

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, NH Healthy Families 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
DME Services	No PA Required	Mobility Services	E0630
		Orthotic and Prosthetic	L1932, L5000, L5631, L5704, L5920, L5950
Genetic Analysis	PA Required	Genetic Testing	81519
	No PA Required	Genetic Testing	81219, 81243, 81279, 81338, 81339, 88280, 88291
Genitourinary Procedures	PA Required	Surgery - Male Genitalia	55899
Hearing Services	No PA Required	Hearing Aids	V5140, V5160
Home Services	No PA Required	Nursing Services	T1001
Physician Services	PA Required	Diagnostic Testing	91299
Sleep Medicine	No PA Required	Sleep Studies	95805
Surgery Procedures	PA Required	Tonsil and Adenoid Procedures	42821, 42826, 42831
	No PA Required	Eye and Ocular Adnexa	67904