Codes needing Prior Authorization effective 7.1.25 (Ambetter)

April 30, 2025

Effective July 1, 2025, the following codes will require prior authorization to be submitted to Ambetter from SilverSummit Healthplan.

31276: Nasal/sinus endoscopy, surgical, with frontal sinus exploration, including removal of tissue from frontal sinus, when performed
31298: Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal and sphenoid sinus ostia
J1439: Injection, ferric carboxymaltose, 1 mg
31295: Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); maxillary sinus ostium, transnasal or via canine fossa

The following code will no longer require prior authorization:

77417: Therapeutic radiology port image(s)

If you have questions, please contact Provider Services.

Thank you,

SilverSummit Healthplan