



## Important Update: Utilization Management (UM) Circumcision, Dialysis, and Genetic Testing Codes That Require Prior Authorization

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At Alameda Alliance for Health (Alliance), we appreciate our dedicated provider partner community and strive to deliver the highest levels of service and satisfaction.

We have an important update we want to share with you about **Circumcision, Dialysis, and Genetic Testing codes that require prior authorization for in-network providers**. This does not include outpatient pharmacy services through the member's pharmacy benefit.

**This update affects claims with the date(s) of service starting Monday, February 17, 2025, and onward for the code-specific list of Circumcision, Dialysis, and Genetic Testing codes that require prior authorization.** The previous notice we shared on Friday, August 20, 2021, included **dialysis** codes that are now omitted in this new list. The updated 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 and benefits that require prior 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 for the associated code(s) to be paid. Associated codes 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 validate that the claim received matches 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 matches 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.

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**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 CIRCUMCISION, DIALYSIS, AND GENETIC TESTING

**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
<b>Circumcision</b>	54161	CIRCUM 28 DAYS OR OLDER	Alameda Alliance for Health or Delegate
	54162	LYSIS PENIL CIRCUMIC LESION	Alameda Alliance for Health or Delegate
	54163	REPAIR OF CIRCUMCISION	Alameda Alliance for Health or Delegate
	54164	FRENULOTOMY OF PENIS	Alameda Alliance for Health or Delegate
<b>Genetic Testing</b>	81163	BRCA1&2 GENE FULL SEQ ALYS	Alameda Alliance for Health or Delegate
	81164	BRCA1&2 GEN FUL DUP/DEL ALYS	Alameda Alliance for Health or Delegate
	81165	BRCA1 GENE FULL SEQ ALYS	Alameda Alliance for Health or Delegate
	81166	BRCA1 GENE FULL DUP/DEL ALYS	Alameda Alliance for Health or Delegate
	81167	BRCA2 GENE FULL DUP/DEL ALYS	Alameda Alliance for Health or Delegate
	81170	ABL1 GENE	Alameda Alliance for Health or Delegate
	81173	AR GENE FULL GENE SEQUENCE	Alameda Alliance for Health or Delegate
	81174	AR GENE KNOWN FAMIL VARIANT	Alameda Alliance for Health or Delegate
	81177	ATN1 GENE DETC ABNOR ALLELES	Alameda Alliance for Health or Delegate
	81178	ATXN1 GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
	81179	ATXN2 GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
	81180	ATXN3 GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
	81181	ATXN7 GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
	81182	ATXN8OS GEN DETC ABNOR ALLEL	Alameda Alliance for Health or Delegate
	81183	ATXN10 GENE DETC ABNOR ALLEL	Alameda Alliance for Health or Delegate
	81184	CACNA1A GEN DETC ABNOR ALLEL	Alameda Alliance for Health or Delegate
	81185	CACNA1A GENE FULL GENE SEQ	Alameda Alliance for Health or Delegate
	81186	CACNA1A GEN KNOWN FAMIL VRNT	Alameda Alliance for Health or Delegate
	81187	CNBP GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
81188	CSTB GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate	
81189	CSTB GENE FULL GENE SEQUENCE	Alameda Alliance for Health or Delegate	
81190	CSTB GENE KNOWN FAMIL VRNT	Alameda Alliance for Health or Delegate	

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
<b>Genetic Testing (cont.)</b>	81191	NTRK1 TRANSLOCATION ANALYSIS	Alameda Alliance for Health or Delegate
	81192	NTRK2 TRANSLOCATION ANALYSIS	Alameda Alliance for Health or Delegate
	81193	NTRK3 TRANSLOCATION ANALYSIS	Alameda Alliance for Health or Delegate
	81194	NTRK TRANSLOCATION ANALYSIS	Alameda Alliance for Health or Delegate
	81202	APC GENE KNOWN FAM VARIANTS	Alameda Alliance for Health or Delegate
	81204	AR GENE CHARAC ALLELES	Alameda Alliance for Health or Delegate
	81212	BRCA1&2 185&5385&6174 VRNT	Alameda Alliance for Health or Delegate
	81215	BRCA1 GENE KNOWN FAMIL VRNT	Alameda Alliance for Health or Delegate
	81216	BRCA2 GENE FULL SEQ ALYS	Alameda Alliance for Health or Delegate
	81217	BRCA2 GENE KNOWN FAMIL VRNT	Alameda Alliance for Health or Delegate
	81221	CFTR GENE KNOWN FAM VARIANTS	Alameda Alliance for Health or Delegate
	81222	CFTR GENE DUP/DELET VARIANTS	Alameda Alliance for Health or Delegate
	81223	CFTR GENE FULL SEQUENCE	Alameda Alliance for Health or Delegate
	81226	CYP2D6 GENE COM VARIANTS	Alameda Alliance for Health or Delegate
	81227	CYP2C9 GENE COM VARIANTS	Alameda Alliance for Health or Delegate
	81232	DPYD GENE COMMON VARIANTS	Alameda Alliance for Health or Delegate
	81234	DMPK GENE DETC ABNOR ALLELE	Alameda Alliance for Health or Delegate
	81239	DMPK GENE CHARAC ALLELES	Alameda Alliance for Health or Delegate
	81250	G6PC GENE	Alameda Alliance for Health or Delegate
	81260	IKBKAP GENE	Alameda Alliance for Health or Delegate
	81271	HTT GENE DETC ABNOR ALLELES	Alameda Alliance for Health or Delegate
	81274	HTT GENE CHARAC ALLELES	Alameda Alliance for Health or Delegate
	81278	IGH@/BCL2 TRANSLOCATION ALYS	Alameda Alliance for Health or Delegate
	81284	FXN GENE DETC ABNOR ALLELES	Alameda Alliance for Health or Delegate
	81285	FXN GENE CHARAC ALLELES	Alameda Alliance for Health or Delegate
	81286	FXN GENE FULL GENE SEQUENCE	Alameda Alliance for Health or Delegate
	81287	MGMT GENE PRMTR MTHYLTN ALYS	Alameda Alliance for Health or Delegate
	81288	MLH1 GENE	Alameda Alliance for Health or Delegate
	81289	FXN GENE KNOWN FAMIL VARIANT	Alameda Alliance for Health or Delegate
	81293	MLH1 GENE KNOWN VARIANTS	Alameda Alliance for Health or Delegate
	81296	MSH2 GENE KNOWN VARIANTS	Alameda Alliance for Health or Delegate
	81299	MSH6 GENE KNOWN VARIANTS	Alameda Alliance for Health or Delegate
	81306	NUDT15 GENE COMMON VARIANTS	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
<b>Genetic Testing (cont.)</b>	81309	PIK3CA GENE TRGT SEQ ALYS	Alameda Alliance for Health or Delegate
	81312	PABPN1 GENE DETC ABNOR ALLEL	Alameda Alliance for Health or Delegate
	81318	PMS2 KNOWN FAMILIAL VARIANTS	Alameda Alliance for Health or Delegate
	81321	PTEN GENE FULL SEQUENCE	Alameda Alliance for Health or Delegate
	81322	PTEN GENE KNOWN FAM VARIANT	Alameda Alliance for Health or Delegate
	81323	PTEN GENE DUP/DELET VARIANT	Alameda Alliance for Health or Delegate
	81331	SNRPN/UBE3A GENE	Alameda Alliance for Health or Delegate
	81335	TPMT GENE COM VARIANTS	Alameda Alliance for Health or Delegate
	81336	SMN1 GENE FULL GENE SEQUENCE	Alameda Alliance for Health or Delegate
	81337	SMN1 GEN NOWN FAMIL SEQ VRNT	Alameda Alliance for Health or Delegate
	81338	MPL GENE COMMON VARIANTS	Alameda Alliance for Health or Delegate
	81339	MPL GENE SEQ ALYS EXON 10	Alameda Alliance for Health or Delegate
	81340	TRB@ GENE REARRANGE AMPLIFY	Alameda Alliance for Health or Delegate
	81341	TRB@ GENE REARRANGE DIRPROBE	Alameda Alliance for Health or Delegate
	81342	TRG GENE REARRANGEMENT ANAL	Alameda Alliance for Health or Delegate
	81343	PPP2R2B GEN DETC ABNOR ALLEL	Alameda Alliance for Health or Delegate
	81344	TBP GENE DETC ABNOR ALLELES	Alameda Alliance for Health or Delegate
	81345	TERT GENE TARGETED SEQ ALYS	Alameda Alliance for Health or Delegate
	81351	TP53 GENE FULL GENE SEQUENCE	Alameda Alliance for Health or Delegate
	81352	TP53 GENE TRGT SEQUENCE ALYS	Alameda Alliance for Health or Delegate
	81353	TP53 GENE KNOWN FAMIL VRNT	Alameda Alliance for Health or Delegate
	81400	MOPATH PROCEDURE LEVEL 1	Alameda Alliance for Health or Delegate
	81401	MOPATH PROCEDURE LEVEL 2	Alameda Alliance for Health or Delegate
	81402	MOPATH PROCEDURE LEVEL 3	Alameda Alliance for Health or Delegate
	81403	MOPATH PROCEDURE LEVEL 4	Alameda Alliance for Health or Delegate
	81404	MOPATH PROCEDURE LEVEL 5	Alameda Alliance for Health or Delegate
	81405	MOPATH PROCEDURE LEVEL 6	Alameda Alliance for Health or Delegate
	81406	MOPATH PROCEDURE LEVEL 7	Alameda Alliance for Health or Delegate
	81407	MOPATH PROCEDURE LEVEL 8	Alameda Alliance for Health or Delegate
	81408	MOPATH PROCEDURE LEVEL 9	Alameda Alliance for Health or Delegate
	81412	ASHKENAZI JEWISH ASSOC DIS	Alameda Alliance for Health or Delegate
	81413	CAR ION CHNNLPATH INC 10 GNS	Alameda Alliance for Health or Delegate
	81414	CAR ION CHNNLPATH INC 2 GNS	Alameda Alliance for Health or Delegate

SERVICE CATEGORY	PROCEDURE CODE	PROCEDURE CODE DESCRIPTION	SUBMIT AUTHORIZATION REQUEST TO
<b>Genetic Testing (cont.)</b>	81419	EPILEPSY GEN SEQ ALYS PANEL	Alameda Alliance for Health or Delegate
	81432	HRDTRY BRST CA-RLATD DSORDRS	Alameda Alliance for Health or Delegate
	81434	HEREDITARY RETINAL DISORDERS	Alameda Alliance for Health or Delegate
	81445	TARGETED GENOMIC SEQ ANALYS	Alameda Alliance for Health or Delegate
	81455	TARGETED GENOMIC SEQ ANALYS	Alameda Alliance for Health or Delegate
	81457	SO NEO GSAP DNA MCRSTL INS	Alameda Alliance for Health or Delegate
	81458	SO GSAP DNA CPY NMBR&MCRSTL	Alameda Alliance for Health or Delegate
	81462	SO GSAP CLL FR DNA/DNA&RNA	Alameda Alliance for Health or Delegate
	81479	UNLISTED MOLECULAR PATHOLOGY	Alameda Alliance for Health or Delegate
	81518	ONC BRST MRNA 11 GENES	Alameda Alliance for Health or Delegate
	81519	ONCOLOGY BREAST MRNA	Alameda Alliance for Health or Delegate
	81520	ONC BREAST MRNA 58 GENES	Alameda Alliance for Health or Delegate
	81521	ONC BREAST MRNA 70 GENES	Alameda Alliance for Health or Delegate
	81522	ONC BREAST MRNA 12 GENES	Alameda Alliance for Health or Delegate
	81523	ONC BRST MRNA 70 CNT 31 GENE	Alameda Alliance for Health or Delegate
	81541	ONC PROSTATE MRNA 46 GENES	Alameda Alliance for Health or Delegate
	81542	ONC PROSTATE MRNA 22 CNT GEN	Alameda Alliance for Health or Delegate
	81546	ONC THYR MRNA 10,196 GEN ALG	Alameda Alliance for Health or Delegate
	81599	UNLISTED MAAA	Alameda Alliance for Health or Delegate
	89398	UNLISTED REPROD MED LAB PROC	Alameda Alliance for Health or Delegate
	J0222	INJECTION PATISIRAN 0.1 MG	Alameda Alliance for Health or Delegate
	J3399	INJ AVSX-101-XIOI P-TX TO 5X10^15VG	Alameda Alliance for Health or Delegate
	S3620	NEWBORN METABOLIC SCREENING PANEL	Alameda Alliance for Health or Delegate