



June 24, 2026

Important Prior Authorization Updates

(Effective October 1, 2026)

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

Code change details are noted in the table below. The changes may include:

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

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

Service Category	PA Rule	Services	Procedure codes
Behavioral Health	PA Required	Substance Abuse Treatment	H0010
		Treatment Services	97157
Diagnostic Services	PA Required	Therapy Services	92526
DME and Supplies	No PA Required	Mobility Services	E0630
		Orthotic and Prosthetic	L1932, L5000, L5631, L5704, L5920, L5950
Gastroenterology	No PA Required	Endoscopies	43239

Service Category	PA Rule	Services	Procedure codes
Genetic Analysis	PA Required	Genetic Testing	0211U, 81185, 81519
	No PA Required	Genetic Testing	81240, 81241, 81297, 81319
Genitourinary Procedures	PA Required	Surgery – Male Genitalia	55899
Hearing Services	No PA Required	Implants and Supplies	L8624
		Hearing Aids	V5130, V5140, V5160
Home Services	No PA Required	Home Visit	S9213, T1028
		Nursing Services	T1001
Physician Services	PA Required	Diagnostic Testing	91299
	No PA Required	Diagnostic Testing	91110, 91111, 91112, 91113
Sleep Medicine	No PA Required	Sleep Studies	95805
Surgery Procedures	No PA Required	Tonsil and Adenoid Procedures	42820, 42825, 42830, 42835, 42836
		Eye and Ocular Adnexa	67904

If you have any questions, **please contact your Provider Representative** directly, or you may outreach to our **Provider Services Team** at **1-844-366-2880**. You may also email Provider Relations directly at NVSS_ProviderRelations@SilverSummitHealthPlan.com

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