

Commitment to Communication

From your Provider Relations team.



2 Executive Park Drive • Bedford, NH 03110

Prior Authorization Update: Effective April 1, 2022

Effective for dates of service including and after **April 1, 2022**, NH Healthy Families and Ambetter from NH Healthy Families will require prior authorization from all providers for the services listed below.

HCPCS Code	Description
37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty
37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed
37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed
37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed

1-866-769-3085 (NH Healthy Families)

1-844-265-1278 (Ambetter)

TDD/TTY: 1-855-742-0123

NHhealthyfamilies.com
ambetter.nhhealthyfamilies.com

Prior authorization can be requested through the Secure Portal or by completing the forms on **nhhealthyfamilies.com** & **ambetter.nhhealthyfamilies.com** and faxing to the health plan. You can also use the Pre-Auth Needed Tool located on the NH Healthy Families and Ambetter website under Provider Resources to check authorization requirements.

We understand the importance of easy access to care, and we are committed to ensuring our prior authorization requirements continue to be appropriate and efficient.

Please contact Provider Services with any questions at 1-866-769-3085.

Thank You,

NH Healthy Families
Ambetter from NH Healthy Families