	Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupl
Medicaid	TN	64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)
Medicaid	TN	64553	Percutaneous implantation of neurostimulator electrode array; cranial nerve
Medicaid	TN	64555	Percutaneous implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)
Medicaid	TN	64561	Percutaneous implantation of neurostimulator electrode array; sacral nerve (transforaminal placement) including image guidance, if performed
Medicaid	TN	64568	Incision for implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator
Medicaid	TN	64575	Incision for implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)
Medicaid	TN	63655	Laminectomy, Implantation, Neurostimulator Electrodes, Plate/Paddle, Epidural

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	63685	Incision/Placement, Spinal Neurostimulator Pulse Generator/Receiver
Medicaid	TN	E0761	Non-Thermal Pulsed High Frequency Radiowaves, High Peak Power Electrom
Medicaid	TN	K0108	W/C Component-Accessory Nos
Medicaid	TN	63185	Laminectomy with rhizotomy; 1 or 2 segments
Medicaid	TN	63190	Laminectomy with rhizotomy; more than 2 segments
Medicaid	TN	S5108	Home care training to home care client, per 15 minutes
Medicaid	TN	S5110	Home Care Training, Family, Per 15 Minutes
Medicaid	TN	62263	Lysis, Perq, Epidural Adhesions, Solution Injection/Mechanical W/Radiologic Localization; 2 Days/>
Medicaid	TN	62264	Lysis, Perq Epidural Adhesions, Solution Injection/Mechanical W/Radiologic Localization; 1 Day
Medicaid	TN	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)
Medicaid	TN	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance
Medicaid	TN	61864	Burr Hole Craniotomy w Implantation of Subcortical Electrode Array, wo Intraop Microelectrode Recording; ea addl Array
Medicaid	TN	61867	Burr Hole Craniotomy with Implantation of Subcortical Electrode Array, w Intraop Microelectrode Recording; First Array
Medicaid	TN	61868	Burr Hole Craniotomy w Implantation of Subcortical Electrode Array, w Intraop Microelectrode Recording; ea addl Array
Medicaid	TN	61863	Burr Hole Craniotomy with Implantation of Subcortical Electrode Array, wo Intraop Microelectrode Recording; First Array
Medicaid	TN	61885	Subq Placement Cranial Neurostimulator Pulse Generator/Receiver; W/Connection Sngle Electrode Array
Medicaid	TN	61886	Subq Placement Cranial Neurostimulator Pulse Generator/Receiver; W/Connection 2+ Electrode Arrays
Medicaid	TN	61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous
Medicaid	TN	22533	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompr
Medicaid	TN	22558	Arthrodesis, Anterior Interbody, W/Minimal Discectomy; Lumbar
Medicaid	TN	22630	Arthrodesis, Post Interbody W/Laminectomy &/Or Discect, Prep Interspace, Single Interspace; Lumbar
Medicaid	TN	H0039	Assertive community treatment, face-to-face, per 15 minutes
Medicaid	TN	H0040	Assertive community treatment program, per diem
Medicaid	TN	58999	Unlisted Proc, Female Genital System (Nonobstetrical)
Medicaid	TN	32850	Donor pneumonectomy(s) (including cold preservation), from cadaver donor

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	50360	Renal Allotransplantation, Implantation, Graft; W/O Donor & Recipient Nephrectomy
Medicaid	TN	0012M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having urothelial carcinoma
Medicaid	TN	0016U	Oncology (hematolymphoid neoplasia), RNA, BCR/ABL1 major and minor breakpoint fusion transcripts, quantitative PCR amplification, blood or bone marrow, report of fusion not detected or detected with quantitation
Medicaid	TN	22585	Arthrodesis, Anterior Interbody, W/Minimal Discectomy; Add'l Interspace
Medicaid	TN	0040U	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis, major breakpoint, quantitative
Medicaid	TN	22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; lumbar
Medicaid	TN	22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; each additional interspace and segment (List separately in addition to code for primary procedure)
Medicaid	TN	21122	Genioplasty; sliding osteotomies, 2 or more osteotomies (eg, wedge excision or bone wedge reversal for asymmetrical chin
Medicaid	TN	48554	Transplantation, Pancreatic Allograft
Medicaid	TN	22552	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace (List separately in addition to code for separate procedure)
Medicaid	TN	22551	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2
Medicaid	TN	47141	Donor Hepatectomy, with Preparation and Maintenance of Allograft, Living Donor; Total Left Lobectomy
Medicaid	TN	47142	Donor Hepatectomy, with Preparation and Maintenance of Allograft, Living Donor; Total Right Lobectomy
Medicaid	TN	15877	Suction Assisted Lipectomy; Trunk
Medicaid	TN	47135	Liver Allotransplantation; Orthotopic, Partial/Whole, Cadaver/Living Donor, Any Age
Medicaid	TN	T1030	Nursing Care, In The Home, By Registered Nurse, Per Diem
Medicaid	TN	22512	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure)

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	22511	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; lumbosacral
Medicaid	TN	22514	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; lumbar
Medicaid	TN	T1031	Nursing Care, In The Home, By Licensed Practical Nurse, Per Diem
Medicaid	TN	22515	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure)
Medicaid	TN	32854	Lung Transplant, Double (Bilat Sequential/En Bloc); W/Cardiopulmonary Bypass
Medicaid	TN	T1003	LPN/LVN services, up to 15 minutes
Medicaid	TN	T1022	Contracted Home Health Agency Services, All Services Provided Under Co
Medicaid	TN	22510	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic
Medicaid	TN	T1002	RN services, up to 15 minutes
Medicaid	TN	S9960	Ambulance service, conventional air services, nonemergency transport, one way (fixed wing)
Medicaid	TN	30120	Excision/Surgical Planing, Skin, Nose, Rhinophyma
Medicaid	TN	H0046	Mental health services, not otherwise specified
Medicaid	TN	S9434	Modified solid food supplements for inborn errors of metabolism
Medicaid	TN	S9435	Medical Foods For Inborn Err
Medicaid	TN	S9364	Home infusion therapy, total parenteral nutrition (TPN) (do not use with home infusion codes S9365-S9368 using daily vol
Medicaid	TN	S9365	Home infusion therapy, total parenteral nutrition (TPN); one liter per day
Medicaid	TN	S9367	Home infusion therapy, total parenteral nutrition (TPN); more than two liter but no more than three liters per day
Medicaid	TN	S9368	Home infusion therapy, total parenteral nutrition (TPN); more than three liter per day
Medicaid	TN	90281	Immune Globulin (Ig), Human, Im Use
Medicaid	TN	37241	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (eg, congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)
Medicaid	TN	J9225	Histrelin implant (Vantas), 50 mg
Medicaid	TN	J3315	Injection, Triptorelin Pamoate, 3.75 Mg
Medicaid	TN	J1950	Leuprolide Acetate /3.75 Mg
Medicaid	TN	J9217	Leuprolide Acetate Suspnsion
Medicaid	TN	S9128	Speech Therapy, In The Home

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	S9129	Occupational Therapy, In The
Medicaid	TN	S5109	Home care training to home care client, per 15 minutes per session
Medicaid	TN	S5111	Home Care Training, Family, Per Session
Medicaid	TN	S5116	Home Care Training, Non-Family, Per Session
Medicaid	TN	0362T	Behavior identification supporting assessment, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior.
Medicaid	TN	27132	Conversion, Previous Hip Surgery To Total Hip Arthroplasty, W/Wo Autograft/Allograft
Medicaid	TN	44133	Donor Enterectomy, Open With Prep & Maintenance, Allograft; Partial, Living Donor
Medicaid	TN	44135	Intestinal Allotransplantation; From Cadaver Donor
Medicaid	TN	44136	Intestinal Allotransplantation; From Living Donor
Medicaid	TN	44132	Donor Enterectomy, Open, W/Prep & Maintenance, Allograft; Cadaver Donor
Medicaid	TN	0013M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having recurrent urothelial carcinoma
Medicaid	TN	S2150	Bone marrow or blood-derived peripheral stem cell harvesting and transplantation, allogenic or autologous, including phe
Medicaid	TN	22595	Arthrodesis, Posterior Technique, Atlas-Axis
Medicaid	TN	S1040	CRANIAL REMOLDING ORTHOSIS, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL,
Medicaid	TN	22612	Arthrodesis, posterior or posterolateral technique, single level; lumbar (with lateral transverse technique, when performed)
Medicaid	TN	S2055	Harvesting Of Donor Multivis
Medicaid	TN	64520	Injection, Anesthetic Agent; Lumbar/Thoracic (Paravertebral Sympathetic)
Medicaid	TN	S2140	Cord Blood Harvesting
Medicaid	TN	S2142	Cord Blood-Derived Stem-Cell
Medicaid	TN	22590	Arthrodesis, Posterior Technique, Craniocervical
Medicaid	TN	50323	Backbench Standard Preparation Of Cadaver Donor Renal Allograft
Medicaid	TN	50327	Backbench Reconstruction Of Cadaver Or Living Donor Renal Allograft Prior To Transplantation; Venous Anastomosis, Each
Medicaid	TN	50328	Backbench Reconstruction Of Cadaver Or Living Donor Renal Allograft Prior To Transplantation; Arterial Anastomosis, Each
Medicaid	TN	64405	Injection, Anesthetic Agent; Greater Occipital Nerve
Medicaid	TN	64417	Injection, Anesthetic Agent; Axillary Nerve
Medicaid	TN	38204	Management, Recipient Hematopoietic Progenitor Cell Donor Search & Cell Acquisition
Medicaid	TN	38207	Transplant Preparation, Hematopoietic Progenitor Cells; Cryopreservation & Storage

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	38208	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, without washing, per donor
Medicaid	TN	38209	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, with washing, per donor
Medicaid	TN	38210	Transplant Prep, Hematopoietic Progenitor Cells; Specfc Cell Deplet W/In Harvest, T-Cell Deplete
Medicaid	TN	41530	Submucosal ablation of the tongue base, radiofrequency, 1 or more sites, per session
Medicaid	TN	44715	Backbench Standard Preparation Of Cadaver Or Living Donor Intestine Allograft
Medicaid	TN	44720	Backbench Reconstruction Of Cadaver Or Living Donor Intestine Allograft; Venous Anastomosis, Each
Medicaid	TN	44721	Backbench Reconstruction Of Cadaver Or Living Donor Intestine Allograft; Arterial Anastomosis, Each
Medicaid	TN	47133	Donor Hepatectomy, W/Preparation & Maintenance, Allograft; Cadaver Donor
Medicaid	TN	47143	Backbench Standard Preparation Of Cadaver Donor Whole Liver Graft; Without Trisegment Or Lobe Split
Medicaid	TN	47144	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy
Medicaid	TN	47145	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy
Medicaid	TN	47146	Backbench Reconstruction Of Cadaver Or Living Donor Liver Graft Prior To Allotransplantation; Venous Anastomosis, Each
Medicaid	TN	47147	Backbench Reconstruction Of Cadaver Or Living Donor Liver Graft Prior To Allotransplantation; Arterial Anastomosis, Each
Medicaid	TN	48550	Donor Pancreatectomy, W/Prep & Maintenance, Cadaver Donor, W/Wo Duodenal Segment
Medicaid	TN	48551	Backbench Standard Preparation Of Cadaver Donor Pancreas Allograft
Medicaid	TN	48552	Backbench Reconstruction Of Cadaver Donor Pancreas Allograft Prior To Transplantation, Venous Anastomosis, Each
Medicaid	TN	21743	Reconstructive Repair, Pectus Excavatum/Carinatum; Minimal Invasive Approach, W/Thoracoscopy
Medicaid	TN	38211	Transplant Preparation, Hematopoietic Progenitor Cells; Tumor Cell Deplete
Medicaid	TN	38212	Transplant Preparation, Hematopoietic Progenitor Cells; Red Blood Cell Removal
Medicaid	TN	38213	Transplant Preparation, Hematopoietic Progenitor Cells; Platelet Depletion
Medicaid	TN	38214	Transplant Preparation, Hematopoietic Progenitor Cells; Plasma (Volume) Depletion
Medicaid	TN	38215	Transplant Prep, Hematoiepotic Progenitor Cells; Cell Conc, Plasma/Mononuclear/Buffy Coat
Medicaid	TN	32855	Backbench Standard Preparation Of Cadaver Donor Lung Allograft; Unilateral
Medicaid	TN	33933	Backbench Standard Preparation Of Cadaver Donor Heart/Lung Allograft

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	33944	Backbench Standard Preparation Of Cadaver Donor Heart Allograft
Medicaid	TN	20974	Electrical Stimulation To Aid Bone Healing; Noninvasive (Nonoperative)
Medicaid	TN	21086	Impression & Custom Preparation; Auricular Prosthesis
Medicaid	TN	19364	Breast Reconstruction W/Free Flap
Medicaid	TN	15775	Punch Graft, Hair Transplant; 1-15 Punch Grafts
Medicaid	TN	15842	Graft, Facial Nerve Paralysis; Free Muscle Flap, Microsurgical Technique
Medicaid	TN	15876	Suction Assisted Lipectomy; Head & Neck
Medicaid	TN	15837	Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand
Medicaid	TN	43842	Gastric Restrictive Proc, W/O Gastric Bypass, Morbid Obesity; Vertical-Banded Gastroplasty
Medicaid	TN	43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)
Medicaid	TN	21685	Hyoid Myotomy and Suspension
Medicaid	TN	C1767	Generator, neurostimulator (implantable), nonrechargeable
Medicaid	TN	C1778	Lead, neurostimulator (implantable)
Medicaid	TN	C1787	Patient programmer, neurostimulator
Medicaid	TN	C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system
Medicaid	TN	C1822	Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charging system
Medicaid	TN	L8679	Implantable neurostimulator, pulse generator, any type
Medicaid	TN	L8680	Implantable neurostimulator electrode, each
Medicaid	TN	L8681	Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only
Medicaid	TN	L8682	Implantable neurostimulator radiofrequency receiver
Medicaid	TN	L8685	Implantable neurostimulator pulse generator, single array, rechargeable, includes extension
Medicaid	TN	L8686	Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension
Medicaid	TN	L8687	Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension
Medicaid	TN	33262	Removal Of Pacing Cardioverter-Defibrillator Pulse Generator With Replacement Of Pacing Cardioverter-Defibrillator Pulse Generator; Single Lead System
Medicaid	TN	62320	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance
Medicaid	TN	L8692	Auditory Osseointegrated Device, External Sound Processor, Used Without Osseointegration, Body Worn, Includes Headband O
Medicaid	TN	L6881	AUTOMATIC GRASP FEATURE, ADDITION TO UPPER LIMB ELECTRIC PROSTHETIC TERMINAL

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	L6882	Microprocessor control feature, addition to upper limb prosthesis terminal device
Medicaid	TN	L6935	Below Elbow Myoelectronic Ct
Medicaid	TN	L7009	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, ADULT
Medicaid	TN	L7045	ELECTRIC HOOK, SWITCH OR MYOELECTRIC ONTROLLED, PEDIATRIC
Medicaid	TN	L6945	Elbow Disart Myoelectronic C
Medicaid	TN	L6955	Above Elbow Myoelectronic Ct
Medicaid	TN	L6975	Interscap-Thor Myoelectronic
Medicaid	TN	L7007	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, ADULT
Medicaid	TN	L7008	ELECTRIC HAND, SWITCH OR MYOELECTRIC, CONTROLLED, PEDIATRIC
Medicaid	TN	L7180	Electronic Elbow Utah Myoele
Medicaid	TN	L7181	Electronic elbow simultaneous
Medicaid	TN	L7190	Elbow Adolescent Myoelectron
Medicaid	TN	L7191	Elbow Child Myoelectronic Ct
Medicaid	TN	L8614	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
Medicaid	TN	L8619	Cochlear Implant, External Speech Processor And Controller, Integrated System, Replacement
Medicaid	TN	L8690	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS
Medicaid	TN	L5960	Endo Hip Ultra-Light Materia
Medicaid	TN	L5961	Addition, endoskeletal system, polycentric hip joint, pneumatic or hydraulic control, rotation control, with or without flexion and/or extension control
Medicaid	TN	50547	Laparoscopy, Surgical; Donor Nephrectomy, Living Donor W/O Allograft Prep & Maintenance
Medicaid	TN	L5968	Multiaxial Ankle W Dorsiflex
Medicaid	TN	L5979	Multi-Axial Ankle/Ft Prosth
Medicaid	TN	L5987	Shank Ft W Vert Load Pylon
Medicaid	TN	L5980	Flex Foot System
Medicaid	TN	L5988	Vertical Shock Reducing Pylo
Medicaid	TN	L5999	Lower Extremity Prothes Nos
Medicaid	TN	L6677	Upper extremity addition, harness, triple control, simultaneous operation of terminal device and elbow
Medicaid	TN	L6715	Terminal device, multiple articulating digit, includes motor(s), initial issue or replacement
Medicaid	TN	L5814	Endo Knee-Shin Hydral Swg Ph
Medicaid	TN	L5828	Endo Knee-Shin Fluid Swg/Sta
Medicaid	TN	L5840	Multi-Axial Knee/Shin System
Medicaid	TN	L5845	Knee-Shin Sys Stance Flexion
Medicaid	TN	L5700	Replace Socket Below Knee
Medicaid	TN	L5701	Replace Socket Above Knee
Medicaid	TN	L5613	Ak 4 Bar Ling W/Hydraul Swig
Medicaid	TN	L5649	Addition to lower extremity, ischial containment/narrow M-L socket
Medicaid	TN	L5280	Hemipelvect Canad Sing Axis
Medicaid	TN	L5301	Below knee, molded socket, shin, SACH foot, endoskeletal system

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	L5312	Knee disarticulation (or through knee), molded socket, single axis knee, pylon, SACH foot, endoskeletal system
Medicaid	TN	L5321	Above knee, molded socket, open end, SACH foot, endoskeletal system, single axis knee
Medicaid	TN	L5590	Prep Ak Ischial Laminated
Medicaid	TN	43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)
Medicaid	TN	L5050	Ank Symes Mold Sckt Sach Ft
Medicaid	TN	50340	Recipient Nephrectomy (Sep Proc)
Medicaid	TN	L5100	Molded Socket Shin Sach Foot
Medicaid	TN	L5200	Kne Sing Axis Fric Shin Sach
Medicaid	TN	L5210	No Knee/Ankle Joints W/ Ft B
Medicaid	TN	L5220	No Knee Joint With Artic Ali
Medicaid	TN	L2628	Metal Frame Recipro Hip & Ca
Medicaid	TN	L3000	Ft Insert Ucb Berkeley Shell
Medicaid	TN	L3020	Foot Longitud/Metatarsal Sup
Medicaid	TN	L3001	Foot Insert Remov Molded Spe
Medicaid	TN	L3002	Foot Insert Plastazote Or Eq
Medicaid	TN	L2036	KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricat
Medicaid	TN	L2037	Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, with or without free motion an
Medicaid	TN	43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance
Medicaid	TN	L0999	Add To Spinal Orthosis Nos
Medicaid	TN	L0631	Lumbar-sacral orthosis (LSO), sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a specific patient by an individual with expertise
Medicaid	TN	L0632	LSO, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 v
Medicaid	TN	43201	Esophagoscopy, flexible, transoral; with directed submucosal injection(s), any substance
Medicaid	TN	K0877	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUD
Medicaid	TN	K0863	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO
Medicaid	TN	K0879	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POU

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	K0884	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCL
Medicaid	TN	K0878	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300
Medicaid	TN	K0885	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, WEIGHT CAPACITY UP TO AND INCLUDING 300 POUND
Medicaid	TN	K0886	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 P
Medicaid	TN	K0890	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLU
Medicaid	TN	K0891	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INC
Medicaid	TN	K0898	POWER WHEELCHAIR, NOT OTHERWISE CLASSIFIED
Medicaid	TN	K0899	Power mobility device, not coded by DME PDAC or does not meet criteria
Medicaid	TN	K0900	Customized durable medical equipment, other than wheelchair
Medicaid	TN	K0851	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0853	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY, 451 TO 600 POUNDS
Medicaid	TN	K0854	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
Medicaid	TN	K0855	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE
Medicaid	TN	K0856	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUD
Medicaid	TN	K0857	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300
Medicaid	TN	K0858	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POU
Medicaid	TN	K0859	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0860	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 60
Medicaid	TN	K0861	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCL

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	K0862	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 P
Medicaid	TN	K0852	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0864	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 PO
Medicaid	TN	K0868	POWER WHEELCHAIR, GROUP 4 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0869	POWER WHEELCHAIR, GROUP 4 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0870	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0871	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0831	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUND
Medicaid	TN	K0835	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUD
Medicaid	TN	K0836	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300
Medicaid	TN	K0837	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POU
Medicaid	TN	K0838	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0842	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 3
Medicaid	TN	K0843	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 P
Medicaid	TN	K0839	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 60
Medicaid	TN	K0840	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUN
Medicaid	TN	K0841	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCL

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	K0848	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0849	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0850	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0807	POWER OPERATED VEHICLE, GROUP 2 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0806	POWER OPERATED VEHICLE, GROUP 2 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0813	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300
Medicaid	TN	K0814	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0815	POWER WHEELCHAIR, GROUP 1 STANDARD, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0816	POWER WHEELCHAIR, GROUP 1 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0820	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POU
Medicaid	TN	K0821	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0822	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0826	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0827	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0825	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS
Medicaid	TN	K0800	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS
Medicaid	TN	K0801	POWER OPERATED VEHICLE, GROUP 1 HEAVY DUTY, PATIENT WEIGHT CAPACITY, 301 TO 450 POUNDS
Medicaid	TN	K0812	POWER OPERATED VEHICLE, NOT OTHERWISE CLASSIFIED
Medicaid	TN	K0802	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS
Medicaid	TN	K0009	Other Manual Wheelchair/Base
Medicaid	TN	K0010	Std Wt Frame Power Whlchr
Medicaid	TN	K0011	Std Wt Pwr Whlchr W Control
Medicaid	TN	K0013	Custom motorized/power wheelchair base
Medicaid	TN	K0014	Other Power Whlchr Base

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	K0012	Ltwt Portbl Power Whlchr
Medicaid	TN	K0005	Ultralightweight Wheelchair
Medicaid	TN	K0007	Extra Heavy Duty Wheelchair
Medicaid	TN	G0277	Hyperbaric oxygen under pressure, full body chamber, per 30 minute interval
Medicaid	TN	G0342	Laparoscopy islet cell trans
Medicaid	TN	G0343	Laparotomy islet cell transp
Medicaid	TN	G0341	Percutaneous islet celltrans
Medicaid	TN	E2628	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, reclining
Medicaid	TN	E2625	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth
Medicaid	TN	E2631	Wheelchair accessory, addition to mobile arm support, elevating proximal arm
Medicaid	TN	E2632	Wheelchair accessory, addition to mobile arm support, offset or lateral rocker arm with elastic balance control
Medicaid	TN	E2633	Wheelchair accessory, addition to mobile arm support, supinator
Medicaid	TN	E2630	Wheelchair accessory, shoulder elbow, mobile arm support, monosuspension arm and hand support, overhead elbow forearm hand sling support, yoke type suspension support
Medicaid	TN	38240	Hematopoietic progenitor cell (HPC); allogeneic transplantation per donor
Medicaid	TN	E2606	Position wc cush wth>=22 in
Medicaid	TN	E2611	Gen use back cush wth <22in
Medicaid	TN	E2613	Position back cush wd <22in
Medicaid	TN	E2610	Powered w/c cushion
Medicaid	TN	E2614	Position back cush wd>=22in
Medicaid	TN	E2615	Pos back post/lat wth <22in
Medicaid	TN	E2616	Pos back post/lat wth>=22in
Medicaid	TN	E2617	Custom fab w/c back cushion
Medicaid	TN	E2619	Replace cover w/c seat cush
Medicaid	TN	E2621	WC planar back cush wd>=22in
Medicaid	TN	E2622	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth
Medicaid	TN	E2623	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth
Medicaid	TN	E2624	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth
Medicaid	TN	E2394	POWER WHEELCHAIR ACCESSORY, DRIVE WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT
Medicaid	TN	E2397	Power wheelchair accessory, lithium-based battery, each
Medicaid	TN	E2402	Negative pressure wound therapy electrical pump, stationary or portable
Medicaid	TN	E2500	Speech generating device, digitized speech, using pre-recorded messages, 8 min. or less
Medicaid	TN	E2502	Speech generating device, digitized speech, using pre-recorded messages, 8-20 min.

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2504	Speech generating device, digitized speech, using pre-recorded messages, 20-40 min.
Medicaid	TN	E2511	Speech generating software program, for personal computer or personal digital assistant
Medicaid	TN	E2506	Speech generating device, digitized speech, using pre-recorded messages, over 40 min.
Medicaid	TN	E2508	Speech generating device, synthesized speech, requiring message formulation by spelling
Medicaid	TN	E2603	Skin protect wc cus wd <22in
Medicaid	TN	E2512	Accessory for speech generating device, mounting system
Medicaid	TN	E2607	Skin pro/pos wc cus wd <22in
Medicaid	TN	E2608	Skin pro/pos wc cus wd >=22in
Medicaid	TN	E2604	Skin protect wc cus wd >=22in
Medicaid	TN	E2605	Position wc cush wth <22 in
Medicaid	TN	E2381	POWER WHEELCHAIR ACCESSORY, PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT
Medicaid	TN	E2382	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE,
Medicaid	TN	E2383	POWER WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC DRIVE WHEEL TIRE (REMOVABLE),
Medicaid	TN	E2384	POWER WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, REPLACEMENT ONLY,
Medicaid	TN	E2386	POWER WHEELCHAIR ACCESSORY, FOAM FILLED DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT
Medicaid	TN	E2387	POWER WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, REPLACEMENT
Medicaid	TN	E2388	POWER WHEELCHAIR ACCESSORY, FOAM DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY,
Medicaid	TN	E2385	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC CASTER TIRE, ANY SIZE,
Medicaid	TN	E2390	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) DRIVE WHEEL TIRE, ANY SIZE,
Medicaid	TN	E2389	POWER WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH
Medicaid	TN	E2395	POWER WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT
Medicaid	TN	E2391	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY
Medicaid	TN	E2366	Power wheelchair accessory, battery charger, single mode, for use with only one battery type
Medicaid	TN	E2367	Power wheelchair accessory, battery charger, dual mode, for use with either battery type
Medicaid	TN	E2368	Power wheelchair component, drive wheel motor, replacement only
Medicaid	TN	E2369	Power wheelchair component, drive wheel gear box, replacement only
Medicaid	TN	E2370	Power wheelchair component, integrated drive wheel motor and gear box combination, replacement only

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2371	Power wheelchair accessory, group 27 sealed lead acid battery, (e.g., gel cell, absorbed glassmat), each
Medicaid	TN	E2372	Power wheelchair accessory, group 27 nonsealed lead acid battery, each
Medicaid	TN	E2373	Power wheelchair accessory, hand or chin control interface, compact remote joystick, proportional, including fixed mount
Medicaid	TN	E2374	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, STANDARD REMOTE
Medicaid	TN	E2375	POWER WHEELCHAIR ACCESSORY, NON-EXPANDABLE CONTROLLER, INCLUDING ALL RELATED
Medicaid	TN	E2376	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED
Medicaid	TN	E2377	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED
Medicaid	TN	E2378	Power wheelchair component, actuator, replacement only
Medicaid	TN	E2365	Power wheelchair accessory, u-1 sealed lead acid battery, each
Medicaid	TN	E2361	Power wheelchair accessory, 22nf sealed lead acid battery, each
Medicaid	TN	E2362	Power wheelchair accessory, group 24 non-sealed lead acid battery, each
Medicaid	TN	E2360	Power wheelchair accessory, 22 nf non-sealed lead acid battery, each
Medicaid	TN	E2363	Power wheelchair accessory, group 24 sealed lead acid battery, each
Medicaid	TN	E2364	Power wheelchair accessory, u-1 non-sealed lead acid battery, each
Medicaid	TN	E2340	Power wheelchair accessory, nonstandard seat frame width, 20-23 inches
Medicaid	TN	E2341	Power wheelchair accessory, nonstandard seat frame width, 24-27 inches
Medicaid	TN	E2343	Power wheelchair accessory, nonstandard seat frame depth, 22-25 inches
Medicaid	TN	E2351	Power wheelchair accessory, electronic interface to operate speech generating device
Medicaid	TN	E2358	Power wheelchair accessory, group 34 nonsealed lead acid battery, each
Medicaid	TN	E2359	Power wheelchair accessory, group 34 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
Medicaid	TN	E2326	Power wheelchair accessory, breath tube kit for sip and puff interface
Medicaid	TN	E2329	Power wheelchair accessory, head control interface, contact switch mechanism, nonproportional
Medicaid	TN	E2330	Power wheelchair accessory, head control interface, proximity switch mechanism, nonproportional
Medicaid	TN	E2331	Power wheelchair accessory, attendant control, proportional, including all electronics and hardware
Medicaid	TN	E2295	Manual wheelchair accessory, for pediatric size wheelchair, dynamic seating frame, allows coordinated movement of multip
Medicaid	TN	E2310	Power wheelchair accessory, electronic connection between wheelchair controller
Medicaid	TN	E2311	Power wheelchair accessory, electronic connection between wheelchair controller

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E2312	Power wheelchair accessory, hand or chin control interface, mini-proportional
Medicaid	TN	E2321	Power wheelchair accessory, hand control interface, remote joystick,
Medicaid	TN	E2323	Power wheelchair accessory, specialty joystick handle for hand control
Medicaid	TN	E2313	Power wheelchair accessory, harness for upgrade to expandable controller,
Medicaid	TN	E2324	Power wheelchair accessory, chin cup for chin control interface
Medicaid	TN	E2219	Manual wheelchair accessory, foam caster tire, any size, each
Medicaid	TN	E2224	Manual wheelchair accessory, propulsion wheel excludes tire, any size, replacement only, each
Medicaid	TN	E2225	Manual wheelchair accessory, caster wheel excludes tire, any size, replacement only, each
Medicaid	TN	E2220	Manual wheelchair accessory, solid (rubber/plastic) propulsion tire, any size, replacement only, each
Medicaid	TN	E2221	Manual wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each
Medicaid	TN	E2222	Manual wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each
Medicaid	TN	E2226	Manual wheelchair accessory, caster fork, any size, replacement only, each
Medicaid	TN	E2227	Manual wheelchair accessory, gear reduction drive wheel, each
Medicaid	TN	E2228	Manual wheelchair accessory, wheel braking system and lock, complete, each
Medicaid	TN	E2230	Manual wheelchair accessory, manual standing system
Medicaid	TN	E2231	Manual wheelchair accessory, solid seat support base (replaces sling seat), includes any type mounting hardware
Medicaid	TN	E2293	Contour back for ped size wc
Medicaid	TN	E2291	Planar back for ped size wc
Medicaid	TN	E2292	Planar seat for ped size wc
Medicaid	TN	E2294	Contour seat for ped size wc
Medicaid	TN	E2201	Manual wheelchair accessory, nonstandard seat frame, width 20-24 in.
Medicaid	TN	E2202	Manual wheelchair accessory, nonstandard seat frame width, 24-27 inches
Medicaid	TN	E2204	Manual wheelchair accessory, nonstandard seat frame depth, 22 to 25 inches
Medicaid	TN	E2205	Manual wheelchair accessory, handrim without projections (includes ergonomic or contoured), any type, replacement only,
Medicaid	TN	E2207	Wheelchair accessory, crutch and cane holder, each
Medicaid	TN	E2208	Wheelchair accessory, cylinder tank carrier, each
Medicaid	TN	E2209	ARM TROUGH, WITH OR WITHOUT HAND SUPPORT, EACH
Medicaid	TN	E2211	Manual wheelchair accessory, pneumatic propulsion tire, any size, each
Medicaid	TN	E2215	Manual wheelchair accessory, tube for pneumatic caster tire, any size, each
Medicaid	TN	E2217	Manual wheelchair accessory, foam filled caster tire, any size, each
Medicaid	TN	E2218	Manual wheelchair accessory, foam propulsion tire, any size, each
Medicaid	TN	E1295	Wheelchair Heavy Duty Fixed

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E1298	Wheelchair Spec Seat Depth/W
Medicaid	TN	E1296	Wheelchair Special Seat Heig
Medicaid	TN	E1297	Wheelchair Special Seat Dept
Medicaid	TN	E1190	Wheelchair Amputee W/ Leg Re
Medicaid	TN	E1221	Wheelchair Spec Size W Foot
Medicaid	TN	E1222	Wheelchair Spec Size W/ Leg
Medicaid	TN	E1227	Wheelchair Spec Sz Spec Ht A
Medicaid	TN	E1224	Wheelchair Spec Size W/ Leg
Medicaid	TN	E1225	Wheelchair accessory, manual semi-reclining back, (recline greater than 15 degrees, but less than 80 degrees), each
Medicaid	TN	E1228	Wheelchair Spec Sz Spec Ht B
Medicaid	TN	E1229	Pediatric wheelchair NOS
Medicaid	TN	E1231	Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable,W Seating
Medicaid	TN	E1232	Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adj, W Seating
Medicaid	TN	E1234	Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adj, Wo Seating
Medicaid	TN	E1235	Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System
Medicaid	TN	E1236	Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System
Medicaid	TN	E1237	Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System
Medicaid	TN	E1238	Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating Syst
Medicaid	TN	E1239	Ped power wheelchair NOS
Medicaid	TN	E1250	Wheelchair Lightwt Fixed Arm
Medicaid	TN	E1270	Wheelchair Lightweight Leg R
Medicaid	TN	E1285	Wheelchair Heavy Duty Fixed
Medicaid	TN	E1030	Wheelchair accessory, ventilator tray, gimbaled
Medicaid	TN	E1050	Whelchr Fxd Full Length Arms
Medicaid	TN	E1083	Hemi-wheelchair, fixed full-length arms, swing-away, detachable elevating legrest
Medicaid	TN	E1084	Hemi-Wheelchair Detachable A
Medicaid	TN	E1085	Hemi-Wheelchair Fixed Arms
Medicaid	TN	E1086	Hemi-Wheelchair Detachable A
Medicaid	TN	E1087	Wheelchair Lightwt Fixed Arm
Medicaid	TN	E1090	Wheelchair Lightweight Det A
Medicaid	TN	E1110	Wheelchair Semi-Recl Detach
Medicaid	TN	E1161	Manual Adult Size Wheelchair, Includes Tilt In Space
Medicaid	TN	E1170	Whlchr Ampu Fxd Arm Leg Rest
Medicaid	TN	E1172	Wheelchair Amputee Detach Ar
Medicaid	TN	E1180	Wheelchair Amputee W/ Foot R
Medicaid	TN	E1195	Wheelchair Amputee Heavy Dut
Medicaid	TN	E1200	Wheelchair Amputee Fixed Arm
Medicaid	TN	E1004	Wheelchair accessory, power seating system, recline only, with mechanical shear
Medicaid	TN	E1005	Wheelchair accessory, power seatng system, recline only, with power shear
Medicaid	TN	E1006	Wheelchair accessory, power seating system, combination tilt and recline, w/o shear reduction
Medicaid	TN	E1007	Wheelchair accessory, power seating system, combination tilt and recline, with manual shear reduction

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E1012	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each
Medicaid	TN	E1009	Wheelchair accessory, addition to power seating system, mechanically linked leg
Medicaid	TN	E1010	Wheelchair accessory, addition to power seating system, power leg elevation
Medicaid	TN	E1015	Shock Absorber For Manual Wheelchair, Each
Medicaid	TN	E1018	Heavy Duty Shock Absorber For Heavy Duty Or Extra Heavy Duty Power Whe
Medicaid	TN	E1020	Residual limb support system for wheelchair, any type
Medicaid	TN	E1017	Heavy Duty Shock Absorber For Heavy Duty Or Extra Heavy Duty Manual Wh
Medicaid	TN	E0960	Wheelchair accessory, shoulder harness/straps or chest strap, including any type mounting hardware
Medicaid	TN	E0966	Wheelchair Head Rest Extensi
Medicaid	TN	E0959	Amputee Adapter
Medicaid	TN	E0969	Wheelchair Narrowing Device
Medicaid	TN	E0980	Wheelchair Safety Vest
Medicaid	TN	E0981	Wheelchair accessory, seat upholstery, replacement only, each
Medicaid	TN	E0983	Manual wheelchair accessory, power add-on to convert manual wheelchair to motorized
Medicaid	TN	E0984	Manual wheelchair accessory, power add-on to convert manual wheelchair to motorized
Medicaid	TN	E0988	Manual wheelchair accessory, lever-activated, wheel drive, pair
Medicaid	TN	E0992	Wheelchair Solid Seat Insert
Medicaid	TN	E1002	Wheelchair accessory, power seating system, tilt only
Medicaid	TN	E1003	Wheelchair accessory, power seating system, recline only, without shear
Medicaid	TN	E1008	Wheelchair accessory, power seating system, combination tilt and recline, with power shear reduction
Medicaid	TN	E0747	Elec Osteogen Stim Not Spine
Medicaid	TN	E0782	Non-Programable Infusion Pump
Medicaid	TN	E0950	Tray
Medicaid	TN	E0954	Wheelchair accessory, foot box, any type, includes attachment and mounting hardware, each foot
Medicaid	TN	E0956	Wheelchair accessory, lateral trunk or hip support, prefabricated, including fixed mounting hardware, each
Medicaid	TN	E0957	Wheelchair accessory, medial thigh support, prefabricated, including fixed mounting hardware, each
Medicaid	TN	E0958	Whlchr Att- Conv 1 Arm Drive
Medicaid	TN	E0637	Combination sit-to-stand frame/table system, any size including pediatric, with seat lift feature, with or without wheels
Medicaid	TN	E0642	Standing frame/table system, mobile (dynamic stander), any size including pediatric
Medicaid	TN	E0676	INTERMITTENT LIMB COMPRESSION DEVICE (INCLUDES ALL ACCESSORIES), NOT OTHERWISE

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	E0691	Ultraviolet light therapy system, includes bulbs/lamps, timer and eye protection; treatment area 2 sq ft or less
Medicaid	TN	E0692	Ultraviolet Light Therapy System Panel, Includes Bulbs/Lamps, Timer An
Medicaid	TN	E0731	Conductive Garment For Tens/
Medicaid	TN	E0694	Ultraviolet Multidirectional Light Therapy System In 6 Foot Cabinet, I
Medicaid	TN	E0762	Transcutaneous electrical joint stimulation device system, includes all accessories
Medicaid	TN	E0764	Functional neuromuscular stimulation, transcutaneous stimulation of sequential muscle groups of ambulation with computer
Medicaid	TN	E0766	Electrical stimulation device used for cancer treatment, includes all accessories, any type
Medicaid	TN	E0629	Seat lift mechanism, non-electric, any type
Medicaid	TN	E0638	Standing frame/table system, one position (e.g., upright, supine or prone stander), any size including pediatric, with or without wheels
Medicaid	TN	E0465	Home ventilator, any type, used with invasive interface, (e.g., tracheostomy tube)
Medicaid	TN	E0466	Home ventilator, any type, used with non-invasive interface, (e.g., mask, chest shell)
Medicaid	TN	E0483	High frequency chest wall oscillation system, includes all accessories and supplies, each
Medicaid	TN	E0277	Powered Pres-Redu Air Mattrs
Medicaid	TN	E0316	Safety enclosure frame/canopy for use with hospital bed, any type
Medicaid	TN	E0329	Hospital bed, pediatric, electric or semi-electric, 360 degree side enclosures,
Medicaid	TN	E0328	Hospital bed, pediatric, manual, 360 degree side enclosures, top of headboard
Medicaid	TN	E0194	Air Fluidized Bed
Medicaid	TN	E0196	Gel Pressure Mattress
Medicaid	TN	B9999	Parenteral Supp Not Othrws C
Medicaid	TN	A4555	Electrode/transducer for use with electrical stimulation device used for cancer treatment, replacement only
Medicaid	TN	A4595	Tens Suppl 2 Lead Per Month
Medicaid	TN	A7025	High Frequency Chest Wall Oscillation System Vest, Replacement For Use
Medicaid	TN	B4100	Food Thickener, Administered Orally, Per Ounce
Medicaid	TN	B4104	Additive for enteral formula
Medicaid	TN	99183	Physician or other qualified health care professional attendance and supervision of hyperbaric oxygen therapy, per session
Medicaid	TN	99509	Home Visit, Assistance W/Activities Daily Living & Personal Care
Medicaid	TN	99511	Home Visit, Fecal Impaction Management & Enema Administration
Medicaid	TN	A0428	Ambulance service, basic life support, nonemergency transport, (BLS)
Medicaid	TN	A0430	Fixed Wing Air Transport
Medicaid	TN	A0431	Rotary Wing Air Transport
Medicaid	TN	A0888	Noncovered Ambulance Mileage
Medicaid	TN	A0435	Fixed Wing Air Mileage
Medicaid	TN	A0436	Rotary Wing Air Mileage
Medicaid	TN	L1499	Spinal Orthosis Nos

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	L8699	Prosthetic Implant Nos
Medicaid	TN	96904	Whole body integumentary photography, for monitoring of high risk patients with dysplastic nevus syndrome or a history o
Medicaid	TN	95803	Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recor
Medicaid	TN	36471	Injection of sclerosant; multiple incompetent veins (other than telangiectasia), same leg
Medicaid	TN	36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated
Medicaid	TN	36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)
Medicaid	TN	36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg
Medicaid	TN	36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk
Medicaid	TN	36470	Injection of sclerosant; single incompetent vein (other than telangiectasia)
Medicaid	TN	L8684	Radiofrequency transmitter (external) for use with implantable sacral root neurostimulator receiver for bowel and bladde
Medicaid	TN	21159	Reconstruction Midface, Lefort Iii, (Extra/Intracranial), W/Bone Grafts, W/O Lefort I
Medicaid	TN	21160	Reconstruction Midface, Lefort Iii, (Extra/Intracranial), W/Bone Grafts, W/Lefort I
Medicaid	TN	76120	Cineradiography/Videoradiology, Except Where Specifically Included
Medicaid	TN	76125	Cineradiography/Videoradiography W/Routine Exam
Medicaid	TN	76499	Unlisted Dx Radiographic Procedure
Medicaid	TN	33981	Replacement of extracorporeal ventricular assist device, single or biventricular, pump(s), single or each pump
Medicaid	TN	33983	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, with cardiopulmonary byp
Medicaid	TN	33975	Insertion, Ventricular Assist Device; Extracorporeal, Single Ventricle
Medicaid	TN	33976	Insertion, Ventricular Assist Device; Extracorporeal, Biventricular
Medicaid	TN	33940	Donor Cardiectomy, W/Preparation & Maintenance, Allograft
Medicaid	TN	33945	Heart Transplant, W/Wo Recipient Cardiectomy
Medicaid	TN	C1883	Adaptor/extension, pacing lead or neurostimulator lead (implantable)
Medicaid	TN	33927	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy
Medicaid	TN	33928	Removal and replacement of total replacement heart system (artificial heart)
Medicaid	TN	33930	Donor Cardiectomy-Pneumonectomy, W/Preparation & Maintenance, Allograft
Medicaid	TN	57335	Vaginoplasty, Intersex State

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	56800	Plastic Repair, Introitus
Medicaid	TN	21137	Reduction Forehead; Contouring Only
Medicaid	TN	21193	Reconstruction, Mandibular Rami, Horizontal, Vertical, "C"/"L" Osteotomy; W/O Bone Graft
Medicaid	TN	54360	Plastic Operation, Penis To Correct Angulation
Medicaid	TN	54401	Insertion, Penile Prosthesis; Inflatable (Self-Contained)
Medicaid	TN	54405	Insertion, (Multi-Component) Inflatable Penile Prosthesis
Medicaid	TN	53448	Remov & Replace Inflatable Sphincter W/Pump/Reservoir/Cuff, Infected, W/Irrig & Debride
Medicaid	TN	38206	Blood-Derived Hematopoietic Progenitor Cell Harvesting, Transplantation/Collection; Autologous
Medicaid	TN	38232	Bone Marrow Harvesting For Transplantation; Autologous
Medicaid	TN	38241	Hematopoietic progenitor cell (HPC); autologous transplantation
Medicaid	TN	15841	Graft, Facial Nerve Paralysis; Free Muscle Graft (W/Obtaining Graft)
Medicaid	TN	15845	Graft, Facial Nerve Paralysis; Regional Muscle Transfer
Medicaid	TN	S2401	Repair, urinary tract obstruction in the fetus, procedure performed in utero
Medicaid	TN	S2402	Repair, congenital cystic adenomatoid malformation in the fetus, procedure performed in utero
Medicaid	TN	S2404	Repair, myelomeningocele in the fetus, procedure performed in utero
Medicaid	TN	S2405	Repair Of Sacrococcygeal Teratoma In The Fetus, Procedure Performed In
Medicaid	TN	S2409	Repair, congenital malformation of fetus, procedure performed in utero, not otherwise classified
Medicaid	TN	33477	Transcatheter pulmonary valve implantation, percutaneous approach, including pre-stenting of the valve delivery site, when performed
Medicaid	TN	66183	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach
Medicaid	TN	33366	Transcatheter aortic valve replacement (tavr/tavi) with prosthetic valve; transapical exposure (eg, left thoracotomy)
Medicaid	TN	0449T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; initial device
Medicaid	TN	33271	Insertion of subcutaneous implantable defibrillator electrode
Medicaid	TN	66174	Transluminal dilation of aqueous outflow canal; without retention of device or stent
Medicaid	TN	66175	Transluminal dilation of aqueous outflow canal; with retention of device or stent
Medicaid	TN	H0037	Community psychiatric supportive treatment program, per diem
Medicaid	TN	33264	Removal Of Pacing Cardioverter-Defibrillator Pulse Generator With Replacement Of Pacing Cardioverter-Defibrillator Pulse Generator; Multiple Lead System
Medicaid	TN	90867	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management
Medicaid	TN	90868	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; subsequent delivery and management, per session

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	32853	Lung Transplant, Double (Bilat Sequential/En Bloc); W/O Cardiopulmonary Bypass
Medicaid	TN	33140	Transmyocardial Laser Revascularization, By Thoracotomy
Medicaid	TN	33141	Transmyocardial Laser Revascularization, By Thoracotomy; Performed W/Other Open Cardiac Proc
Medicaid	TN	30410	Rhinoplasty, Primary; Complete, Ext Parts W/Bony Pyramid, Lat & Alar Cartilages &/Or Elev Nasal Tip
Medicaid	TN	30430	Rhinoplasty, Secondary; Minor Revision (Small Amount, Nasal Tip Work)
Medicaid	TN	B4164	Parenteral 50% Dextrose Solu
Medicaid	TN	B4168	Parenteral Sol Amino Acid 3.
Medicaid	TN	B4172	Parenteral Sol Amino Acid 5.
Medicaid	TN	B4176	Parenteral Sol Amino Acid 7-
Medicaid	TN	B4178	Parenteral Sol Amino Acid >
Medicaid	TN	B4180	Parenteral Sol Carb > 50%
Medicaid	TN	B4185	Parenteral nutrition solution, per 10 grams lipids
Medicaid	TN	B4189	Parenteral Sol Amino Acid &
Medicaid	TN	B4193	Parenteral Sol 52-73 Gm Prot
Medicaid	TN	B4197	Parenteral Sol 74-100 Gm Pro
Medicaid	TN	B4199	Parenteral Sol > 100gm Prote
Medicaid	TN	B4220	Parenteral Supply Kit Premix
Medicaid	TN	B4222	Parenteral Supply Kit Homemi
Medicaid	TN	B5100	Parenteral Sol Hepatic-Fream
Medicaid	TN	B5200	Parenteral Sol Stres-Brnch C
Medicaid	TN	L7499	Upper extremity prosthesis, not otherwise specified
Medicaid	TN	L5973	Endoskeletal Ankle Foot System, Microprocessor Controlled Feature, Dorsiflexion And/Or Plantar Flexion Control, Includes
Medicaid	TN	L7510	Prosthetic Device Repair Rep
Medicaid	TN	L7520	Repair Prosthesis Per 15 Min
Medicaid	TN	L5857	Elec knee-shin swing only
Medicaid	TN	L5858	Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only
Medicaid	TN	L5969	Addition, endoskeletal ankle-foot or ankle system, power assist, includes any type motor(s)
Medicaid	TN	L5859	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)
Medicaid	TN	0494T	Surgical preparation and cannulation of marginal (extended) cadaver donor lung(s) to ex vivo organ perfusion system, including decannulation, separation from the perfusion system, and cold preservation of the allograft prior to implantation, when performed

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	0496T	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (eg, pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; each additional hour (List separately in addition to code for primary procedure)
Medicaid	TN	J1413	Injection, delandistrogene moxeparovec-rokl, per therapeutic dose
Medicaid	TN	J1412	Injection, valoctocogene roxaparovec-rvox, per ml, containing nominal 2 x 10 <sup>13</sup> vector genomes
Medicaid	TN	27488	Removal, Knee Prosthesis, Methylmethacrylate W/Wo Spacer Insertion
Medicaid	TN	27122	Acetabuloplasty; Resection, Femoral Head
Medicaid	TN	27134	Revision, Total Hip Arthroplasty; Both Components, W/Wo Autograft/Allograft
Medicaid	TN	E0748	Elec Osteogen Stim Spinal
Medicaid	TN	G0448	Insertion or replacement of a permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber with insertion of pacing electrode, cardiac venous system, for left ventricular pacing
Medicaid	TN	C1777	Lead, cardioverter-defibrillator, endocardial single coil (implantable)
Medicaid	TN	T4544	Adult sized disposable incontinence product, protective underwear/pull-on, above extra large, each
Medicaid	TN	T4538	Diaper serv reusable diaper
Medicaid	TN	93930	Duplex Scan, Upper Extremity Arteries/Arterial Bypass Grafts; Complete Bilat Study
Medicaid	TN	93931	Duplex Scan, Upper Extremity Arteries/Arterial Bypass Grafts; Unilat/Limited Study
Medicaid	TN	S2202	Echosclerotherapy
Medicaid	TN	21740	Reconstructive Repair, Pectus Excavatum/Carinatum; Open
Medicaid	TN	22862	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumba
Medicaid	TN	22857	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for
Medicaid	TN	22818	Kyphectomy, Exposure Of Spine & Resection Vertebral Segments; 1-2 Segs
Medicaid	TN	22819	Kyphectomy, Exposure Of Spine & Resection Vertebral Segments; 3 / More
Medicaid	TN	22548	Arthrodesis, Anterior Transoral/Extraoral, Atlas-Axis, W/Wo Excision Odontoid Process
Medicaid	TN	J1559	Injection, immune globulin (hizentra), 100 mg
Medicaid	TN	22600	Arthrodesis, Posterior/Posterolateral Technique, Single Level; Cervical Below C2
Medicaid	TN	22808	Arthrodesis, Anterior, Spinal Deformity, W/Wo Cast; 2 To 3 Vertebral Segments
Medicaid	TN	22810	Arthrodesis, Anterior, Spinal Deformity, W/Wo Cast; 4 To 7 Vertebral Segments

## List of items and service that require Prior Authorization

Updated : 2/11/2026

Line of Business	State	Procedure Code	Description
Medicaid	TN	22812	Spinal Fixation, Wiring, Spinous Processes
Medicaid	TN	J1411	Injection, etranacogene dezaparovec-drlb, per therapeutic dose
Medicaid	TN	21742	Reconstructive Repair, Pectus Excavatum/Carinatum; Minimal Invasive Approach, W/O Thoracoscopy
Medicaid	TN	21199	Osteotomy, Mandible, Segmental; W/Genioglossus Advancement
Medicaid	TN	21206	Osteotomy, Maxilla, Segmental
Medicaid	TN	21138	Reduction Forehead; Contouring/Prosthesis/Bone Graft W/Obtaining Autograft
Medicaid	TN	19368	Breast Reconstruction W/Myocutan (Tram) Flap, Single Pedicle W/Closure Donor Site; W/Microvasc Anast
Medicaid	TN	19369	Breast Reconstruction W/Myocutaneous (Tram) Flap, Double Pedicle W/Closure Donor Site
Medicaid	TN	19325	Mammoplasty, Augmentation; W/Prosthetic Implant
Medicaid	TN	19300	Mastectomy for gynecomastia
Medicaid	TN	17106	Destruction, Cutaneous Vascular Proliferative Lesions; < 10 Sq Cm
Medicaid	TN	17108	Destruction, Cutaneous Vascular Proliferative Lesions; > 50.0 Sq Cm
Medicaid	TN	15836	Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm
Medicaid	TN	15834	Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip
Medicaid	TN	15839	Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area
Medicaid	TN	15840	Graft, Facial Nerve Paralysis; Free Fascia Graft (W/Obtaining Fascia)
Medicaid	TN	15878	Suction Assisted Lipectomy; Upper Extremity
Medicaid	TN	15824	Rhytidectomy; Forehead
Medicaid	TN	15826	Rhytidectomy; Glabellar Frown Lines
Medicaid	TN	15828	Rhytidectomy; Cheek, Chin, & Neck
Medicaid	TN	15830	Excision, excessive skin and subcutaneous tissue (includes lipectomy, abdomen, infraumbilical panniculectomy)
Medicaid	TN	15829	Rhytidectomy; Superficial Musculoaponeurotic System (Smas) Flap
Medicaid	TN	15832	Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh
Medicaid	TN	15792	Chemical Peel, Nonfacial; Epidermal
Medicaid	TN	15793	Chemical Peel, Nonfacial; Dermal
Medicaid	TN	15782	Dermabrasion; Regional, Other Than Face
Medicaid	TN	15783	Dermabrasion; Superficial, Any Site
Medicaid	TN	15786	Abrasion; Single Lesion
Medicaid	TN	15787	Abrasion; Add'l 4 Lesions/<
Medicaid	TN	15789	Chemical Peel, Facial; Dermal
Medicaid	TN	15776	Punch Graft, Hair Transplant; > 15 Punch Grafts