

Date: 9/3/20

Medi-Cal

Important Provider Notice: #404

Subject: New Treatment Authorization Requirements (TAR) on Hysterectomy Codes - Effective 11/1/20

For dates of service on and after November 1, 2020, Partnership HealthPlan of California (PHC) will start requiring a Treatment Authorization Request (TAR) on the following procedure codes:

- 51597 – Removal of Pelvic Structures (1/Lifetime)
- 51925 – Hysterectomy/Bladder Repair (1/Lifetime)
- 58541 – LSH, Uterus, 250g or less
- 58542 – LSH, W/T/O Uterus, 250g or less
- 58543 – LSH Uterus above 250g
- 58544 – LSH, W/T/O Uterus above 250g
- 58571 – TLH w/Tube/Ovaries, 250g or less
- 58572 – TLH, Uterus above 250g
- 58573 – TLH w/Tube/Ovaries above 250g
- 58951 – Resect Ovarian Malignancy (1/Lifetime)
- 58953 – Bilateral Salpingo-Oophorectomy w/Omentectomy, Total Abd Hysterectomy
- 58954 - Bilateral Salpingo-Oophorectomy w/Omentectomy, w/Pelvic Lymphadenectomy
- 58956 – BSO, Omentectomy w/TAH

The following procedure code will NOT require a TAR if done on an emergent basis. If the service was not an emergency, the service will require a TAR:

- 59525 – Removal of Uterus after C-Section

Additional information regarding this authorization requirement, please contact the PHC Health Services Department at (707) 863-4100.