

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
Inpatient Admissions	PA	Health Plan UM	Admissions include: Inpatient Medical, Surgical, Mental Health or Substance Use/Abuse, Inpatient Rehabilitation, Long Term Acute Care Facility, Residential Treatment, Skilled Nursing Facility, Swing Bed
11920	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
11921	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
11922	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
11950	PA	Health Plan UM	
11951	PA	Health Plan UM	
11952	PA	Health Plan UM	
11954	PA	Health Plan UM	
11960	PA	Health Plan UM	
11970	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
11971	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15271	PA	Health Plan UM	
15769	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15769	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
15769	PA	Health Plan UM	
15771	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15771	PA*	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15771	PA	Health Plan UM	
15772	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15772	PA*	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15772	PA	Health Plan UM	
15773	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15773	PA	Health Plan UM	
15773	PA	Health Plan UM	
15774	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15774	PA	Health Plan UM	
15774	PA	Health Plan UM	
15777	PA	Health Plan UM	
15820	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
15820	Non-covered		
15821	PA	Health Plan UM	
15821	Non-covered		
15822	PA	Health Plan UM	
15822	Non-covered		
15823	PA	Health Plan UM	
15823	Non-covered		
15830	Non-covered		
15830	PA	Health Plan UM	
15830	PA	Health Plan UM	
15832	Non-covered		
15832	PA	Health Plan UM	
15833	Non-covered		
15833	PA	Health Plan UM	
15834	Non-covered		
15834	PA	Health Plan UM	
15835	Non-covered		
15835	PA	Health Plan UM	
15836	Non-covered		
15836	PA	Health Plan UM	
15837	Non-covered		
15837	PA	Health Plan UM	
15838	Non-covered		
15838	PA	Health Plan UM	
15839	Non-covered		
15839	PA	Health Plan UM	
15847	PA	Health Plan UM	
15847	Non-covered		
15876	Non-covered		
15876	PA	Health Plan UM	
15877	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15877	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
15877	PA	Health Plan UM	
15878	Non-covered		

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
15878	PA	Health Plan UM	
15879	Non-covered		
15879	PA	Health Plan UM	
17106	PA	Health Plan UM	
17107	PA	Health Plan UM	
17108	PA	Health Plan UM	
17999	PA	Health Plan UM	
19300	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19303	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19303	PA	Health Plan UM	
19305	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19306	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19307	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
19316	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19318	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19318	PA	Health Plan UM	
19325	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19328	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19330	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19340	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1
19342	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3 Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
19350	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19355	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19357	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19361	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19364	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19367	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19368	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
19369	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19370	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19371	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19380	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19396	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19499	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>
19499	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Breast cancer: 50.011-C50.929, D05.00-D05.92, D48.60-D48.62, D49.3, Z85.3</p> <p>Genetic susceptibility, prophylactic removal: Z15.01, Z40.01 Acquired absence of unspecified breast and nipple: Z90.10-Z90.1</p>

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
19499	PA	Health Plan UM	This code is considered E/I when billed for MRI-guided focal laser ablation (e.g., the Visualase® Laser Ablation System).
20930	Non-covered		
20930	Non-covered		
20930	Non-covered		
20931	PA	Health Plan UM	
20931	PA	Health Plan UM	
20936	PA	Health Plan UM	
20937	PA	Health Plan UM	
20938	PA	Health Plan UM	
20974	PA	Health Plan UM	
20975	PA	Health Plan UM	
20999	PA	Health Plan UM	
21085	PA	Health Plan UM	
21110	PA	Health Plan UM	
21120	PA	Health Plan UM	
21120	PA	Health Plan UM	
21121	PA	Health Plan UM	
21121	PA	Health Plan UM	
21122	PA	Health Plan UM	
21122	PA	Health Plan UM	
21123	PA	Health Plan UM	
21123	PA	Health Plan UM	
21125	PA	Health Plan UM	
21127	PA	Health Plan UM	
21127	PA	Health Plan UM	
21137	PA	Health Plan UM	
21137	Non-covered		
21138	PA	Health Plan UM	
21141	PA	Health Plan UM	
21142	PA	Health Plan UM	
21143	PA	Health Plan UM	
21146	PA	Health Plan UM	
21147	PA	Health Plan UM	
21150	PA	Health Plan UM	
21151	PA	Health Plan UM	
21154	PA	Health Plan UM	
21155	PA	Health Plan UM	
21159	PA	Health Plan UM	
21160	PA	Health Plan UM	
21172	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
21175	PA	Health Plan UM	
21179	PA	Health Plan UM	
21180	PA	Health Plan UM	
21181	PA	Health Plan UM	
21182	PA	Health Plan UM	
21183	PA	Health Plan UM	
21184	PA	Health Plan UM	
21188	PA	Health Plan UM	
21193	PA	Health Plan UM	
21194	PA	Health Plan UM	
21195	PA	Health Plan UM	
21196	PA	Health Plan UM	
21198	PA	Health Plan UM	
21199	PA	Health Plan UM	
21206	PA	Health Plan UM	
21208	PA	Health Plan UM	
21208	PA	Health Plan UM	
21209	PA	Health Plan UM	
21209	PA	Health Plan UM	
21210	PA	Health Plan UM	
21210	PA	Health Plan UM	
21215	PA	Health Plan UM	
21230	PA	Health Plan UM	
21235	PA	Health Plan UM	
21240	PA	Health Plan UM	
21242	PA	Health Plan UM	
21243	PA	Health Plan UM	
21244	PA	Health Plan UM	
21245	PA	Health Plan UM	
21246	PA	Health Plan UM	
21247	PA	Health Plan UM	
21248	PA	Health Plan UM	
21249	PA	Health Plan UM	
21255	PA	Health Plan UM	
21256	PA	Health Plan UM	
21260	PA	Health Plan UM	
21261	PA	Health Plan UM	
21263	PA	Health Plan UM	
21267	PA	Health Plan UM	
21268	PA	Health Plan UM	
21275	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
21280	PA	Health Plan UM	
21282	PA	Health Plan UM	
21685	PA	Health Plan UM	<p>PA is not required if billed with one of the following diagnosis: Sleep apnea: 47.33, G47.30, macroglossia: Q38.2, or other diseases of the tongue: K14.8</p> <p>PA is not required if billed with one of following services: Palatopharyngoplasty (uvulopalatopharyngoplasty or uvulopharyngoplasty): 42145, Laser assisted uvulopalatoplasty: S2080 or LeFort I osteotomy procedures: 21141, 21142, 21143, 21145,21146, 21147. All other diagnoses require PA.</p>
22145	PA	Health Plan UM	
22510	PA	Health Plan UM	
22510	PA	Health Plan UM	
22511	PA	Health Plan UM	
22511	PA	Health Plan UM	
22512	PA	Health Plan UM	
22512	PA	Health Plan UM	
22513	PA	Health Plan UM	
22513	PA	Health Plan UM	
22514	PA	Health Plan UM	
22514	PA	Health Plan UM	
22515	PA	Health Plan UM	
22515	PA	Health Plan UM	
22533	PA	Health Plan UM	
22533	PA	Health Plan UM	
22534	PA	Health Plan UM	
22534	PA	Health Plan UM	
22534	PA	Health Plan UM	
22551	PA	Health Plan UM	
22551	PA	Health Plan UM	
22552	PA	Health Plan UM	
22552	PA	Health Plan UM	
22554	PA	Health Plan UM	
22554	PA	Health Plan UM	
22558	PA	Health Plan UM	
22558	PA	Health Plan UM	
22585	PA	Health Plan UM	
22585	PA	Health Plan UM	
22585	PA	Health Plan UM	
22595	PA	Health Plan UM	
22595	PA	Health Plan UM	
22600	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
22600	PA	Health Plan UM	
22612	PA	Health Plan UM	
22612	PA	Health Plan UM	
22614	PA	Health Plan UM	
22614	PA	Health Plan UM	
22614	PA	Health Plan UM	
22630	PA	Health Plan UM	
22630	PA	Health Plan UM	
22632	PA	Health Plan UM	
22632	PA	Health Plan UM	
22632	PA	Health Plan UM	
22633	PA	Health Plan UM	
22633	PA	Health Plan UM	
22634	PA	Health Plan UM	
22634	PA	Health Plan UM	
22634	PA	Health Plan UM	
22841	PA	Health Plan UM	
22841	PA	Health Plan UM	
22841	PA	Health Plan UM	
22842	PA	Health Plan UM	
22842	PA	Health Plan UM	
22842	PA	Health Plan UM	
22843	PA	Health Plan UM	
22843	PA	Health Plan UM	
22843	PA	Health Plan UM	
22844	PA	Health Plan UM	
22844	PA	Health Plan UM	
22844	PA	Health Plan UM	
22845	PA	Health Plan UM	
22845	PA	Health Plan UM	
22845	PA	Health Plan UM	
22846	PA	Health Plan UM	
22846	PA	Health Plan UM	
22846	PA	Health Plan UM	
22847	PA	Health Plan UM	
22847	PA	Health Plan UM	
22847	PA	Health Plan UM	
22848	PA	Health Plan UM	
22848	PA	Health Plan UM	
22848	PA	Health Plan UM	
22853	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

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22853	PA	Health Plan UM	
22853	PA	Health Plan UM	
22854	PA	Health Plan UM	
22854	PA	Health Plan UM	
22854	PA	Health Plan UM	
22856	PA	Health Plan UM	
22856	PA	Health Plan UM	
22857	PA	Health Plan UM	
22857	PA	Health Plan UM	
22857	PA	Health Plan UM	
22858	PA	Health Plan UM	
22858	PA	Health Plan UM	
22859	PA	Health Plan UM	
22859	PA	Health Plan UM	
22859	PA	Health Plan UM	
22860	PA	Health Plan UM	
22860	PA	Health Plan UM	
22861	PA	Health Plan UM	
22861	PA	Health Plan UM	
22862	PA	Health Plan UM	
22862	PA	Health Plan UM	
22867	PA	Health Plan UM	
22867	PA	Health Plan UM	
22868	PA	Health Plan UM	
22868	PA	Health Plan UM	
22869	PA	Health Plan UM	
22869	PA	Health Plan UM	
22870	PA	Health Plan UM	
22870	PA	Health Plan UM	
22899	PA	Health Plan UM	
22899	PA	Health Plan UM	
22899	PA		This code is considered E/I when billed for Radiofrequency Ablation (RFA) of the sacroiliac joint (SI joint); considered E/I when billed for Annulus Repair devices.
22899	PA	Health Plan UM	
22999	No PA	Health Plan UM	
22999	PA	Health Plan UM	
27278	PA	Health Plan UM	
27278	PA	Health Plan UM	
27279	PA	Health Plan UM	
27280	PA	Health Plan UM	

Align powered by Sanford Health Plan Medicare Advantage Detailed Code Coverage List - January 1, 2026

Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
27412	PA	Health Plan UM	
27415	PA	Health Plan UM	
29868	PA	Health Plan UM	
30120	PA	Health Plan UM	
30400	Non-covered		
30400	PA	Health Plan UM	
30410	Non-covered		
30410	PA	Health Plan UM	
30420	Non-covered		
30420	PA	Health Plan UM	
30430	Non-covered		
30430	PA	Health Plan UM	
30435	Non-covered		
30435	PA	Health Plan UM	
30450	Non-covered		
30450	PA	Health Plan UM	
30460	PA	Health Plan UM	
30462	PA	Health Plan UM	
30520	PA	Health Plan UM	
30620	PA	Health Plan UM	
31599	PA	Health Plan UM	
31899	PA	Health Plan UM	
32850	PA	Health Plan UM	
32851	PA	Health Plan UM	
32852	PA	Health Plan UM	
32853	PA	Health Plan UM	
32855	PA	Health Plan UM	
32856	PA	Health Plan UM	
33741	PA	Health Plan UM	
33745	PA	Health Plan UM	
33746	PA	Health Plan UM	
33930	PA	Health Plan UM	
33933	PA	Health Plan UM	
33935	PA	Health Plan UM	
33940	PA	Health Plan UM	
33944	PA	Health Plan UM	
33945	PA	Health Plan UM	
33975	PA	Health Plan UM	
33976	PA	Health Plan UM	
33979	PA	Health Plan UM	
33981	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
33982	PA	Health Plan UM	
33983	PA	Health Plan UM	
33990	PA	Health Plan UM	
33991	PA	Health Plan UM	
33995	PA	Health Plan UM	
35854	PA	Health Plan UM	
38204	PA	Health Plan UM	
38205	PA	Health Plan UM	
38206	PA	Health Plan UM	
38207	PA	Health Plan UM	
38208	PA	Health Plan UM	
38209	PA	Health Plan UM	
38210	PA	Health Plan UM	
38211	PA	Health Plan UM	
38212	PA	Health Plan UM	
38213	PA	Health Plan UM	
38214	PA	Health Plan UM	
38215	PA	Health Plan UM	
38230	PA	Health Plan UM	
38232	PA	Health Plan UM	
38240	PA	Health Plan UM	
38241	PA	Health Plan UM	
38242	PA	Health Plan UM	
38243	PA	Health Plan UM	
40799	PA	Health Plan UM	
42145	PA	Health Plan UM	
42975	PA	Health Plan UM	
43290	Non-covered		
43291	Non-covered		
43644	PA	Health Plan UM	
43645	PA	Health Plan UM	
43659	PA	Health Plan UM	
43770	PA	Health Plan UM	
43771	PA	Health Plan UM	
43772	PA	Health Plan UM	
43773	PA	Health Plan UM	
43774	PA	Health Plan UM	
43775	PA	Health Plan UM	
43842	Non-covered		
43843	PA	Health Plan UM	
43845	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
43846	PA	Health Plan UM	
43847	PA	Health Plan UM	
43886	PA	Health Plan UM	
43887	PA	Health Plan UM	
43888	PA	Health Plan UM	
43999	PA	Health Plan UM	
44132	PA	Health Plan UM	
44133	PA	Health Plan UM	
44135	PA	Health Plan UM	
44136	PA	Health Plan UM	
44137	PA	Health Plan UM	
44715	PA	Health Plan UM	
44720	PA	Health Plan UM	
44721	PA	Health Plan UM	
47133	PA	Health Plan UM	
47135	PA	Health Plan UM	
47140	PA	Health Plan UM	
47141	PA	Health Plan UM	
47142	PA	Health Plan UM	
47143	PA	Health Plan UM	
47144	PA	Health Plan UM	
47145	PA	Health Plan UM	
47146	PA	Health Plan UM	
47147	PA	Health Plan UM	
48160	PA	Health Plan UM	
48550	PA	Health Plan UM	
48551	PA	Health Plan UM	
48552	PA	Health Plan UM	
48554	PA	Health Plan UM	
48556	PA	Health Plan UM	
50300	PA	Health Plan UM	
50320	PA	Health Plan UM	
50323	PA	Health Plan UM	
50325	PA	Health Plan UM	
50327	PA	Health Plan UM	
50328	PA	Health Plan UM	
50329	PA	Health Plan UM	
50340	PA	Health Plan UM	
50360	PA	Health Plan UM	
50365	PA	Health Plan UM	
50370	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
50380	PA	Health Plan UM	
50547	PA	Health Plan UM	
53430	PA	Health Plan UM	
54120	PA	Health Plan UM	
54125	PA	Health Plan UM	
54135	PA	Health Plan UM	
54300	PA	Health Plan UM	
54304	PA	Health Plan UM	
54336	PA	Health Plan UM	
54400	PA	Health Plan UM	
54401	PA	Health Plan UM	
54405	PA	Health Plan UM	
54406	PA	Health Plan UM	
54408	PA	Health Plan UM	
54410	PA	Health Plan UM	
54411	PA	Health Plan UM	
54415	PA	Health Plan UM	
54416	PA	Health Plan UM	
54417	PA	Health Plan UM	
54520	PA	Health Plan UM	
54660	PA	Health Plan UM	
54690	PA	Health Plan UM	
55150	PA	Health Plan UM	
55175	PA	Health Plan UM	
55180	PA	Health Plan UM	
55899	PA	Health Plan UM	
55970	PA	Health Plan UM	
55980	PA	Health Plan UM	
56625	PA	Health Plan UM	
56800	PA	Health Plan UM	
56805	PA	Health Plan UM	
56810	PA	Health Plan UM	
57106	PA	Health Plan UM	
57107	PA	Health Plan UM	
57110	PA	Health Plan UM	
57111	PA	Health Plan UM	
57220	PA	Health Plan UM	
57282	PA	Health Plan UM	
57291	PA	Health Plan UM	
57292	PA	Health Plan UM	
57295	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
57296	PA	Health Plan UM	
57335	PA	Health Plan UM	
57426	PA	Health Plan UM	
58150	PA	Health Plan UM	
58152	PA	Health Plan UM	
58180	PA	Health Plan UM	
58260	PA	Health Plan UM	
58262	PA	Health Plan UM	
58275	PA	Health Plan UM	
58280	PA	Health Plan UM	
58285	PA	Health Plan UM	
58290	PA	Health Plan UM	
58291	PA	Health Plan UM	
58541	PA	Health Plan UM	
58542	PA	Health Plan UM	
58543	PA	Health Plan UM	
58544	PA	Health Plan UM	
58550	PA	Health Plan UM	
58552	PA	Health Plan UM	
58553	PA	Health Plan UM	
58554	PA	Health Plan UM	
58570	PA	Health Plan UM	
58571	PA	Health Plan UM	
58572	PA	Health Plan UM	
58573	PA	Health Plan UM	
58661	PA	Health Plan UM	
58720	PA	Health Plan UM	
58970	PA	Health Plan UM	
58974	PA	Health Plan UM	
58976	PA	Health Plan UM	
58999	PA	Health Plan UM	
59840	PA	Health Plan UM	
59841	PA	Health Plan UM	
59850	PA	Health Plan UM	
59851	PA	Health Plan UM	
59852	PA	Health Plan UM	
59855	PA	Health Plan UM	
59856	PA	Health Plan UM	
59857	PA	Health Plan UM	
59866	PA	Health Plan UM	
61736	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
61767	PA	Health Plan UM	
61863	PA	Health Plan UM	
61864	PA	Health Plan UM	
61867	PA	Health Plan UM	
61868	PA	Health Plan UM	
61885	PA	Health Plan UM	
61886	PA	Health Plan UM	
62380	PA	Health Plan UM	
63001	PA	Health Plan UM	
63001	PA	Health Plan UM	
63005	PA	Health Plan UM	
63012	PA	Health Plan UM	
63015	PA	Health Plan UM	
63017	PA	Health Plan UM	
63020	PA	Health Plan UM	
63030	PA	Health Plan UM	
63035	PA	Health Plan UM	
63035	PA	Health Plan UM	
63040	PA	Health Plan UM	
63042	PA	Health Plan UM	
63043	PA	Health Plan UM	
63044	PA	Health Plan UM	
63045	PA	Health Plan UM	
63047	PA	Health Plan UM	
63048	PA	Health Plan UM	
63048	PA	Health Plan UM	
63050	PA	Health Plan UM	
63051	PA	Health Plan UM	
63052	PA	Health Plan UM	
63053	PA	Health Plan UM	
63056	PA	Health Plan UM	
63057	PA	Health Plan UM	
63057	PA	Health Plan UM	
63075	PA	Health Plan UM	
63076	PA	Health Plan UM	
63081	PA	Health Plan UM	
63082	PA	Health Plan UM	
63650	PA	Health Plan UM	
63655	PA	Health Plan UM	
64590	PA	Health Plan UM	
64595	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
64999	PA	Health Plan UM	
64999	PA	Health Plan UM	
64999	PA	Health Plan UM	This code is considered E/I when billed for Radiofrequency Ablation (RFA) of the sacroiliac joint (SI joint), MRI-guided focal laser ablation (e.g., the Visualase® Laser Ablation System), Axogen (Axoguard®) nerve connector or nerve protector procedure for non-digital nerves, Pulsed Radiofrequency Ablation (Pulsed RFA), laser ablation for refractory seizures (epilepsy), Sphenopalatine Ganglion block, IB-Stim device/procedure, hydrodissection of peripheral nerve pain, Thread Carpal Tunnel release, Spinal Accessory Nerve Block, Thread Superficial Peroneal Nerve Release (TSPNR), Mitomycin Intravascular Chemoembolization (MICE) procedure, iPACK Block, and Spinal Hardware Injection; considered E/I when billed for Annulus Repair devices.
67343	PA	Health Plan UM	
67900	PA	Health Plan UM	
67900	Non-covered		
67901	PA	Health Plan UM	
67902	PA	Health Plan UM	
67903	PA	Health Plan UM	
67904	PA	Health Plan UM	
67906	PA	Health Plan UM	
67908	PA	Health Plan UM	
67909	PA	Health Plan UM	
67911	PA	Health Plan UM	
67912	PA	Health Plan UM	
67914	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67915	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
67916	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67917	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67921	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67922	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67923	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67924	PA	Health Plan UM	"PA is not required if billed with one of the following diagnosis: Ectropion (H02.1), Entropion (H02.0) and Exposure keratitis (H16.21). PA is required for all other diagnoses. Lower lid blephroplasty and Brow Ptosis Repair 67900 Repair of brow ptosis (supraciliary, mid-forehead or coronal approach) is not covered as it is considered a cosmetic surgery (non-covered). "
67950	PA	Health Plan UM	
67961	PA	Health Plan UM	
67966	PA	Health Plan UM	
67971	PA	Health Plan UM	
67973	PA	Health Plan UM	
67974	PA	Health Plan UM	
67975	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
69300	PA	Health Plan UM	
69320	PA	Health Plan UM	
77371	PA	Eviti	
77372	PA	Eviti	
77373	PA	Eviti	
77387	PA	Eviti	
77402	PA	Eviti	
77407	PA	Eviti	
77412	PA	Eviti	
77417	PA	Eviti	
77422	PA	Eviti	
77423	PA	Eviti	
77424	PA	Eviti	
77425	PA	Eviti	
77436	PA	Eviti	
77437	PA	Eviti	
77438	PA	Eviti	
77439	PA	Eviti	
77520	PA	Eviti	
77522	PA	Eviti	
77523	PA	Eviti	
77525	PA	Eviti	
77750	PA	Eviti	
77761	PA	Eviti	
77762	PA	Eviti	
77763	PA	Eviti	
77767	PA	Eviti	
77768	PA	Eviti	
77770	PA	Eviti	
77771	PA	Eviti	
77772	PA	Eviti	
77778	PA	Eviti	
77789	PA	Eviti	
81173	PA	Health Plan UM	
81174	PA	Health Plan UM	
81175	PA	Health Plan UM	
81176	PA	Health Plan UM	
81177	PA	Health Plan UM	
81178	PA	Health Plan UM	
81179	PA	Health Plan UM	
81180	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81181	PA	Health Plan UM	
81182	PA	Health Plan UM	
81183	PA	Health Plan UM	
81184	PA	Health Plan UM	
81185	PA	Health Plan UM	
81185	PA	Health Plan UM	
81186	PA	Health Plan UM	
81191	PA	Health Plan UM	
81191	PA	Health Plan UM	
81192	PA	Health Plan UM	
81192	PA	Health Plan UM	
81193	PA	Health Plan UM	
81193	PA	Health Plan UM	
81194	PA	Health Plan UM	
81194	PA	Health Plan UM	
81195	PA	Health Plan UM	
81200	PA	Health Plan UM	
81201	PA	Health Plan UM	
81202	PA	Health Plan UM	
81203	PA	Health Plan UM	
81204	PA	Health Plan UM	
81218	PA	Health Plan UM	
81219	PA	Health Plan UM	
81221	PA	Health Plan UM	
81225	PA	Health Plan UM	
81226	PA	Health Plan UM	
81227	PA	Health Plan UM	
81228	PA	Health Plan UM	
81228	PA	Health Plan UM	
81230	PA	Health Plan UM	
81231	PA	Health Plan UM	
81231	PA	Health Plan UM	
81233	PA	Health Plan UM	
81234	PA	Health Plan UM	
81235	PA	Health Plan UM	
81236	PA	Health Plan UM	
81236	PA	Health Plan UM	
81237	PA	Health Plan UM	
81238	PA	Health Plan UM	
81239	PA	Health Plan UM	
81240	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81241	PA	Health Plan UM	
81242	PA	Health Plan UM	
81245	PA	Health Plan UM	
81246	PA	Health Plan UM	
81247	PA	Health Plan UM	
81248	PA	Health Plan UM	
81249	PA	Health Plan UM	
81250	PA	Health Plan UM	
81250	PA	Health Plan UM	
81251	PA	Health Plan UM	
81252	PA	Health Plan UM	
81253	PA	Health Plan UM	
81254	PA	Health Plan UM	
81255	PA	Health Plan UM	
81256	PA	Health Plan UM	
81257	PA	Health Plan UM	
81257	PA	Health Plan UM	
81258	PA	Health Plan UM	
81258	PA	Health Plan UM	
81259	PA	Health Plan UM	
81259	PA	Health Plan UM	
81260	PA	Health Plan UM	
81261	PA	Health Plan UM	
81261	PA	Health Plan UM	
81262	PA	Health Plan UM	
81262	PA	Health Plan UM	
81263	PA	Health Plan UM	
81263	PA	Health Plan UM	
81264	PA	Health Plan UM	
81265	PA	Health Plan UM	
81266	PA	Health Plan UM	
81269	PA	Health Plan UM	
81269	PA	Health Plan UM	
81270	PA	Health Plan UM	
81271	PA	Health Plan UM	
81272	PA	Health Plan UM	
81273	PA	Health Plan UM	
81275	PA	Health Plan UM	
81275	PA	Health Plan UM	
81276	PA	Health Plan UM	
81277	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81278	PA	Health Plan UM	
81279	PA	Health Plan UM	
81279	PA	Health Plan UM	
81284	PA	Health Plan UM	
81285	PA	Health Plan UM	
81286	PA	Health Plan UM	
81287	PA	Health Plan UM	
81288	PA	Health Plan UM	
81289	PA	Health Plan UM	
81290	PA	Health Plan UM	
81291	PA	Health Plan UM	
81292	PA	Health Plan UM	
81293	PA	Health Plan UM	
81294	PA	Health Plan UM	
81295	PA	Health Plan UM	
81296	PA	Health Plan UM	
81297	PA	Health Plan UM	
81298	PA	Health Plan UM	
81299	PA	Health Plan UM	
81300	PA	Health Plan UM	
81301	PA	Health Plan UM	
81302	PA	Health Plan UM	
81302	PA	Health Plan UM	
81302	PA	Health Plan UM	
81302	PA	Health Plan UM	
81303	PA	Health Plan UM	
81304	PA	Health Plan UM	
81305	PA	Health Plan UM	
81306	PA	Health Plan UM	
81310	PA	Health Plan UM	
81311	PA	Health Plan UM	
81312	PA	Health Plan UM	
81313	This is considered E/I and not covered.		
81314	PA	Health Plan UM	
81315	PA	Health Plan UM	
81315	PA	Health Plan UM	
81316	PA	Health Plan UM	
81316	PA	Health Plan UM	
81317	PA	Health Plan UM	
81318	PA	Health Plan UM	
81319	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81320	PA	Health Plan UM	
81321	PA	Health Plan UM	
81321	PA	Health Plan UM	
81321	PA	Health Plan UM	
81322	PA	Health Plan UM	
81323	PA	Health Plan UM	
81324	PA	Health Plan UM	
81325	PA	Health Plan UM	
81326	PA	Health Plan UM	
81327	This is considered E/I and not covered.		
81328	PA	Health Plan UM	
81330	PA	Health Plan UM	
81331	PA	Health Plan UM	
81332	PA	Health Plan UM	
81333	PA	Health Plan UM	
81334	PA	Health Plan UM	
81335	PA	Health Plan UM	
81338	PA	Health Plan UM	
81338	PA	Health Plan UM	
81339	PA	Health Plan UM	
81339	PA	Health Plan UM	
81340	PA	Health Plan UM	
81341	PA	Health Plan UM	
81342	PA	Health Plan UM	
81343	PA	Health Plan UM	
81344	PA	Health Plan UM	
81345	PA	Health Plan UM	
81346	PA	Health Plan UM	
81347	PA	Health Plan UM	
81348	PA	Health Plan UM	
81349	PA	Health Plan UM	
81350	PA	Health Plan UM	
81355	PA	Health Plan UM	
81357	PA	Health Plan UM	
81360	PA	Health Plan UM	
81400	PA	Health Plan UM	
81400	PA	Health Plan UM	
81400	PA	Health Plan UM	
81400	PA	Health Plan UM	
81400	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81408	PA	Health Plan UM	
81410	PA	Health Plan UM	
81410	PA	Health Plan UM	
81411	PA	Health Plan UM	
81411	PA	Health Plan UM	
81412	PA	Health Plan UM	
81413	PA	Health Plan UM	
81414	PA	Health Plan UM	
81415	PA	Health Plan UM	
81415	PA	Health Plan UM	
81415	PA	Health Plan UM	
81416	PA	Health Plan UM	
81416	PA	Health Plan UM	
81416	PA	Health Plan UM	
81417	PA	Health Plan UM	
81417	PA	Health Plan UM	
81418	PA	Health Plan UM	
81418	PA	Health Plan UM	
81419	PA	Health Plan UM	
81422	PA	Health Plan UM	
81425	PA	Health Plan UM	
81425	PA	Health Plan UM	
81425	PA	Health Plan UM	
81426	PA	Health Plan UM	
81426	PA	Health Plan UM	
81426	PA	Health Plan UM	
81427	PA	Health Plan UM	
81430	PA	Health Plan UM	
81431	PA	Health Plan UM	
81437	PA	Health Plan UM	
81439	PA	Health Plan UM	
81440	PA	Health Plan UM	
81441	PA	Health Plan UM	
81442	PA	Health Plan UM	
81442	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81479	PA	Health Plan UM	
81479	PA	Health Plan UM	
81479	PA	Health Plan UM	
81479	PA	Health Plan UM	
81479	PA	Health Plan UM	
81479	PA	Health Plan UM	
81490	This is considered E/I and not covered.		
81493	PA	Health Plan UM	
81504	PA	Health Plan UM	
81506	PA	Health Plan UM	
81508	PA	Health Plan UM	
81509	PA	Health Plan UM	
81509	PA	Health Plan UM	
81510	PA	Health Plan UM	
81510	PA	Health Plan UM	
81511	PA	Health Plan UM	
81512	PA	Health Plan UM	
81512	PA	Health Plan UM	
81514	PA	Health Plan UM	
81517	PA	Health Plan UM	
81517	PA	Health Plan UM	
81522	PA	Health Plan UM	
81525	This is considered E/I and not covered.		
81529	PA	Health Plan UM	
81535	This is considered E/I and not covered.		
81536	This is considered E/I and not covered.		
81538	This is considered E/I and not covered.		
81539	PA	Health Plan UM	
81540	PA	Health Plan UM	
81541	PA	Health Plan UM	
81542	PA	Health Plan UM	
81546	PA	Health Plan UM	
81551	PA	Health Plan UM	
81552	PA	Health Plan UM	
81554	PA	Health Plan UM	
81558	PA	Health Plan UM	
81560	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
81599	PA	Health Plan UM	
81599	PA	Health Plan UM	
81599	PA	Health Plan UM	
81599	PA	Health Plan UM	
81599	PA	Health Plan UM	
88240	PA	Health Plan UM	
88299	PA	Health Plan UM	
88399	PA	Health Plan UM	
88749	PA	Health Plan UM	
89240	PA	Health Plan UM	
89250	PA	Health Plan UM	
89251	PA	Health Plan UM	
89253	PA	Health Plan UM	
89254	PA	Health Plan UM	
89255	PA	Health Plan UM	
89257	PA	Health Plan UM	
89258	PA	Health Plan UM	
89259	PA	Health Plan UM	
89260	PA	Health Plan UM	
89261	PA	Health Plan UM	
89264	PA	Health Plan UM	
89268	PA	Health Plan UM	
89272	PA	Health Plan UM	
89280	PA	Health Plan UM	
89281	PA	Health Plan UM	
89290	PA	Health Plan UM	
89291	PA	Health Plan UM	
89335	PA	Health Plan UM	
89337	PA	Health Plan UM	
89342	PA	Health Plan UM	
89343	PA	Health Plan UM	
89344	PA	Health Plan UM	
89346	PA	Health Plan UM	
89352	PA	Health Plan UM	
89353	PA	Health Plan UM	
89354	PA	Health Plan UM	
89356	PA	Health Plan UM	
89398	PA	Health Plan UM	
90901	PA	Health Plan UM	PA is not required with the following diagnosis: Mixed, stress or urinary urgency incontinence N39.46, N39.3, N39.41

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
90912	PA	Health Plan UM	PA is not required with the following diagnosis: Mixed, stress or urinary urgency incontinence N39.46, N39.3, N39.41
90913	PA	Health Plan UM	PA is not required with the following diagnosis: Mixed, stress or urinary urgency incontinence N39.46, N39.3, N39.41
97153	PA	Health Plan UM	PA required if member is under the hage of 12.
97154	PA	Health Plan UM	PA required if member is under the hage of 12.
97155	PA	Health Plan UM	PA required if member is under the hage of 12.
97156	PA	Health Plan UM	PA required if member is under the hage of 12.
97157	PA	Health Plan UM	PA required if member is under the hage of 12.
97158	PA	Health Plan UM	PA required if member is under the hage of 12.
99183	PA	Health Plan UM	
	PA	Health Plan UM	
K0856	PA	Health Plan UM	
0001U	PA	Health Plan UM	
0001U	PA	Health Plan UM	
0003M	This is considered E/I and not covered.		
0004M	PA	Health Plan UM	
0005U	PA	Health Plan UM	
0006M	PA	Health Plan UM	
0007M	PA	Health Plan UM	
0011M	PA	Health Plan UM	
0015M	PA	Health Plan UM	
0016U	PA	Health Plan UM	
0017M	PA	Health Plan UM	
0017U	PA	Health Plan UM	
0018U	PA	Health Plan UM	
0019U	PA	Health Plan UM	
0022U	PA	Health Plan UM	
0023U	PA	Health Plan UM	
0023U	PA	Health Plan UM	
0026U	PA	Health Plan UM	
0027U	PA	Health Plan UM	
0029U	This is considered E/I and not covered.		
0030U	PA	Health Plan UM	
0031U	This is considered E/I and not covered.		
0032U	This is considered E/I and not covered.		
0035U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0036U	This is considered E/I and not covered.		
0036U	This is considered E/I and not covered.		
0037U	PA	Health Plan UM	
0040U	PA	Health Plan UM	
0045U	This is considered E/I and not covered.		
0046U	PA	Health Plan UM	
0047U	PA	Health Plan UM	
0048U	PA	Health Plan UM	
0049U	PA	Health Plan UM	
0049U	PA	Health Plan UM	
0050U	PA	Health Plan UM	
0055U	PA	Health Plan UM	
0055U	PA	Health Plan UM	
0058U	PA	Health Plan UM	
0059U	PA	Health Plan UM	
0060U	This is considered E/I and not covered.		
0060U	This is considered E/I and not covered.		
0062U	PA	Health Plan UM	
0063U	PA	Health Plan UM	
0067U	This is considered E/I and not covered.		
0069U	This is considered E/I and not covered.		
0070U	PA	Health Plan UM	
0071U	PA	Health Plan UM	
0072U	PA	Health Plan UM	
0073U	PA	Health Plan UM	
0074U	PA	Health Plan UM	
0075U	PA	Health Plan UM	
0076U	PA	Health Plan UM	
0079U	This is considered E/I and not covered.		
0080U	PA	Health Plan UM	
0084U	PA	Health Plan UM	
0088U	PA	Health Plan UM	
0089U	PA	Health Plan UM	
0090U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0094U	PA	Health Plan UM	
0094U	This is considered E/I and not covered.		
0095T	PA	Health Plan UM	
0095U	PA	Health Plan UM	
0098T	PA	Health Plan UM	
0101U	PA	Health Plan UM	
0105U	PA	Health Plan UM	
0111U	PA	Health Plan UM	
0113U	PA	Health Plan UM	
0118U	PA	Health Plan UM	
0120U	This is considered E/I and not covered.		
0130U	This is considered E/I and not covered.		
0131U	This is considered E/I and not covered.		
0131U	This is considered E/I and not covered.		
0132U	This is considered E/I and not covered.		
0132U	This is considered E/I and not covered.		
0133U	This is considered E/I and not covered.		
0134U	This is considered E/I and not covered.		
0135U	This is considered E/I and not covered.		
0135U	This is considered E/I and not covered.		
0136U	This is considered E/I and not covered.		
0137U	This is considered E/I and not covered.		
0138U	This is considered E/I and not covered.		
0153U	This is considered E/I and not covered.		
0153U	This is considered E/I and not covered.		
0154U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0156U	This is considered E/I and not covered.		
0157U	This is considered E/I and not covered.		
0157U	This is considered E/I and not covered.		
0158U	This is considered E/I and not covered.		
0159U	This is considered E/I and not covered.		
0160U	This is considered E/I and not covered.		
0161U	This is considered E/I and not covered.		
0162U	This is considered E/I and not covered.		
0164T	PA	Health Plan UM	
0165T	PA	Health Plan UM	
0169U	PA	Health Plan UM	
0170U	PA	Health Plan UM	
0171U	PA	Health Plan UM	
0172U	PA	Health Plan UM	
0173U	This is considered E/I and not covered.		
0173U	This is considered E/I and not covered.		
0175U	This is considered E/I and not covered.		
0175U	This is considered E/I and not covered.		
0179U	PA	Health Plan UM	
0180U	PA	Health Plan UM	
0180U	PA	Health Plan UM	
0181U	PA	Health Plan UM	
0182U	PA	Health Plan UM	
0183U	PA	Health Plan UM	
0184U	PA	Health Plan UM	
0185U	PA	Health Plan UM	
0186U	PA	Health Plan UM	
0187U	PA	Health Plan UM	
0188U	PA	Health Plan UM	
0189U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0190U	PA	Health Plan UM	
0191U	PA	Health Plan UM	
0192U	PA	Health Plan UM	
0193U	PA	Health Plan UM	
0194U	PA	Health Plan UM	
0195U	PA	Health Plan UM	
0196U	PA	Health Plan UM	
0197U	PA	Health Plan UM	
0198U	PA	Health Plan UM	
0199U	PA	Health Plan UM	
0200U	This is considered E/I and not covered.		
0201U	PA	Health Plan UM	
0203U	This is considered E/I and not covered.		
0203U	This is considered E/I and not covered.		
0204U	PA	Health Plan UM	
0205U	This is considered E/I and not covered.		
0205U	This is considered E/I and not covered.		
0206U	PA	Health Plan UM	
0209U	PA	Health Plan UM	
0211U	PA	Health Plan UM	
0212U	PA	Health Plan UM	
0213U	PA	Health Plan UM	
0214U	PA	Health Plan UM	
0215U	PA	Health Plan UM	
0216U	PA	Health Plan UM	
0217U	PA	Health Plan UM	
0218U	PA	Health Plan UM	
0218U	PA	Health Plan UM	
0221U	PA	Health Plan UM	
0221U	PA	Health Plan UM	
0222U	PA	Health Plan UM	
0227U	PA	Health Plan UM	
0229U	This is considered E/I and not covered.		
0229U	This is considered E/I and not covered.		
0230U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0231U	PA	Health Plan UM	
0232T	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 All other DX are considered experimental / investigational
0232T	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 All other DX are considered experimental / investigational
0232U	PA	Health Plan UM	
0233U	PA	Health Plan UM	
0233U	PA	Health Plan UM	
0234U	PA	Health Plan UM	
0234U	PA	Health Plan UM	
0235U	PA	Health Plan UM	
0237U	PA	Health Plan UM	
0237U	PA	Health Plan UM	
0238U	PA	Health Plan UM	
0238U	PA	Health Plan UM	
0242U	PA	Health Plan UM	
0244U	PA	Health Plan UM	
0245U	PA	Health Plan UM	
0246U	PA	Health Plan UM	
0248U	PA	Health Plan UM	
0250U	PA	Health Plan UM	
0250U	PA	Health Plan UM	
0252U	PA	Health Plan UM	
0253U	PA	Health Plan UM	
0254U	PA	Health Plan UM	
0255U	PA	Health Plan UM	
0256U	PA	Health Plan UM	
0257U	PA	Health Plan UM	
0258U	PA	Health Plan UM	
0260U	PA	Health Plan UM	
0262U	PA	Health Plan UM	
0263U	PA	Health Plan UM	
0264U	PA	Health Plan UM	
0265U	PA	Health Plan UM	
0266U	PA	Health Plan UM	
0267U	PA	Health Plan UM	
0268U	PA	Health Plan UM	
0269U	PA	Health Plan UM	
0270U	PA	Health Plan UM	
0271U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0272U	PA	Health Plan UM	
0273U	PA	Health Plan UM	
0274T	PA	Health Plan UM	
0274U	PA	Health Plan UM	
0276U	PA	Health Plan UM	
0277U	PA	Health Plan UM	
0278U	PA	Health Plan UM	
0285U	PA	Health Plan UM	
0287U	PA	Health Plan UM	
0287U	PA	Health Plan UM	
0289U	PA	Health Plan UM	
0290U	PA	Health Plan UM	
0291U	PA	Health Plan UM	
0292U	PA	Health Plan UM	
0293U	PA	Health Plan UM	
0294U	PA	Health Plan UM	
0296U	PA	Health Plan UM	
0298U	PA	Health Plan UM	
0299U	PA	Health Plan UM	
0300U	PA	Health Plan UM	
0314U	PA	Health Plan UM	
0314U	PA	Health Plan UM	
0315U	PA	Health Plan UM	
0318U	PA	Health Plan UM	
0319U	PA	Health Plan UM	
0320U	PA	Health Plan UM	
0326U	PA	Health Plan UM	
0328U	PA	Health Plan UM	
0329U	PA	Health Plan UM	
0331U	PA	Health Plan UM	
0332U	PA	Health Plan UM	
0333U	PA	Health Plan UM	
0334U	PA	Health Plan UM	
0335U	This is considered E/I and not covered.		
0335U	This is considered E/I and not covered.		
0336U	This is considered E/I and not covered.		
0339U	PA	Health Plan UM	
0340U	PA	Health Plan UM	
0340U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0341U	PA	Health Plan UM	
0342U	PA	Health Plan UM	
0343U	This is considered E/I and not covered.		
0343U	This is considered E/I and not covered.		
0345U	This is considered E/I and not covered.		
0347U	This is considered E/I and not covered.		
0348U	This is considered E/I and not covered.		
0349U	This is considered E/I and not covered.		
0350U	This is considered E/I and not covered.		
0355U	PA	Health Plan UM	
0355U	PA	Health Plan UM	
0356U	PA	Health Plan UM	
0356U	PA	Health Plan UM	
0362U	PA	Health Plan UM	
0363U	This is considered E/I and not covered.		
0364U	PA	Health Plan UM	
0368U	This is considered E/I and not covered.		
0376U	PA	Health Plan UM	
0376U	PA	Health Plan UM	
0376U	PA	Health Plan UM	
0378U	PA	Health Plan UM	
0379U	PA	Health Plan UM	
0385U	PA	Health Plan UM	
0388U	PA	Health Plan UM	
0389U	PA	Health Plan UM	
0391U	PA	Health Plan UM	
0391U	PA	Health Plan UM	
0392U	This is considered E/I and not covered.		
0395T	PA	Eviti	
0398U	This is considered E/I and not covered.		
0400U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0401U	PA	Health Plan UM	
0409U	PA	Health Plan UM	
0417U	PA	Health Plan UM	
0421U	PA	Health Plan UM	
0422U	PA	Health Plan UM	
0425U	PA	Health Plan UM	
0426U	PA	Health Plan UM	
0435U	PA	Health Plan UM	
0436U	PA	Health Plan UM	
0436U	PA	Health Plan UM	
0437U	PA	Health Plan UM	
0439U	PA	Health Plan UM	
0440U	PA	Health Plan UM	
0444U	PA	Health Plan UM	
0449U	PA	Health Plan UM	
0459U	PA	Health Plan UM	
0469U	PA	Health Plan UM	
0474U	PA	Health Plan UM	
0475U	PA	Health Plan UM	
0476U	PA	Health Plan UM	
0477U	PA	Health Plan UM	
0481U	PA	Health Plan UM	
0485U	PA	Health Plan UM	
0486U	PA	Health Plan UM	
0487U	PA	Health Plan UM	
0488U	PA	Health Plan UM	
0489U	PA	Health Plan UM	
0490U	PA	Health Plan UM	
0491U	PA	Health Plan UM	
0492U	PA	Health Plan UM	
0493U	PA	Health Plan UM	
0493U	PA	Health Plan UM	
0494U	PA	Health Plan UM	
0495U	PA	Health Plan UM	
0496U	PA	Health Plan UM	
0497U	PA	Health Plan UM	
0498U	PA	Health Plan UM	
0499U	PA	Health Plan UM	
0500U	PA	Health Plan UM	
0501U	PA	Health Plan UM	
0506U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0506U	PA	Health Plan UM	
0507U	PA	Health Plan UM	
0511U	PA	Health Plan UM	
0512U	PA	Health Plan UM	
0513U	PA	Health Plan UM	
0516U	PA	Health Plan UM	
0523U	PA	Health Plan UM	
0530U	PA	Health Plan UM	
0531U	PA	Health Plan UM	
0532U	PA	Health Plan UM	
0533U	PA	Health Plan UM	
0534U	PA	Health Plan UM	
0537U	PA	Health Plan UM	
0538U	PA	Health Plan UM	
0539U	PA	Health Plan UM	
0540U	PA	Health Plan UM	
0543U	PA	Health Plan UM	
0549U	PA	Health Plan UM	
0558U	PA	Health Plan UM	
0559U	No PA		
0560U	PA	Health Plan UM	
0561U	PA	Health Plan UM	
0562U	PA	Health Plan UM	
0565U	PA	Health Plan UM	
0566U	PA	Health Plan UM	
0567U	PA	Health Plan UM	
0567U	PA	Health Plan UM	
0568U	PA	Health Plan UM	
0569U	PA	Health Plan UM	
0570U	PA	Health Plan UM	
0571U	PA	Health Plan UM	
0572U	PA	Health Plan UM	
0573U	PA	Health Plan UM	
0574U	PA	Health Plan UM	
0577U	No PA		
0578U	PA	Health Plan UM	
0582U	PA	Health Plan UM	
0583U	PA	Health Plan UM	
0585U	PA	Health Plan UM	
0591U	PA	Health Plan UM	
0592U	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
0627T	PA	Health Plan UM	
0628T	PA	Health Plan UM	
0629T	PA	Health Plan UM	
A0021	Non-covered		
A0225	No PA		
A0380	No PA		
A0382	Non-covered		
A0384	Non-covered		
A0390	No PA		
A0392	Non-covered		
A0394	Non-covered		
A0396	Non-covered		
A0398	Non-covered		
A0420	Non-covered		
A0422	Non-covered		
A0424	Non-covered		
A0425	No PA		
A0426	PA	Health Plan UM	
A0427	No PA		
A0428	PA	Health Plan UM	
A0429	No PA		
A0430	PA	Health Plan UM	
A0431	PA	Health Plan UM	
A0432	No PA		
A0433	No PA		
A0434	No PA		
A0435	PA	Health Plan UM	
A0436	PA	Health Plan UM	
A0998	No PA		
A0999	PA	Health Plan UM	
A2014	PA	Health Plan UM	
A2015	PA	Health Plan UM	
A2016	PA	Health Plan UM	
A2017	PA	Health Plan UM	
A2018	PA	Health Plan UM	
A2019	PA	Health Plan UM	
A2020	PA	Health Plan UM	
A2021	PA	Health Plan UM	
A2022	PA	Health Plan UM	
A2023	PA	Health Plan UM	
A2024	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
A2025	PA	Health Plan UM	
A4100	PA	Health Plan UM	
A7025	PA	Health Plan UM	
A9513	PA	Eviti	
A9543	PA	Eviti	
A9590	PA	Eviti	
A9604	PA	Eviti	
A9606	PA	Eviti	
A9607	PA	Eviti	
C1734	Non-covered		
C1767	Non-covered		
C1767	PA	Health Plan UM	
C1778	Non-covered		
C1787	Non-covered		
C1789	Non-covered		
C1816	PA	Health Plan UM	
C1820	PA	Health Plan UM	
C1822	PA	Health Plan UM	
C1823	PA	Health Plan UM	
C1883	PA	Health Plan UM	
C2644	PA	Eviti	
C9065	PA	Eviti	
C9076	PA	Eviti	
C9080	PA	Eviti	
C9081	PA	Eviti	
C9082	PA	Eviti	
C9083	PA	Eviti	
C9084	PA	Eviti	
C9087	PA	Eviti	
C9091	PA	Eviti	
C9095	PA	Eviti	
C9098	PA	Eviti	
C9142	PA	Eviti	
C9146	PA	Eviti	
C9147	PA	Eviti	
C9148	PA	Eviti	
C9155	PA	Eviti	
C9169	PA	Eviti	
C9170	PA	Eviti	
C9174	PA	Eviti	
C9175	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
C9301	PA	Eviti	
C9302	PA	Eviti	
C9303	PA	Eviti	
C9306	PA	Eviti	
C9308	PA	Eviti	
C9352	PA	Health Plan UM	
C9353	PA	Health Plan UM	
C9354	PA	Health Plan UM	
C9355	PA	Health Plan UM	
C9356	Non-covered		
C9359	Non-covered		
C9362	Non-covered		
C9399	PA	Eviti	
C9757	PA	Health Plan UM	
C9757	PA	Health Plan UM	
C9758	PA	Health Plan UM	Modifiers Q0, Q1
C9760	PA	Health Plan UM	Modifiers Q0, Q1
C9782	PA	Health Plan UM	Modifiers Q0, Q1
C9783	PA	Health Plan UM	Modifiers Q0, Q1
C9795	PA	Eviti	
E0193	PA	Health Plan UM	
E0194	PA	Health Plan UM	
E0260	PA	Health Plan UM	
E0261	PA	Health Plan UM	
E0265	PA	Health Plan UM	
E0266	PA	Health Plan UM	
E0270	Non-covered		
E0277	PA	Health Plan UM	
E0294	PA	Health Plan UM	
E0295	PA	Health Plan UM	
E0296	PA	Health Plan UM	
E0297	PA	Health Plan UM	
E0300	PA	Health Plan UM	
E0301	PA	Health Plan UM	
E0302	PA	Health Plan UM	
E0303	PA	Health Plan UM	
E0304	PA	Health Plan UM	
E0328	PA	Health Plan UM	
E0329	PA	Health Plan UM	
E0371	PA	Health Plan UM	
E0373	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
E0483	PA	Health Plan UM	
E0486	PA	Health Plan UM	
E0604	PA	Health Plan UM	
E0635	PA	Health Plan UM	
E0638	Non-covered		
E0641	Non-covered		
E0642	Non-covered		
E0650	PA	Health Plan UM	
E0651	PA	Health Plan UM	
E0652	PA	Health Plan UM	
E0656	PA	Health Plan UM	
E0657	PA	Health Plan UM	
E0660	PA	Health Plan UM	
E0665	PA	Health Plan UM	
E0666	PA	Health Plan UM	
E0667	PA	Health Plan UM	
E0668	PA	Health Plan UM	
E0669	PA	Health Plan UM	
E0670	PA	Health Plan UM	
E0671	PA	Health Plan UM	
E0672	PA	Health Plan UM	
E0673	PA	Health Plan UM	
E0675	PA	Health Plan UM	
E0676	PA	Health Plan UM	
E0691	PA	Health Plan UM	
E0692	PA	Health Plan UM	
E0693	PA	Health Plan UM	
E0694	PA	Health Plan UM	
E0747	PA	Health Plan UM	
E0747	PA	Health Plan UM	
E0748	PA	Health Plan UM	
E0749	PA	Health Plan UM	
E0766	PA	Health Plan UM	This code is considered payable for the Novocure device for treatment of glioblastoma.
E0769	PA	Health Plan UM	
E0770	PA	Health Plan UM	
E0781	PA	Health Plan UM	
E0782	PA	Health Plan UM	
E0783	PA	Health Plan UM	
E0786	PA	Health Plan UM	
E0983	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
E0984	PA	Health Plan UM	
E0986	PA	Health Plan UM	
E1002	PA	Health Plan UM	
E1003	PA	Health Plan UM	
E1004	PA	Health Plan UM	
E1005	PA	Health Plan UM	
E1006	PA	Health Plan UM	
E1007	PA	Health Plan UM	
E1008	PA	Health Plan UM	
E1009	PA	Health Plan UM	
E1010	PA	Health Plan UM	
E1012	PA	Health Plan UM	
E1018	PA	Health Plan UM	
E1035	PA	Health Plan UM	
E1036	PA	Health Plan UM	
E1220	PA	Health Plan UM	
E1230	PA	Health Plan UM	
E1239	PA	Health Plan UM	
E2102	PA	Health Plan UM	
E2325	PA	Health Plan UM	
E2327	PA	Health Plan UM	
E2328	PA	Health Plan UM	
E2329	PA	Health Plan UM	
E2330	PA	Health Plan UM	
E2331	PA	Health Plan UM	
E2343	PA	Health Plan UM	
E2351	PA	Health Plan UM	
E2504	PA	Health Plan UM	
E2506	PA	Health Plan UM	
E2508	PA	Health Plan UM	
E2510	PA	Health Plan UM	
E2599	PA	Health Plan UM	
E2609	PA	Health Plan UM	
E2617	PA	Health Plan UM	
G0276	PA	Health Plan UM	Modifiers Q0, Q1
G0277	PA	Health Plan UM	
G0341	PA	Health Plan UM	
G0342	PA	Health Plan UM	
G0343	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
G0460	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 A;; ptjer DX are considered experimental/ investigational.
G0460	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 All other DX are considered experimental / investigational
G2000	PA	Health Plan UM	Modifiers Q0, Q1
G9143	No PA		
H0008	Non-covered		
H0009	Non-covered		
H0010	Non-covered		
H0011	Non-covered		
H0017	Non-covered		
H0018	Non-covered		
J0594	PA	Eviti	
J0614	PA	Eviti	
J0870	PA	Eviti	
J0893	PA	Eviti	
J0894	PA	Eviti	
J1246	PA	Eviti	
J1323	PA	Eviti	
J1326	PA	Eviti	
J1950	PA	Eviti	
J1952	PA	Eviti	
J1954	PA	Eviti	
J3055	PA	Eviti	
J3263	PA	Eviti	
J3315	PA	Eviti	
J3590	PA	Eviti	
J7330	PA	Health Plan UM	
J8510	PA	Eviti	
J8520	PA	Eviti	
J8521	PA	Eviti	
J8522	PA	Eviti	
J8530	PA	Eviti	
J8560	PA	Eviti	
J8565	PA	Eviti	
J8600	PA	Eviti	
J8700	PA	Eviti	
J8705	PA	Eviti	
J8999	PA	Eviti	
J9000	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
J9011	PA	Eviti	
J9015	PA	Eviti	
J9017	PA	Eviti	
J9019	PA	Eviti	
J9020	PA	Eviti	
J9021	PA	Eviti	
J9022	PA	Eviti	
J9023	PA	Eviti	
J9024	PA	Eviti	
J9025	PA	Eviti	
J9026	PA	Eviti	
J9027	PA	Eviti	
J9028	PA	Eviti	
J9029	PA	Eviti	
J9030	PA	Eviti	
J9032	PA	Eviti	
J9033	PA	Eviti	
J9034	PA	Eviti	
J9035	PA	Eviti	
J9036	PA	Eviti	
J9037	PA	Eviti	
J9039	PA	Eviti	
J9040	PA	Eviti	
J9041	PA	Eviti	
J9042	PA	Eviti	
J9043	PA	Eviti	
J9044	PA	Eviti	
J9045	PA	Eviti	
J9046	PA	Eviti	
J9047	PA	Eviti	
J9048	PA	Eviti	
J9049	PA	Eviti	
J9050	PA	Eviti	
J9051	PA	Eviti	
J9054	PA	Eviti	
J9055	PA	Eviti	
J9056	PA	Eviti	
J9057	PA	Eviti	
J9058	PA	Eviti	
J9059	PA	Eviti	
J9060	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
J9061	PA	Eviti	
J9063	PA	Eviti	
J9064	PA	Eviti	
J9065	PA	Eviti	
J9070	PA	Eviti	
J9071	PA	Eviti	
J9072	PA	Eviti	
J9073	PA	Eviti	
J9074	PA	Eviti	
J9075	PA	Eviti	
J9098	PA	Eviti	
J9100	PA	Eviti	
J9118	PA	Eviti	
J9119	PA	Eviti	
J9120	PA	Eviti	
J9130	PA	Eviti	
J9144	PA	Eviti	
J9145	PA	Eviti	
J9150	PA	Eviti	
J9153	PA	Eviti	
J9155	PA	Eviti	
J9171	PA	Eviti	
J9173	PA	Eviti	
J9174	PA	Eviti	
J9176	PA	Eviti	
J9177	PA	Eviti	
J9178	PA	Eviti	
J9179	PA	Eviti	
J9181	PA	Eviti	
J9184	PA	Eviti	
J9185	PA	Eviti	
J9190	PA	Eviti	
J9196	PA	Eviti	
J9198	PA	Eviti	
J9200	PA	Eviti	
J9201	PA	Eviti	
J9202	PA	Eviti	
J9203	PA	Eviti	
J9204	PA	Eviti	
J9205	PA	Eviti	
J9206	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
J9207	PA	Eviti	
J9208	PA	Eviti	
J9211	PA	Eviti	
J9214	PA	Eviti	
J9215	PA	Eviti	
J9217	PA	Eviti	
J9218	PA	Eviti	
J9223	PA	Eviti	
J9227	PA	Eviti	
J9228	PA	Eviti	
J9229	PA	Eviti	
J9230	PA	Eviti	
J9245	PA	Eviti	
J9246	PA	Eviti	
J9247	PA	Eviti	
J9248	PA	Eviti	
J9258	PA	Eviti	
J9259	PA	Eviti	
J9261	PA	Eviti	
J9262	PA	Eviti	
J9263	PA	Eviti	
J9264	PA	Eviti	
J9266	PA	Eviti	
J9267	PA	Eviti	
J9268	PA	Eviti	
J9269	PA	Eviti	
J9271	PA	Eviti	
J9272	PA	Eviti	
J9273	PA	Eviti	
J9274	PA	Eviti	
J9275	PA	Eviti	
J9276	PA	Eviti	
J9280	PA	Eviti	
J9281	PA	Eviti	
J9282	PA	Eviti	
J9285	PA	Eviti	
J9286	PA	Eviti	
J9289	PA	Eviti	
J9292	PA	Eviti	
J9293	PA	Eviti	
J9294	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
J9295	PA	Eviti	
J9296	PA	Eviti	
J9297	PA	Eviti	
J9298	PA	Eviti	
J9299	PA	Eviti	
J9301	PA	Eviti	
J9302	PA	Eviti	
J9303	PA	Eviti	
J9304	PA	Eviti	
J9305	PA	Eviti	
J9306	PA	Eviti	
J9307	PA	Eviti	
J9308	PA	Eviti	
J9309	PA	Eviti	
J9311	PA	Eviti	
J9312	PA	Eviti	
J9313	PA	Eviti	
J9314	PA	Eviti	
J9315	PA	Eviti	
J9316	PA	Eviti	
J9317	PA	Eviti	
J9318	PA	Eviti	
J9319	PA	Eviti	
J9320	PA	Eviti	
J9321	PA	Eviti	
J9322	PA	Eviti	
J9323	PA	Eviti	
J9324	PA	Eviti	
J9325	PA	Eviti	
J9326	PA	Eviti	
J9328	PA	Eviti	
J9329	PA	Eviti	
J9330	PA	Eviti	
J9331	PA	Eviti	
J9340	PA	Eviti	
J9341	PA	Eviti	
J9342	PA	Eviti	
J9345	PA	Eviti	
J9347	PA	Eviti	
J9348	PA	Eviti	
J9349	PA	Eviti	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
J9350	PA	Eviti	
J9351	PA	Eviti	
J9352	PA	Eviti	
J9353	PA	Eviti	
J9354	PA	Eviti	
J9355	PA	Eviti	
J9356	PA	Eviti	
J9357	PA	Eviti	
J9358	PA	Eviti	
J9359	PA	Eviti	
J9360	PA	Eviti	
J9370	PA	Eviti	
J9371	PA	Eviti	
J9380	PA	Eviti	
J9382	PA	Eviti	
J9390	PA	Eviti	
J9400	PA	Eviti	
J9600	PA	Eviti	
J9999	PA	Eviti	
K0008	PA	Health Plan UM	
K0009	PA	Health Plan UM	
K0010	PA	Health Plan UM	
K0011	PA	Health Plan UM	
K0012	PA	Health Plan UM	
K0013	PA	Health Plan UM	
K0014	PA	Health Plan UM	
K0108	PA	Health Plan UM	
K0800	PA	Health Plan UM	
K0801	PA	Health Plan UM	
K0802	PA	Health Plan UM	
K0806	PA	Health Plan UM	
K0807	PA	Health Plan UM	
K0808	PA	Health Plan UM	
K0812	PA	Health Plan UM	
K0813	PA	Health Plan UM	
K0814	PA	Health Plan UM	
K0815	PA	Health Plan UM	
K0816	PA	Health Plan UM	
K0820	PA	Health Plan UM	
K0821	PA	Health Plan UM	
K0822	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
K0823	PA	Health Plan UM	
K0824	PA	Health Plan UM	
K0825	PA	Health Plan UM	
K0826	PA	Health Plan UM	
K0827	PA	Health Plan UM	
K0828	PA	Health Plan UM	
K0829	PA	Health Plan UM	
K0830	PA	Health Plan UM	
K0831	PA	Health Plan UM	
K0835	PA	Health Plan UM	
K0836	PA	Health Plan UM	
K0837	PA	Health Plan UM	
K0838	PA	Health Plan UM	
K0839	PA	Health Plan UM	
K0840	PA	Health Plan UM	
K0841	PA	Health Plan UM	
K0842	PA	Health Plan UM	
K0843	PA	Health Plan UM	
K0848	PA	Health Plan UM	
K0849	PA	Health Plan UM	
K0850	PA	Health Plan UM	
K0851	PA	Health Plan UM	
K0852	PA	Health Plan UM	
K0853	PA	Health Plan UM	
K0854	PA	Health Plan UM	
K0855	PA	Health Plan UM	
K0857	PA	Health Plan UM	
K0858	PA	Health Plan UM	
K0859	PA	Health Plan UM	
K0860	PA	Health Plan UM	
K0861	PA	Health Plan UM	
K0862	PA	Health Plan UM	
K0863	PA	Health Plan UM	
K0864	PA	Health Plan UM	
K0868	PA	Health Plan UM	
K0869	PA	Health Plan UM	
K0870	PA	Health Plan UM	
K0871	PA	Health Plan UM	
K0877	PA	Health Plan UM	
K0878	PA	Health Plan UM	
K0879	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
K0880	PA	Health Plan UM	
K0884	PA	Health Plan UM	
K0885	PA	Health Plan UM	
K0886	PA	Health Plan UM	
K0890	PA	Health Plan UM	
K0891	PA	Health Plan UM	
K0898	PA	Health Plan UM	
K0900	PA	Health Plan UM	
K1007	PA	Health Plan UM	
L0999	PA	Health Plan UM	
L1499	PA	Health Plan UM	
L3901	PA	Health Plan UM	
L3904	PA	Health Plan UM	
L3956	PA	Health Plan UM	
L5000	PA	Health Plan UM	
L5010	PA	Health Plan UM	
L5020	PA	Health Plan UM	
L5050	PA	Health Plan UM	
L5060	PA	Health Plan UM	
L5100	PA	Health Plan UM	
L5105	PA	Health Plan UM	
L5150	PA	Health Plan UM	
L5160	PA	Health Plan UM	
L5200	PA	Health Plan UM	
L5210	PA	Health Plan UM	
L5220	PA	Health Plan UM	
L5230	PA	Health Plan UM	
L5250	PA	Health Plan UM	
L5270	PA	Health Plan UM	
L5280	PA	Health Plan UM	
L5301	PA	Health Plan UM	
L5312	PA	Health Plan UM	
L5321	PA	Health Plan UM	
L5331	PA	Health Plan UM	
L5341	PA	Health Plan UM	
L5500	PA	Health Plan UM	
L5505	PA	Health Plan UM	
L5520	PA	Health Plan UM	
L5530	PA	Health Plan UM	
L5535	PA	Health Plan UM	
L5540	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L5560	PA	Health Plan UM	
L5570	PA	Health Plan UM	
L5580	PA	Health Plan UM	
L5585	PA	Health Plan UM	
L5590	PA	Health Plan UM	
L5595	PA	Health Plan UM	
L5600	PA	Health Plan UM	
L5610	PA	Health Plan UM	
L5611	PA	Health Plan UM	
L5613	PA	Health Plan UM	
L5614	PA	Health Plan UM	
L5616	PA	Health Plan UM	
L5617	PA	Health Plan UM	
L5618	PA	Health Plan UM	
L5620	PA	Health Plan UM	
L5622	PA	Health Plan UM	
L5624	PA	Health Plan UM	
L5626	PA	Health Plan UM	
L5628	PA	Health Plan UM	
L5629	PA	Health Plan UM	
L5630	PA	Health Plan UM	
L5631	PA	Health Plan UM	
L5632	PA	Health Plan UM	
L5634	PA	Health Plan UM	
L5636	PA	Health Plan UM	
L5637	PA	Health Plan UM	
L5638	PA	Health Plan UM	
L5639	PA	Health Plan UM	
L5640	PA	Health Plan UM	
L5642	PA	Health Plan UM	
L5643	PA	Health Plan UM	
L5644	PA	Health Plan UM	
L5645	PA	Health Plan UM	
L5646	PA	Health Plan UM	
L5647	PA	Health Plan UM	
L5648	PA	Health Plan UM	
L5649	PA	Health Plan UM	
L5650	PA	Health Plan UM	
L5651	PA	Health Plan UM	
L5652	PA	Health Plan UM	
L5653	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L5654	PA	Health Plan UM	
L5655	PA	Health Plan UM	
L5656	PA	Health Plan UM	
L5658	PA	Health Plan UM	
L5661	PA	Health Plan UM	
L5665	PA	Health Plan UM	
L5666	PA	Health Plan UM	
L5668	PA	Health Plan UM	
L5670	PA	Health Plan UM	
L5671	PA	Health Plan UM	
L5672	PA	Health Plan UM	
L5676	PA	Health Plan UM	
L5677	PA	Health Plan UM	
L5678	PA	Health Plan UM	
L5682	PA	Health Plan UM	
L5684	PA	Health Plan UM	
L5685	PA	Health Plan UM	
L5686	PA	Health Plan UM	
L5688	PA	Health Plan UM	
L5690	PA	Health Plan UM	
L5692	PA	Health Plan UM	
L5694	PA	Health Plan UM	
L5695	PA	Health Plan UM	
L5696	PA	Health Plan UM	
L5697	PA	Health Plan UM	
L5698	PA	Health Plan UM	
L5699	PA	Health Plan UM	
L5700	PA	Health Plan UM	
L5701	PA	Health Plan UM	
L5702	PA	Health Plan UM	
L5703	PA	Health Plan UM	
L5707	PA	Health Plan UM	
L5710	PA	Health Plan UM	
L5711	PA	Health Plan UM	
L5712	PA	Health Plan UM	
L5714	PA	Health Plan UM	
I5716	PA	Health Plan UM	
L5718	PA	Health Plan UM	
L5722	PA	Health Plan UM	
L5724	PA	Health Plan UM	
L5726	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L5728	PA	Health Plan UM	
L5780	PA	Health Plan UM	
L5781	PA	Health Plan UM	
L5782	PA	Health Plan UM	
L5785	PA	Health Plan UM	
L5790	PA	Health Plan UM	
L5795	PA	Health Plan UM	
L5810	PA	Health Plan UM	
L5811	PA	Health Plan UM	
L5812	PA	Health Plan UM	
L5814	PA	Health Plan UM	
L5816	PA	Health Plan UM	
L5818	PA	Health Plan UM	
L5822	PA	Health Plan UM	
L5824	PA	Health Plan UM	
L5826	PA	Health Plan UM	
L5828	PA	Health Plan UM	
L5830	PA	Health Plan UM	
L5840	PA	Health Plan UM	
L5845	PA	Health Plan UM	
L5848	PA	Health Plan UM	
L5850	PA	Health Plan UM	
L5855	PA	Health Plan UM	
L5856	PA	Health Plan UM	
L5857	PA	Health Plan UM	
L5858	PA	Health Plan UM	
L5859	PA	Health Plan UM	
L5910	PA	Health Plan UM	
L5920	PA	Health Plan UM	
L5925	PA	Health Plan UM	
L5930	PA	Health Plan UM	
L5940	PA	Health Plan UM	
L5950	PA	Health Plan UM	
L5960	PA	Health Plan UM	
L5961	PA	Health Plan UM	
L5962	PA	Health Plan UM	
L5964	PA	Health Plan UM	
L5966	PA	Health Plan UM	
L5968	PA	Health Plan UM	
L5969	PA	Health Plan UM	
L5970	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L5971	PA	Health Plan UM	
L5972	PA	Health Plan UM	
L5973	PA	Health Plan UM	
L5974	PA	Health Plan UM	
L5975	PA	Health Plan UM	
L5976	PA	Health Plan UM	
L5978	PA	Health Plan UM	
L5979	PA	Health Plan UM	
L5980	PA	Health Plan UM	
L5981	PA	Health Plan UM	
L5982	PA	Health Plan UM	
L5984	PA	Health Plan UM	
L5985	PA	Health Plan UM	
L5986	PA	Health Plan UM	
L5987	PA	Health Plan UM	
L5988	PA	Health Plan UM	
L5990	PA	Health Plan UM	
L5999	PA	Health Plan UM	
L6000	PA	Health Plan UM	
L6010	PA	Health Plan UM	
L6020	PA	Health Plan UM	
L6026	PA	Health Plan UM	
L6050	PA	Health Plan UM	
L6055	PA	Health Plan UM	
L6100	PA	Health Plan UM	
L6110	PA	Health Plan UM	
L6120	PA	Health Plan UM	
L6130	PA	Health Plan UM	
L6200	PA	Health Plan UM	
L6205	PA	Health Plan UM	
L6250	PA	Health Plan UM	
L6300	PA	Health Plan UM	
L6310	PA	Health Plan UM	
L6320	PA	Health Plan UM	
L6350	PA	Health Plan UM	
L6360	PA	Health Plan UM	
L6370	PA	Health Plan UM	
L6400	PA	Health Plan UM	
L6450	PA	Health Plan UM	
L6500	PA	Health Plan UM	
L6550	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L6570	PA	Health Plan UM	
L6580	PA	Health Plan UM	
L6582	PA	Health Plan UM	
L6584	PA	Health Plan UM	
L6586	PA	Health Plan UM	
L6588	PA	Health Plan UM	
L6590	PA	Health Plan UM	
L6621	PA	Health Plan UM	
L6624	PA	Health Plan UM	
L6638	PA	Health Plan UM	
L6646	PA	Health Plan UM	
L6648	PA	Health Plan UM	
L6693	PA	Health Plan UM	
L6696	PA	Health Plan UM	
L6697	PA	Health Plan UM	
L6698	PA	Health Plan UM	
L6703	PA	Health Plan UM	
L6704	PA	Health Plan UM	
L6706	PA	Health Plan UM	
L6707	PA	Health Plan UM	
L6708	PA	Health Plan UM	
L6709	PA	Health Plan UM	
L6711	PA	Health Plan UM	
L6712	PA	Health Plan UM	
L6713	PA	Health Plan UM	
L6714	PA	Health Plan UM	
L6715	PA	Health Plan UM	
L6721	PA	Health Plan UM	
L6722	PA	Health Plan UM	
L6805	PA	Health Plan UM	
L6810	PA	Health Plan UM	
L6880	PA	Health Plan UM	
L6881	PA	Health Plan UM	
L6882	PA	Health Plan UM	
L6883	PA	Health Plan UM	
L6884	PA	Health Plan UM	
L6885	PA	Health Plan UM	
L6890	PA	Health Plan UM	
L6900	PA	Health Plan UM	
L6905	PA	Health Plan UM	
L6910	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L6915	PA	Health Plan UM	
L6920	PA	Health Plan UM	
L6925	PA	Health Plan UM	
L6930	PA	Health Plan UM	
L6935	PA	Health Plan UM	
L6940	PA	Health Plan UM	
L6945	PA	Health Plan UM	
L6950	PA	Health Plan UM	
L6955	PA	Health Plan UM	
L6960	PA	Health Plan UM	
L6965	PA	Health Plan UM	
L6970	PA	Health Plan UM	
L6975	PA	Health Plan UM	
L7007	PA	Health Plan UM	
L7008	PA	Health Plan UM	
L7009	PA	Health Plan UM	
L7040	PA	Health Plan UM	
L7045	PA	Health Plan UM	
L7170	PA	Health Plan UM	
L7180	PA	Health Plan UM	
L7181	PA	Health Plan UM	
L7185	PA	Health Plan UM	
L7186	PA	Health Plan UM	
L7190	PA	Health Plan UM	
L7191	PA	Health Plan UM	
L7259	PA	Health Plan UM	
L7400	PA	Health Plan UM	
L7401	PA	Health Plan UM	
L7402	PA	Health Plan UM	
L7403	PA	Health Plan UM	
L7404	PA	Health Plan UM	
L7405	PA	Health Plan UM	
L7499	PA	Health Plan UM	
L8040	PA	Health Plan UM	
L8041	PA	Health Plan UM	
L8042	PA	Health Plan UM	
L8043	PA	Health Plan UM	
L8044	PA	Health Plan UM	
L8045	PA	Health Plan UM	
L8046	PA	Health Plan UM	
L8047	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
L8048	PA	Health Plan UM	
L8499	PA	Health Plan UM	
L8600	PA	Health Plan UM	
L8608	PA	Health Plan UM	
L8609	PA	Health Plan UM	
L8614	PA	Health Plan UM	
L8679	PA	Health Plan UM	
L8680	PA	Health Plan UM	
L8682	PA	Health Plan UM	
L8683	PA	Health Plan UM	
L8685	PA	Health Plan UM	
L8686	PA	Health Plan UM	
L8687	PA	Health Plan UM	
L8688	PA	Health Plan UM	
L8699	PA	Health Plan UM	
L8699	PA	Health Plan UM	
P9020	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 All other DX are considered experimental / investigational
P9020	PA	Health Plan UM	PA is not required if billed with one of the following diagnosis: Osteoarthritis of the knee: M17.0-M17.9 All other DX are considered experimental / investigational
Q2017	PA	Eviti	
Q2041	PA	Eviti	
Q2042	PA	Eviti	
Q2043	PA	Eviti	
Q2050	PA	Eviti	
Q2053	PA	Eviti	
Q2054	PA	Eviti	
Q2055	PA	Eviti	
Q2056	PA	Eviti	
Q2057	PA	Eviti	
Q2058	PA	Eviti	
Q4100	PA	Health Plan UM	
Q4100	PA	Health Plan UM	
Q4101	PA	Health Plan UM	
Q4102	PA	Health Plan UM	
Q4103	PA	Health Plan UM	
Q4104	PA	Health Plan UM	
Q4105	PA	Health Plan UM	
Q4106	PA	Health Plan UM	
Q4107	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
Q4108	PA	Health Plan UM	
Q4110	PA	Health Plan UM	
Q4111	PA	Health Plan UM	
Q4112	PA	Health Plan UM	
Q4113	PA	Health Plan UM	
Q4114	PA	Health Plan UM	
Q4115	PA	Health Plan UM	
Q4116	PA	Health Plan UM	
Q4117	PA	Health Plan UM	
Q4118	PA	Health Plan UM	
Q4121	PA	Health Plan UM	
Q4122	PA	Health Plan UM	
Q4123	PA	Health Plan UM	
Q4124	PA	Health Plan UM	
Q4125	PA	Health Plan UM	
Q4126	PA	Health Plan UM	
Q4127	PA	Health Plan UM	
Q4128	PA	Health Plan UM	
Q4130	PA	Health Plan UM	
Q4132	PA	Health Plan UM	
Q4133	PA	Health Plan UM	
Q4134	PA	Health Plan UM	
Q4135	PA	Health Plan UM	
Q4136	PA	Health Plan UM	
Q4137	PA	Health Plan UM	
Q4138	PA	Health Plan UM	
Q4139	PA	Health Plan UM	
Q4140	PA	Health Plan UM	
Q4141	PA	Health Plan UM	
Q4142	PA	Health Plan UM	
Q4143	PA	Health Plan UM	
Q4145	PA	Health Plan UM	
Q4146	PA	Health Plan UM	
Q4147	PA	Health Plan UM	
Q4148	PA	Health Plan UM	
Q4149	PA	Health Plan UM	
Q4150	PA	Health Plan UM	
Q4151	PA	Health Plan UM	
Q4152	PA	Health Plan UM	
Q4153	PA	Health Plan UM	
Q4154	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
Q4155	PA	Health Plan UM	
Q4156	PA	Health Plan UM	
Q4157	PA	Health Plan UM	
Q4158	PA	Health Plan UM	
Q4159	PA	Health Plan UM	
Q4160	PA	Health Plan UM	
Q4161	PA	Health Plan UM	
Q4162	PA	Health Plan UM	
Q4163	PA	Health Plan UM	
Q4164	PA	Health Plan UM	
Q4165	PA	Health Plan UM	
Q4166	PA	Health Plan UM	
Q4167	PA	Health Plan UM	
Q4168	PA	Health Plan UM	
Q4169	PA	Health Plan UM	
Q4170	PA	Health Plan UM	
Q4171	PA	Health Plan UM	
Q4173	PA	Health Plan UM	
Q4174	PA	Health Plan UM	
Q4175	PA	Health Plan UM	
Q4176	PA	Health Plan UM	
Q4177	PA	Health Plan UM	
Q4178	PA	Health Plan UM	
Q4179	PA	Health Plan UM	
Q4180	PA	Health Plan UM	
Q4181	PA	Health Plan UM	
Q4182	PA	Health Plan UM	
Q4183	PA	Health Plan UM	
Q4184	PA	Health Plan UM	
Q4185	PA	Health Plan UM	
Q4186	PA	Health Plan UM	
Q4187	PA	Health Plan UM	
Q4188	PA	Health Plan UM	
Q4189	PA	Health Plan UM	
Q4190	PA	Health Plan UM	
Q4191	PA	Health Plan UM	
Q4192	PA	Health Plan UM	
Q4193	PA	Health Plan UM	
Q4194	PA	Health Plan UM	
Q4195	PA	Health Plan UM	
Q4196	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
Q4197	PA	Health Plan UM	
Q4198	PA	Health Plan UM	
Q4199	PA	Health Plan UM	
Q4200	PA	Health Plan UM	
Q4201	PA	Health Plan UM	
Q4202	PA	Health Plan UM	
Q4203	PA	Health Plan UM	
Q4204	PA	Health Plan UM	
Q4205	PA	Health Plan UM	
Q4206	PA	Health Plan UM	
Q4208	PA	Health Plan UM	
Q4209	PA	Health Plan UM	
Q4210	PA	Health Plan UM	
Q4211	PA	Health Plan UM	
Q4212	PA	Health Plan UM	
Q4213	PA	Health Plan UM	
Q4214	PA	Health Plan UM	
Q4215	PA	Health Plan UM	
Q4216	PA	Health Plan UM	
Q4217	PA	Health Plan UM	
Q4218	PA	Health Plan UM	
Q4219	PA	Health Plan UM	
Q4220	PA	Health Plan UM	
Q4221	PA	Health Plan UM	
Q4222	PA	Health Plan UM	
Q4224	PA	Health Plan UM	
Q4225	PA	Health Plan UM	
Q4226	PA	Health Plan UM	
Q4227	PA	Health Plan UM	
Q4229	PA	Health Plan UM	
Q4230	PA	Health Plan UM	
Q4232	PA	Health Plan UM	
Q4233	PA	Health Plan UM	
Q4234	PA	Health Plan UM	
Q4235	PA	Health Plan UM	
Q4237	PA	Health Plan UM	
Q4238	PA	Health Plan UM	
Q4239	PA	Health Plan UM	
Q4240	PA	Health Plan UM	
Q4241	PA	Health Plan UM	
Q4242	PA	Health Plan UM	

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
Q4244	PA	Health Plan UM	
Q4245	PA	Health Plan UM	
Q4246	PA	Health Plan UM	
Q4247	PA	Health Plan UM	
Q4248	PA	Health Plan UM	
Q4249	PA	Health Plan UM	
Q4250	PA	Health Plan UM	
Q4251	PA	Health Plan UM	
Q4252	PA	Health Plan UM	
Q4253	PA	Health Plan UM	
Q4254	PA	Health Plan UM	
Q4255	PA	Health Plan UM	
Q4256	PA	Health Plan UM	
Q4257	PA	Health Plan UM	
Q4258	PA	Health Plan UM	
Q4259	PA	Health Plan UM	
Q4260	PA	Health Plan UM	
Q4261	PA	Health Plan UM	
Q5107	PA	Eviti	
Q5112	PA	Eviti	
Q5113	PA	Eviti	
Q5114	PA	Eviti	
Q5115	PA	Eviti	
Q5116	PA	Eviti	
Q5117	PA	Eviti	
Q5118	PA	Eviti	
Q5119	PA	Eviti	
Q5123	PA	Eviti	
Q5126	PA	Eviti	
Q5129	PA	Eviti	
Q5146	PA	Eviti	
Q5160	PA	Eviti	
S0088	PA	Eviti	
S0172	PA	Eviti	
S0175	PA	Eviti	
S0178	PA	Eviti	
S0182	PA	Eviti	
S0189	Non-covered		
S0201	Non-covered		
S0800	Non-covered		
S0810	Non-covered		

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
S1091	Non-covered		
S2053	Non-covered		
S2054	Non-covered		
S2055	Non-covered		
S2060	Non-covered		
S2061	Non-covered		
S2065	Non-covered		
S2066	Non-covered		
S2067	Non-covered		
S2068	Non-covered		
S2080	Non-covered		
S2102	Non-covered		
S2112	Non-covered		
S2117	Non-covered		
S2118	Non-covered		
S2140	Non-covered		
S2142	Non-covered		
S2142	Non-covered		
S2150	Non-covered		
S2150	Non-covered		
S2300	Non-covered		
S2340	Non-covered		
S2341	Non-covered		
S2348	Non-covered		
S2350	Non-covered		
S2351	Non-covered		
S3650	Non-covered		
S3650	Non-covered		
S3652	Non-covered		
S3652	Non-covered		
S3800	Non-covered		
S3800	Non-covered		
S3840	Non-covered		
S3840	Non-covered		
S3841	Non-covered		
S3841	Non-covered		
S3842	Non-covered		
S3842	Non-covered		
S3844	Non-covered		
S3845	Non-covered		
S3846	Non-covered		

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
S3849	Non-covered		
S3850	Non-covered		
S3852	Non-covered		
S3852	Non-covered		
S3853	Non-covered		
S3853	Non-covered		
S3854	Non-covered		
S3861	Non-covered		
S3861	Non-covered		
S3865	Non-covered		
S3865	Non-covered		
S3866	Non-covered		
S3870	Non-covered		
S3870	Non-covered		
S4011	Non-covered		
S4013	Non-covered		
S4014	Non-covered		
S4015	Non-covered		
S4016	Non-covered		
S4017	Non-covered		
S4018	Non-covered		
S4020	Non-covered		
S4021	Non-covered		
S4022	Non-covered		
S4027	Non-covered		
S4028	Non-covered		
S4030	Non-covered		
S4031	Non-covered		
S4035	Non-covered		
S4037	Non-covered		
S4040	Non-covered		
S4042	Non-covered		
S8080	Non-covered		
S8092	Non-covered		
S8930	Non-covered		
S8930	Non-covered		
S8940	Non-covered		
S8940	Non-covered		
S8948	Non-covered		
S9055	Non-covered		
S9055	Non-covered		

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Code	Prior Authorization Requirement	Where to Submit Prior Authorization	Additional Information
S9056	Non-covered		
S9090	Non-covered		
S9122	Non-covered		
S9123	Non-covered		
S9124	Non-covered		
S9127	Non-covered		
S9128	Non-covered		
S9129	Non-covered		
S9131	Non-covered		
S9433	Non-covered		
S9449	Non-covered		
S9454	Non-covered		
S9480	Non-covered		
S9484	Non-covered		
S9485	Non-covered		
S9960	Non-covered		
S9961	Non-covered		
S9975	Non-covered		
S9988	Non-covered		
S9990	Non-covered		
S9991	Non-covered		
T5999	PA	Health Plan UM	