



## Important Update: Specialty Surgery Codes that Require Authorization

Alameda Alliance for Health (Alliance) values our dedicated provider partner community. We have an important update we would like to share with you.

Our provider partner satisfaction is a top priority. We are working to improve our Utilization Management and Claims processes to help ensure proper claim payment to our provider partners and alignment of authorized services. To accomplish this goal, we are reviewing each benefit and we will be sending you updates, as the information is ready to share.

**This communication provides an update on specialty surgery codes that require prior authorization.**

**This will affect claims with the date(s) of service starting Tuesday, August 1, 2023, and onward.** Enclosed with this notice is a code-specific list for specialty surgery that shows which codes require prior authorization. The list is also available on the Alliance website at [www.alamedaalliance.org/providers/authorizations](http://www.alamedaalliance.org/providers/authorizations). Please refer to our website for the most up-to-date information about codes or benefits that require authorization.

Please note, for service codes that do not require prior authorization, but are associated with a prior authorization required service, there must be an approved authorization on file for the primary service requiring authorization in order for the associated code(s) to be paid. Associated codes that are not on the prior authorization list will not be paid separately if the primary service was denied or does not have prior authorization.

In addition to the codes, our claims system will also validate that claim received match the authorization when authorization is required.

The following items will be validated:

- Member name
- Provider NPI
- CPT and HCPC coding
- Date(s) of service is within the authorized range
- Number of units and/or visits
- Place of service that matches the site of care submitted on the authorization request form
- National Drug Codes (NDCs) approved by the FDA are required on claims submissions. Claims missing and/or without a matching NDC on a claim will be denied

This update has been validated based on current and published billable coding and was confirmed to be covered by the California Department of Health Care Services (DHCS).

Thank you for your continued partnership and for providing high-quality care to our members and the community.

**Questions?** Please call the Alliance Provider Services Department  
Monday – Friday, 7:30 am – 5 pm  
Phone Number: **1.510.747.4510**  
[www.alamedaalliance.org](http://www.alamedaalliance.org)

## Alameda Alliance for Health

### Referral and Prior Authorization (PA) Procedure Codes for Specialty Surgery

**Before services are provided, please check:**

Member Eligibility ▪ Medical Group ▪ Benefit Coverage ▪ Contracted Provider ▪ Medi-Cal Excluded Code

Questions? Please call the Alliance Provider Services Department at **1.510.747.4510**

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery	11960	INSERT TISSUE EXPANDER(S)	Alameda Alliance for Health or Delegate
	11970	RPLCMT TISS XPNDR PERM IMPLT	Alameda Alliance for Health or Delegate
	11971	RMVL TIS XPNDR WO INSJ IMPLT	Alameda Alliance for Health or Delegate
	15771	GRFG AUTOL FAT LIPO 50 CC/<	Alameda Alliance for Health or Delegate
	15772	GRFG AUTOL FAT LIPO EA ADDL	Alameda Alliance for Health or Delegate
	15773	GRFG AUTOL FAT LIPO 25 CC/<	Alameda Alliance for Health or Delegate
	15774	GFRG AUTOL FAT LIPO EA ADDL	Alameda Alliance for Health or Delegate
	15780	DERMABRASION TOTAL FACE	Alameda Alliance for Health or Delegate
	15781	DERMABRASION SEGMENTAL FACE	Alameda Alliance for Health or Delegate
	15782	DERMABRASION OTHER THAN FACE	Alameda Alliance for Health or Delegate
	15788	CHEMICAL PEEL FACE EPIDERM	Alameda Alliance for Health or Delegate
	15789	CHEMICAL PEEL FACE DERMAL	Alameda Alliance for Health or Delegate
	15792	CHEMICAL PEEL NONFACIAL	Alameda Alliance for Health or Delegate
	15793	CHEMICAL PEEL NONFACIAL	Alameda Alliance for Health or Delegate
	15820	REVISION OF LOWER EYELID	Alameda Alliance for Health or Delegate
	15821	REVISION OF LOWER EYELID	Alameda Alliance for Health or Delegate
	15822	REVISION OF UPPER EYELID	Alameda Alliance for Health or Delegate
	15823	REVISION OF UPPER EYELID	Alameda Alliance for Health or Delegate
	15840	NERVE PALSY FASCIAL GRAFT	Alameda Alliance for Health or Delegate
	15841	NERVE PALSY MUSCLE GRAFT	Alameda Alliance for Health or Delegate
	15842	NERVE PALSY MICROSURG GRAFT	Alameda Alliance for Health or Delegate
	15845	SKIN AND MUSCLE REPAIR FACE	Alameda Alliance for Health or Delegate
	17311	MOHS 1 STAGE H/N/HF/G	Alameda Alliance for Health or Delegate
	17312	MOHS ADDL STAGE	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	17313	MOHS 1 STAGE T/A/L	Alameda Alliance for Health or Delegate
	17314	MOHS ADDL STAGE T/A/L	Alameda Alliance for Health or Delegate
	17315	MOHS SURG ADDL BLOCK	Alameda Alliance for Health or Delegate
	17340	CRYOTHERAPY OF SKIN	Alameda Alliance for Health or Delegate
	17360	SKIN PEEL THERAPY	Alameda Alliance for Health or Delegate
	17999	SKIN TISSUE PROCEDURE	Alameda Alliance for Health or Delegate
	19300	REMOVAL OF BREAST TISSUE	Alameda Alliance for Health or Delegate
	19301	PARTIAL MASTECTOMY	Alameda Alliance for Health or Delegate
	19302	P-MASTECTOMY W/LN REMOVAL	Alameda Alliance for Health or Delegate
	19303	MAST SIMPLE COMPLETE	Alameda Alliance for Health or Delegate
	19305	MAST RADICAL	Alameda Alliance for Health or Delegate
	19306	MAST RAD URBAN TYPE	Alameda Alliance for Health or Delegate
	19307	MAST MOD RAD	Alameda Alliance for Health or Delegate
	19316	SUSPENSION OF BREAST	Alameda Alliance for Health or Delegate
	19318	BREAST REDUCTION	Alameda Alliance for Health or Delegate
	19325	BREAST AUGMENTATION W/IMPLT	Alameda Alliance for Health or Delegate
	19328	RMVL INTACT BREAST IMPLANT	Alameda Alliance for Health or Delegate
	19330	RMVL RUPTURED BREAST IMPLANT	Alameda Alliance for Health or Delegate
	19340	INSJ BREAST IMPLT SM D MAST	Alameda Alliance for Health or Delegate
	19342	INSJ/RPLCMT BRST IMPLT SEP D	Alameda Alliance for Health or Delegate
	19350	BREAST RECONSTRUCTION	Alameda Alliance for Health or Delegate
	19357	TISS XPNDR PLMT BRST RCNSTJ	Alameda Alliance for Health or Delegate
	19361	BRST RCNSTJ LATSMS DRSI FLAP	Alameda Alliance for Health or Delegate
	19364	BRST RCNSTJ FREE FLAP	Alameda Alliance for Health or Delegate
	19367	BRST RCNSTJ 1 PDCL TRAM FLAP	Alameda Alliance for Health or Delegate
	19368	BRST RCNSTJ 1PDCL TRAM ANAST	Alameda Alliance for Health or Delegate
	19369	BRST RCNSTJ 2 PDCL TRAM FLAP	Alameda Alliance for Health or Delegate
	19370	REVJ PERI-IMPLT CAPSULE BRST	Alameda Alliance for Health or Delegate
	19371	PERI-IMPLT CAPSLC BRST COMPL	Alameda Alliance for Health or Delegate
	19380	REVJ RECONSTRUCTED BREAST	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	19396	DESIGN CUSTOM BREAST IMPLANT	Alameda Alliance for Health or Delegate
	19499	BREAST SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	20999	MUSCULOSKELETAL SURGERY	Alameda Alliance for Health or Delegate
	21010	INCISION OF JAW JOINT	Alameda Alliance for Health or Delegate
	21050	REMOVAL OF JAW JOINT	Alameda Alliance for Health or Delegate
	21060	REMOVE JAW JOINT CARTILAGE	Alameda Alliance for Health or Delegate
	21070	REMOVE CORONOID PROCESS	Alameda Alliance for Health or Delegate
	21073	MNPJ OF TMJ W/ANESTH	Alameda Alliance for Health or Delegate
	21299	CRANIO/MAXILLOFACIAL SURGERY	Alameda Alliance for Health or Delegate
	21499	HEAD SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	21685	HYOID MYOTOMY & SUSPENSION	Alameda Alliance for Health or Delegate
	21700	REVISION OF NECK MUSCLE	Alameda Alliance for Health or Delegate
	21705	REVISION OF NECK MUSCLE/RIB	Alameda Alliance for Health or Delegate
	21720	REVISION OF NECK MUSCLE	Alameda Alliance for Health or Delegate
	21725	REVISION OF NECK MUSCLE	Alameda Alliance for Health or Delegate
	21740	RECONSTRUCTION OF STERNUM	Alameda Alliance for Health or Delegate
	21742	REPAIR STERN/NUSS W/O SCOPE	Alameda Alliance for Health or Delegate
	21743	REPAIR STERNUM/NUSS W/SCOPE	Alameda Alliance for Health or Delegate
	21899	NECK/CHEST SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	22510	PERQ CERVICOTHORACIC INJECT	Alameda Alliance for Health or Delegate
	22511	PERQ LUMBOSACRAL INJECTION	Alameda Alliance for Health or Delegate
	22512	VERTEBROPLASTY ADDL INJECT	Alameda Alliance for Health or Delegate
	22513	PERQ VERTEBRAL AUGMENTATION	Alameda Alliance for Health or Delegate
	22514	PERQ VERTEBRAL AUGMENTATION	Alameda Alliance for Health or Delegate
	22515	PERQ VERTEBRAL AUGMENTATION	Alameda Alliance for Health or Delegate
	22899	SPINE SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	22999	ABDOMEN SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	23000	REMOVAL OF CALCIUM DEPOSITS	Alameda Alliance for Health or Delegate
	23470	RECONSTRUCT SHOULDER JOINT	Alameda Alliance for Health or Delegate
	23472	RECONSTRUCT SHOULDER JOINT	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	23473	REVIS RECONST SHOULDER JOINT	Alameda Alliance for Health or Delegate
	23474	REVIS RECONST SHOULDER JOINT	Alameda Alliance for Health or Delegate
	23929	SHOULDER SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	24105	REMOVAL OF ELBOW BURSA	Alameda Alliance for Health or Delegate
	24999	UPPER ARM/ELBOW SURGERY	Alameda Alliance for Health or Delegate
	25999	FOREARM OR WRIST SURGERY	Alameda Alliance for Health or Delegate
	27120	REPAIR, REVISION, AND/OR RECONSTRUCTION PROCEDURES ON THE PELVIS AND HIP JOINT	Alameda Alliance for Health or Delegate
	27122	REPAIR, REVISION, AND/OR RECONSTRUCTION PROCEDURES ON THE PELVIS AND HIP JOINT	Alameda Alliance for Health or Delegate
	27125	PARTIAL HIP REPLACEMENT	Alameda Alliance for Health or Delegate
	27130	TOTAL HIP ARTHROPLASTY	Alameda Alliance for Health or Delegate
	27132	TOTAL HIP ARTHROPLASTY	Alameda Alliance for Health or Delegate
	27134	REVISE HIP JOINT REPLACEMENT	Alameda Alliance for Health or Delegate
	27137	REVISE HIP JOINT REPLACEMENT	Alameda Alliance for Health or Delegate
	27138	REVISE HIP JOINT REPLACEMENT	Alameda Alliance for Health or Delegate
	27279	ARTHRODESIS SACROILIAC JOINT	Alameda Alliance for Health or Delegate
	27418	REPAIR DEGENERATED KNEECAP	Alameda Alliance for Health or Delegate
	27420	REVISION OF UNSTABLE KNEECAP	Alameda Alliance for Health or Delegate
	27422	REVISION OF UNSTABLE KNEECAP	Alameda Alliance for Health or Delegate
	27424	REVISION/REMOVAL OF KNEECAP	Alameda Alliance for Health or Delegate
	27425	LAT RETINACULAR RELEASE OPEN	Alameda Alliance for Health or Delegate
	27427	RECONSTRUCTION KNEE	Alameda Alliance for Health or Delegate
	27428	RECONSTRUCTION KNEE	Alameda Alliance for Health or Delegate
	27429	RECONSTRUCTION KNEE	Alameda Alliance for Health or Delegate
	27437	REVISE KNEECAP	Alameda Alliance for Health or Delegate
	27438	REVISE KNEECAP WITH IMPLANT	Alameda Alliance for Health or Delegate
	27440	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	27441	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate
	27442	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate
	27443	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate
	27445	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate
	27446	REVISION OF KNEE JOINT	Alameda Alliance for Health or Delegate
	27447	TOTAL KNEE ARTHROPLASTY	Alameda Alliance for Health or Delegate
	27486	REVISE/REPLACE KNEE JOINT	Alameda Alliance for Health or Delegate
	27487	REVISE/REPLACE KNEE JOINT	Alameda Alliance for Health or Delegate
	27599	UNLISTED PX FEMUR/KNEE	Alameda Alliance for Health or Delegate
	27700	REVISION OF ANKLE JOINT	Alameda Alliance for Health or Delegate
	27702	RECONSTRUCT ANKLE JOINT	Alameda Alliance for Health or Delegate
	27703	RECONSTRUCTION ANKLE JOINT	Alameda Alliance for Health or Delegate
	28285	REPAIR OF HAMMERTOES	Alameda Alliance for Health or Delegate
	28286	REPAIR OF HAMMERTOES	Alameda Alliance for Health or Delegate
	28288	PARTIAL REMOVAL OF FOOT BONE	Alameda Alliance for Health or Delegate
	28289	CORR HALUX RIGDUS W/O IMPLT	Alameda Alliance for Health or Delegate
	28291	CORR HALUX RIGDUS W/IMPLT	Alameda Alliance for Health or Delegate
	28292	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28295	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28296	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28297	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28298	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28299	CORRECTION HALLUX VALGUS	Alameda Alliance for Health or Delegate
	28306	INCISION OF METATARSAL	Alameda Alliance for Health or Delegate
	28307	INCISION OF METATARSAL	Alameda Alliance for Health or Delegate
	28308	INCISION OF METATARSAL	Alameda Alliance for Health or Delegate
	28309	INCISION OF METATARSALS	Alameda Alliance for Health or Delegate
	28310	REVISION OF BIG TOE	Alameda Alliance for Health or Delegate
	28312	REVISION OF TOE	Alameda Alliance for Health or Delegate
	28313	REPAIR DEFORMITY OF TOE	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	28315	REMOVAL OF SESAMOID BONE	Alameda Alliance for Health or Delegate
	28340	RESECT ENLARGED TOE TISSUE	Alameda Alliance for Health or Delegate
	28341	RESECT ENLARGED TOE	Alameda Alliance for Health or Delegate
	28344	REPAIR EXTRA TOE(S)	Alameda Alliance for Health or Delegate
	28345	REPAIR WEBBED TOE(S)	Alameda Alliance for Health or Delegate
	28360	RECONSTRUCT CLEFT FOOT	Alameda Alliance for Health or Delegate
	28899	FOOT/TOES SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	29800	JAW ARTHROSCOPY/SURGERY	Alameda Alliance for Health or Delegate
	29804	JAW ARTHROSCOPY/SURGERY	Alameda Alliance for Health or Delegate
	30130	EXCISE INFERIOR TURBINATE	Alameda Alliance for Health or Delegate
	30140	RESECT INFERIOR TURBINATE	Alameda Alliance for Health or Delegate
	30400	RECONSTRUCTION OF NOSE	Alameda Alliance for Health or Delegate
	30410	RECONSTRUCTION OF NOSE	Alameda Alliance for Health or Delegate
	30420	RECONSTRUCTION OF NOSE	Alameda Alliance for Health or Delegate
	30430	REVISION OF NOSE	Alameda Alliance for Health or Delegate
	30435	REVISION OF NOSE	Alameda Alliance for Health or Delegate
	30450	REVISION OF NOSE	Alameda Alliance for Health or Delegate
	30460	REVISION OF NOSE	Alameda Alliance for Health or Delegate
	30462	REVISION OF NOSE	Alameda Alliance for Health or Delegate
	30465	REPAIR NASAL STENOSIS	Alameda Alliance for Health or Delegate
	30520	REPAIR OF NASAL SEPTUM	Alameda Alliance for Health or Delegate
	30999	NASAL SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	31051	SPHENOID SINUS SURGERY	Alameda Alliance for Health or Delegate
	31080	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31081	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31084	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31085	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31086	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31087	REMOVAL OF FRONTAL SINUS	Alameda Alliance for Health or Delegate
	31299	SINUS SURGERY PROCEDURE	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	32851	LUNG TRANSPLANT SINGLE	Alameda Alliance for Health or Delegate
	32852	LUNG TRANSPLANT WITH BYPASS	Alameda Alliance for Health or Delegate
	32853	LUNG TRANSPLANT DOUBLE	Alameda Alliance for Health or Delegate
	32854	LUNG TRANSPLANT WITH BYPASS	Alameda Alliance for Health or Delegate
	33517	CABG ARTERY-VEIN SINGLE	Alameda Alliance for Health or Delegate
	33518	CABG ARTERY-VEIN TWO	Alameda Alliance for Health or Delegate
	33519	CABG ARTERY-VEIN THREE	Alameda Alliance for Health or Delegate
	33521	CABG ARTERY-VEIN FOUR	Alameda Alliance for Health or Delegate
	33522	CABG ARTERY-VEIN FIVE	Alameda Alliance for Health or Delegate
	33523	CABG ART-VEIN SIX OR MORE	Alameda Alliance for Health or Delegate
	33533	CABG ARTERIAL SINGLE	Alameda Alliance for Health or Delegate
	33534	CABG ARTERIAL TWO	Alameda Alliance for Health or Delegate
	33535	CABG ARTERIAL THREE	Alameda Alliance for Health or Delegate
	33536	CABG ARTERIAL FOUR OR MORE	Alameda Alliance for Health or Delegate
	33935	TRANSPLANTATION HEART/LUNG	Alameda Alliance for Health or Delegate
	33945	TRANSPLANTATION OF HEART	Alameda Alliance for Health or Delegate
	33946	ECMO/ECLS INITIATION VENOUS	Alameda Alliance for Health or Delegate
	33947	ECMO/ECLS INITIATION ARTERY	Alameda Alliance for Health or Delegate
	33948	ECMO/ECLS DAILY MGMT-VENOUS	Alameda Alliance for Health or Delegate
	33949	ECMO/ECLS DAILY MGMT ARTERY	Alameda Alliance for Health or Delegate
	33951	ECMO/ECLS INSJ PRPH CANNULA	Alameda Alliance for Health or Delegate
	33952	ECMO/ECLS INSJ PRPH CANNULA	Alameda Alliance for Health or Delegate
	33953	ECMO/ECLS INSJ PRPH CANNULA	Alameda Alliance for Health or Delegate
	33954	ECMO/ECLS INSJ PRPH CANNULA	Alameda Alliance for Health or Delegate
	33955	ECMO/ECLS INSJ CTR CANNULA	Alameda Alliance for Health or Delegate
	33956	ECMO/ECLS INSJ CTR CANNULA	Alameda Alliance for Health or Delegate
	33957	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate
	33958	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate
	33959	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate
	33962	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	33963	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate
	33964	ECMO/ECLS REPOS PERPH CNULA	Alameda Alliance for Health or Delegate
	33965	ECMO/ECLS RMVL PERPH CANNULA	Alameda Alliance for Health or Delegate
	33966	ECMO/ECLS RMVL PRPH CANNULA	Alameda Alliance for Health or Delegate
	33999	CARDIAC SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	36473	ENDOVENOUS MCHNCHEM 1ST VEIN	Alameda Alliance for Health or Delegate
	36474	ENDOVENOUS MCHNCHEM ADD-ON	Alameda Alliance for Health or Delegate
	36475	ENDOVENOUS RF 1ST VEIN	Alameda Alliance for Health or Delegate
	36476	ENDOVENOUS RF VEIN ADD-ON	Alameda Alliance for Health or Delegate
	36478	ENDOVENOUS LASER 1ST VEIN	Alameda Alliance for Health or Delegate
	36479	ENDOVENOUS LASER VEIN ADDON	Alameda Alliance for Health or Delegate
	36511	APHERESIS WBC	Alameda Alliance for Health or Delegate
	36512	APHERESIS RBC	Alameda Alliance for Health or Delegate
	36513	APHERESIS PLATELETS	Alameda Alliance for Health or Delegate
	36514	APHERESIS PLASMA	Alameda Alliance for Health or Delegate
	36516	APHERESIS IMMUNOADS SLCTV	Alameda Alliance for Health or Delegate
	36522	PHOTOPHERESIS	Alameda Alliance for Health or Delegate
	38205	HARVEST ALLOGENEIC STEM CELL	Alameda Alliance for Health or Delegate
	38206	HARVEST AUTO STEM CELLS	Alameda Alliance for Health or Delegate
	38230	BONE MARROW HARVEST ALLOGEN	Alameda Alliance for Health or Delegate
	38232	BONE MARROW HARVEST AUTOLOG	Alameda Alliance for Health or Delegate
	38240	TRANSPLT ALLO HCT/DONOR	Alameda Alliance for Health or Delegate
	38241	TRANSPLT AUTOL HCT/DONOR	Alameda Alliance for Health or Delegate
	38242	TRANSPLT ALLO LYMPHOCYTES	Alameda Alliance for Health or Delegate
	38243	TRANSPLJ HEMATOPOIETIC BOOST	Alameda Alliance for Health or Delegate
	41899	DENTAL SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	42145	REPAIR PALATE PHARYNX/UVULA	Alameda Alliance for Health or Delegate
	42820	REMOVE TONSILS AND ADENOIDS	Alameda Alliance for Health or Delegate
	42821	REMOVE TONSILS AND ADENOIDS	Alameda Alliance for Health or Delegate
	42825	REMOVAL OF TONSILS	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	42826	REMOVAL OF TONSILS	Alameda Alliance for Health or Delegate
	42830	REMOVAL OF ADENOIDS	Alameda Alliance for Health or Delegate
	42831	REMOVAL OF ADENOIDS	Alameda Alliance for Health or Delegate
	42835	REMOVAL OF ADENOIDS	Alameda Alliance for Health or Delegate
	42836	REMOVAL OF ADENOIDS	Alameda Alliance for Health or Delegate
	43999	STOMACH SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	44799	UNLISTED PX SMALL INTESTINE	Alameda Alliance for Health or Delegate
	45399	UNLISTED PROCEDURE COLON	Alameda Alliance for Health or Delegate
	46999	ANUS SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	47135	TRANSPLANTATION OF LIVER	Alameda Alliance for Health or Delegate
	47140	PARTIAL REMOVAL DONOR LIVER	Alameda Alliance for Health or Delegate
	47141	PARTIAL REMOVAL DONOR LIVER	Alameda Alliance for Health or Delegate
	47142	PARTIAL REMOVAL DONOR LIVER	Alameda Alliance for Health or Delegate
	47399	LIVER SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	47999	BILE TRACT SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	48554	TRANSPL ALLOGRAFT PANCREAS	Alameda Alliance for Health or Delegate
	48556	REMOVAL ALLOGRAFT PANCREAS	Alameda Alliance for Health or Delegate
	48999	PANCREAS SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	50320	REMOVE KIDNEY LIVING DONOR	Alameda Alliance for Health or Delegate
	50340	REMOVAL OF KIDNEY	Alameda Alliance for Health or Delegate
	50360	TRANSPLANTATION OF KIDNEY	Alameda Alliance for Health or Delegate
	50365	TRANSPLANTATION OF KIDNEY	Alameda Alliance for Health or Delegate
	50370	REMOVE TRANSPLANTED KIDNEY	Alameda Alliance for Health or Delegate
	50380	REIMPLANTATION OF KIDNEY	Alameda Alliance for Health or Delegate
	50540	REVISION OF HORSESHOE KIDNEY	Alameda Alliance for Health or Delegate
	52601	PROSTATECTOMY (TURP)	Alameda Alliance for Health or Delegate
	52630	REMOVE PROSTATE REGROWTH	Alameda Alliance for Health or Delegate
	52640	RELIEVE BLADDER CONTRACTURE	Alameda Alliance for Health or Delegate
	52647	LASER SURGERY OF PROSTATE	Alameda Alliance for Health or Delegate
	52648	LASER SURGERY OF PROSTATE	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	52649	PROSTATE LASER ENUCLEATION	Alameda Alliance for Health or Delegate
	53850	PROSTATIC MICROWAVE THERMOTX	Alameda Alliance for Health or Delegate
	53852	PROSTATIC RF THERMOTX	Alameda Alliance for Health or Delegate
	53854	TRURL DSTRJ PRST8 TISS RF WV	Alameda Alliance for Health or Delegate
	53855	INSERT PROST URETHRAL STENT	Alameda Alliance for Health or Delegate
	53860	TRANSURETHRAL RF TREATMENT	Alameda Alliance for Health or Delegate
	53899	UROLOGY SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	54120	PARTIAL REMOVAL OF PENIS	Alameda Alliance for Health or Delegate
	54125	REMOVAL OF PENIS	Alameda Alliance for Health or Delegate
	54130	REMOVE PENIS & NODES	Alameda Alliance for Health or Delegate
	54135	REMOVE PENIS & NODES	Alameda Alliance for Health or Delegate
	54360	PENIS PLASTIC SURGERY	Alameda Alliance for Health or Delegate
	54520	REMOVAL OF TESTIS	Alameda Alliance for Health or Delegate
	54530	REMOVAL OF TESTIS	Alameda Alliance for Health or Delegate
	54535	EXTENSIVE TESTIS SURGERY	Alameda Alliance for Health or Delegate
	54620	SUSPENSION OF TESTIS	Alameda Alliance for Health or Delegate
	58150	TOTAL HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58152	TOTAL HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58180	PARTIAL HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58200	EXTENSIVE HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58210	EXTENSIVE HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58240	REMOVAL OF PELVIS CONTENTS	Alameda Alliance for Health or Delegate
	58260	VAGINAL HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58262	VAG HYST INCLUDING T/O	Alameda Alliance for Health or Delegate
	58263	VAG HYST W/T/O & VAG REPAIR	Alameda Alliance for Health or Delegate
	58267	VAG HYST W/URINARY REPAIR	Alameda Alliance for Health or Delegate
	58270	VAG HYST W/ENTEROCELE REPAIR	Alameda Alliance for Health or Delegate
	58275	HYSTERECTOMY/REVISE VAGINA	Alameda Alliance for Health or Delegate
	58280	HYSTERECTOMY/REVISE VAGINA	Alameda Alliance for Health or Delegate
	58285	EXTENSIVE HYSTERECTOMY	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	58290	VAG HYST COMPLEX	Alameda Alliance for Health or Delegate
	58291	VAG HYST INCL T/O COMPLEX	Alameda Alliance for Health or Delegate
	58292	VAG HYST T/O & REPAIR COMPL	Alameda Alliance for Health or Delegate
	58294	VAG HYST W/ENTEROCELE COMPL	Alameda Alliance for Health or Delegate
	58346	INSERT HEYMAN UTERI CAPSULE	Alameda Alliance for Health or Delegate
	58541	LSH UTERUS 250 G OR LESS	Alameda Alliance for Health or Delegate
	58542	LSH W/T/O UT 250 G OR LESS	Alameda Alliance for Health or Delegate
	58543	LSH UTERUS ABOVE 250 G	Alameda Alliance for Health or Delegate
	58544	LSH W/T/O UTERUS ABOVE 250 G	Alameda Alliance for Health or Delegate
	58548	LAP RADICAL HYST	Alameda Alliance for Health or Delegate
	58550	LAPARO-ASST VAG HYSTERECTOMY	Alameda Alliance for Health or Delegate
	58552	LAPARO-VAG HYST INCL T/O	Alameda Alliance for Health or Delegate
	58553	LAPARO-VAG HYST COMPLEX	Alameda Alliance for Health or Delegate
	58554	LAPARO-VAG HYST W/T/O COMPL	Alameda Alliance for Health or Delegate
	58570	TLH UTERUS 250 G OR LESS	Alameda Alliance for Health or Delegate
	58571	TLH W/T/O 250 G OR LESS	Alameda Alliance for Health or Delegate
	58572	TLH UTERUS OVER 250 G	Alameda Alliance for Health or Delegate
	58573	TLH W/T/O UTERUS OVER 250 G	Alameda Alliance for Health or Delegate
	58575	LAPS TOT HYST RESJ MAL	Alameda Alliance for Health or Delegate
	58578	LAPARO PROC UTERUS	Alameda Alliance for Health or Delegate
	58920	PARTIAL REMOVAL OF OVARY(S)	Alameda Alliance for Health or Delegate
	58925	REMOVAL OF OVARIAN CYST(S)	Alameda Alliance for Health or Delegate
	58940	REMOVAL OF OVARY(S)	Alameda Alliance for Health or Delegate
	58943	REMOVAL OF OVARY(S)	Alameda Alliance for Health or Delegate
	58953	TAH RAD DISSECT FOR DEBULK	Alameda Alliance for Health or Delegate
	58954	TAH RAD DEBULK/LYMPH REMOVE	Alameda Alliance for Health or Delegate
	58956	BSO OMENTECTOMY W/TAH	Alameda Alliance for Health or Delegate
	58999	GENITAL SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	61867	IMPLANT NEUROELECTRODE	Alameda Alliance for Health or Delegate
	61868	IMPLANT NEUROELECTRDE ADDL	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	61880	REVISE/REMOVE NEUROELECTRODE	Alameda Alliance for Health or Delegate
	61885	INSRT/REDO NEUROSTIM 1 ARRAY	Alameda Alliance for Health or Delegate
	61886	IMPLANT NEUROSTIM ARRAYS	Alameda Alliance for Health or Delegate
	61888	REVISE/REMOVE NEURORECEIVER	Alameda Alliance for Health or Delegate
	63650	IMPLANT NEUROELECTRODES	Alameda Alliance for Health or Delegate
	63655	IMPLANT NEUROELECTRODES	Alameda Alliance for Health or Delegate
	64553	IMPLANT NEUROELECTRODES	Alameda Alliance for Health or Delegate
	64721	CARPAL TUNNEL SURGERY	Alameda Alliance for Health or Delegate
	65710	CORNEAL TRANSPLANT	Alameda Alliance for Health or Delegate
	65730	CORNEAL TRANSPLANT	Alameda Alliance for Health or Delegate
	65750	CORNEAL TRANSPLANT	Alameda Alliance for Health or Delegate
	65755	CORNEAL TRANSPLANT	Alameda Alliance for Health or Delegate
	65756	CORNEAL TRNSPL ENDOTHELIAL	Alameda Alliance for Health or Delegate
	65770	REVISE CORNEA WITH IMPLANT	Alameda Alliance for Health or Delegate
	65785	IMPLTJ NTRSTRML CRNL RNG SEG	Alameda Alliance for Health or Delegate
	66982	XCAPSL CTRC RMVL CPLX WO ECP	Alameda Alliance for Health or Delegate
	66983	CATARACT SURG W/IOL 1 STAGE	Alameda Alliance for Health or Delegate
	66984	XCAPSL CTRC RMVL W/O ECP	Alameda Alliance for Health or Delegate
	66985	INSERT LENS PROSTHESIS	Alameda Alliance for Health or Delegate
	66986	EXCHANGE LENS PROSTHESIS	Alameda Alliance for Health or Delegate
	66987	XCAPSL CTRC RMVL CPLX W/ECP	Alameda Alliance for Health or Delegate
	66988	XCAPSL CTRC RMVL W/ECP	Alameda Alliance for Health or Delegate
	66989	XCPSL CTRC RMVL CPLX INSJ 1+	Alameda Alliance for Health or Delegate
	66991	XCAPSL CTRC RMVL INSJ 1+	Alameda Alliance for Health or Delegate
	67299	EYE SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	67311	REVISE EYE MUSCLE	Alameda Alliance for Health or Delegate
	67312	REVISE TWO EYE MUSCLES	Alameda Alliance for Health or Delegate
	67314	REVISE EYE MUSCLE	Alameda Alliance for Health or Delegate
	67316	REVISE TWO EYE MUSCLES	Alameda Alliance for Health or Delegate
	67318	REVISE EYE MUSCLE(S)	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	67320	REVISE EYE MUSCLE(S) ADD-ON	Alameda Alliance for Health or Delegate
	67331	EYE SURGERY FOLLOW-UP ADD-ON	Alameda Alliance for Health or Delegate
	67332	REREVISE EYE MUSCLES ADD-ON	Alameda Alliance for Health or Delegate
	67334	REVISE EYE MUSCLE W/SUTURE	Alameda Alliance for Health or Delegate
	67340	REVISE EYE MUSCLE ADD-ON	Alameda Alliance for Health or Delegate
	67343	RELEASE EYE TISSUE	Alameda Alliance for Health or Delegate
	67399	UNLISTED PX EXTRAOCULAR MUSC	Alameda Alliance for Health or Delegate
	67599	ORBIT SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	67901	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67902	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67903	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67904	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67906	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67908	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67909	REVISE EYELID DEFECT	Alameda Alliance for Health or Delegate
	67911	REVISE EYELID DEFECT	Alameda Alliance for Health or Delegate
	67912	CORRECTION EYELID W/IMPLANT	Alameda Alliance for Health or Delegate
	67914	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67915	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67916	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67917	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67921	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67922	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67923	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67924	REPAIR EYELID DEFECT	Alameda Alliance for Health or Delegate
	67950	REVISION OF EYELID	Alameda Alliance for Health or Delegate
	67961	REVISION OF EYELID	Alameda Alliance for Health or Delegate
	67966	REVISION OF EYELID	Alameda Alliance for Health or Delegate
	67971	RECONSTRUCTION OF EYELID	Alameda Alliance for Health or Delegate
	67973	RECONSTRUCTION OF EYELID	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
Specialty Surgery (cont.)	67974	RECONSTRUCTION OF EYELID	Alameda Alliance for Health or Delegate
	67975	RECONSTRUCTION OF EYELID	Alameda Alliance for Health or Delegate
	67999	REVISION OF EYELID	Alameda Alliance for Health or Delegate
	68399	EYELID LINING SURGERY	Alameda Alliance for Health or Delegate
	69399	OUTER EAR SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	69799	MIDDLE EAR SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	69930	IMPLANT COCHLEAR DEVICE	Alameda Alliance for Health or Delegate
	69949	INNER EAR SURGERY PROCEDURE	Alameda Alliance for Health or Delegate
	S2065	SIMULTANEOUS PANC KIDNEY TPLNT	Alameda Alliance for Health or Delegate
	S2066	BREAST RECON W/GAP FLAP UNILATERAL	Alameda Alliance for Health or Delegate
	S2067	BRST RECN 1 BRST DIEP&/GAP FLP(S)	Alameda Alliance for Health or Delegate
	S2068	BREAST RECON DIEP/SIEA FLAP UNI	Alameda Alliance for Health or Delegate
	S2117	ARTHROEREISIS SUBTALAR	Alameda Alliance for Health or Delegate
	S2118	MTL-ON-MTL TOT HIP RSRFC ACETAB&FEM	Alameda Alliance for Health or Delegate
	S2230	IMPL MAGNT CMPNT SEMI-IMPL HEAR DVC	Alameda Alliance for Health or Delegate
	S2235	IMPL AUDITRY BRAIN STEM IMPLANT	Alameda Alliance for Health or Delegate