absolute total care

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, Absolute Total Care 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.

Contact Provider Services or your Provider Engagement Account Manager for questions regarding this change.

Service Category	PA Rule	Services	Procedure codes
Genetic Analysis	No PA Required	Genetic Testing	81161, 81200, 81240, 81241, 81243, 81256, 81304, 81374, 81400, 81401, 88230, 88280, 88291
Hearing Services	No PA Required	Hearing Aids	V5160
Home Services	No PA Required	Home Visit	S9211, S9213
Physician Services	No PA Required	Diagnostic Testing	91110, 91111
Sleep Medicine	No PA Required	Sleep Studies	95805
Surgery Procedures	No PA Required	Tonsil and Adenoid Procedures	42826
		Eye and Ocular Adnexa	42820, 42825, 42830, 42835, 42836

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