

Online Referral/Authorization Submissions Request Type Guide



What is a request type?

Request types are templates created for use with Health Net Federal Services, LLC's (HNFS) online referral and authorization submission tools, available at www.tricare-west.com > *Provider*. Each request type has been developed by HNFS in accordance with the TRICARE manuals.

When a request type is selected, the associated codes/code ranges, number of visits, and duration of the authorization will pre-populate on the request.

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Outpatient Specialty Referral Request Types

Description	Included CPT® Code(s)	Request Type	Approval Duration
Evaluate and Treat Specialty Referral	99202–99205, 99211–99215, 99242–99245	P1	180 days for ADSMs 365 days for non-ADSMs
Evaluate Only Specialty Referral	99202–99205, 99211–99215, 99242–99245	P3	180 days
Oncology – Evaluate and Treat Spec Ref	99202–99205, 99211–99215, 99242–99245	P6	365 days
Pre/Post Transplant	99211–99215, 99242–99245	P58	360 days for codes 99211–99215 90 days for codes 99242–99245
Routine Eye Examination	92002–92015	P63	90 days
Second Opinion	99202–99205, 99211–99215, 99242–99245	P5	90 days
Specialty Referral Extension	99211–99215	P4	180 days, dependent on initial episode of care date

ADSMs = active duty service members

Request types, descriptions and corresponding codes are subject to change.

Outpatient Authorization Request Types

Physical Health

The Approval Duration column shows HNFS' standard authorization time frames. However, if the PCM's specialty referral is still valid (see p.2 for referral durations), servicing providers should request a date extension using the online **Authorization Change Request Form** rather than asking the PCM for a new referral. (Exception: For physical, speech and occupational therapy, and applied behavior analysis [ABA] and Extended Care Health Option [ECHO] services, please submit a new authorization request to HNFS.)

Description	Included CPT®, NDC, HCPCS Codes	Request Type	Approval Duration
ACD ABA Initial Assessment Authorization	97151	P174	45 days
ACD Outcome Measure Authorization	97151, 97151, 97151	P175	365 days
ACD ABA Treatment Authorization	97151, 97153, 97155, 97156, 97157, 97158, 99366, 99368	P177	180 days
ACD ABA Discharge Report Submission	99199	P178	1 day
Acupuncture	97810	P163	90 days
Adjunctive Dental*	*generic request type (enter codes manually)	P127	180 days
Air Ambulance Services	A0430–A0431	P116	14 days
Allergy Services	95004, 95017–95117	P9	180 days
Ambulance Services	A0999	P10	14 days
Audiology	92550, 92552–92557, 92563–92584, 92588	P11	90 days
Breastfeeding Counseling	99401–99404, 99411–99412	P159	365 days
Cardiac Rehabilitation	93797–93798	P12	180 days
Cardiovascular Testing	78472–78473, 78481–78483, 93000–93010, 93015–93018, 93224–93229, 93303–93308, 93320–93325, 93350–93352, 99202–99205, 99211–99215, 99242–99245	P121	365 days
Chiropractic Care	98940–98943	P14	90 days
Colonoscopy	45300–45392, 44388–44388, 99202–99205, 99211–99215, 99242–99245	P43	365 days
Custodial Care Home	99600	P165	30 days
Dental Anesthesia	41899, 00170	P101	180 days
Dental/Adjunctive Dental Svc Data Entry	D9310, 992202–992205, 99242–99245	P22	180 days
Diabetic Education	G0108–G0109	P23	180 days
Diabetic Eye Exam	92082, 92250, 99203–99204	P114	90 days
Dialysis	90935	P60	90 days
Doula/Childbirth Support Services	59899, 99509	P180	270 days
Emergency Room Visit	99281–99285	P44	5 days after and 15 days prior to the date of service
Global OB	59400–59622	P76	11 months
Global OB ICD-10	59400–59622	P126	11 months
Hippotherapy	S8940	P124	180 days
Home Health Infusion Therapy*	99601–99602 *generic request type (can also enter codes manually)	P28	90 days for codes 99601–99602 180 days for all others
Home Health Basic Benefit Under PPS	0023	P26	60 days
Hospice	0651–0657, 0551, 0561, 0571	P46A	90 days
Hourly Skilled Nursing	99347	P48	90 days
Injection, Epidural (Cervical or Thoracic)	62320–62321, 77003	P30	90 days
Injection, Epidural (Lumbar or Sacral)	62322–62323, 77003	P31	90 days
Injection, Facet Joint (Cervical or Thoracic)	64490–64492	P32	90 days
Injection, Facet Joint (Lumbar or Sacral)	64493–64495	P33	90 days
Injection, HPV	90649	P29	180 days
Integrated Disability Evaluation	99456	P111	180 days

Mammogram/Breast Biopsy	10021–10021, 19000–19001, 19081–19086, 19100–19101, 76641–76642, 76942–76942, 77002–77002, 77011–77012, 77021–77021, 77065–77066, 99202–99205, 99211–99215 99242–99245	P181	365 days
Maternity Ultrasounds	76801–76817	P34	90 days
MRI Brain	70544–70544, 70551–70554	P182	365 days
MRI Chest	71550–71555	P183	365 days
MRI Lower Extremity	27093–27096, 27648–27648, 73525–73525 73580–73580, 73615–73615, 73718–73723 77002–77002, 77012–77012	P184	365 days
MRI Orbit Face	70540–70543	P186	365 days
MRI Pelvis	72195–72197	P187	365 days
MRI Spine	72141–72148, 72156–72158, 72195–72195	P188	365 days
MRI Upper Extremity	23350–23350, 24220–24220, 25246–25246 73040–73040, 73085–73085, 73115–73115 73218–73223, 77002–77002, 77012–77012	P185	365 days
Non-USFDA LDTs Demo*	*generic request type (enter codes manually)	P162	60 days
Nutritional Counseling	97802–97804, G0270–G0271	P24	90 days
Observation Stay	G0378–G0379	P35	10 days
Occupational Therapy – Acute Injuries	97165, 97167–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P36A	120 days
Occupational Therapy – Post Op Care	97165, 97167–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P36B	150 days
Occupational Therapy – Long Term Conditions	97165, 97167–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 7535	P36C	180 days
Opioid Replacement Therapy (ORT)	0912–0913	P152	180 days
Osteopathic Manipulation	98925–98929	P37	90 days
Outpatient Infusion Therapy or Medication Administration*	*generic request type (enter codes manually)	P115	90 days
Outpatient PH Medical Procedure*	*generic request type (enter codes manually)	P106	180 days
Outpatient PH Surgical Procedure*	*generic request type (enter codes manually)	P105	180 days
Physical and Occupational Therapy – Acute Injuries	97165–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P125A	120 days
Physical and Occupational Therapy – Post-Op Care	97165–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P125B	150 days
Physical and Occupational Therapy – Long-Term Conditions	97165–97168, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P125C	180 days
Physical Therapy – Acute Injuries	97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P38A	120 days
Physical Therapy – Post-Op Care	97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P38B	150 days
Physical Therapy – Long-Term Conditions	97161–97164, 97010, 97016–97024, 97028, 97033–97036, 97110–97124, 97140–97150, 95851–95852, 97530, 97535	P38C	180 days
Pulmonary Rehabilitation	G0237–G0238	P13	90 days
Pulmonary Rehabilitation Pre/Post Transplant	97161–97163, 97110	P59	30 days for codes 97161–97163 90 days for code 97110

Respite Care for Extended Care Health Option	99600	P47	365 days
Sleep Study	95810–95811	P40	90 days
Sleep Study (Under 6 Years Old)	95782–95783	P123	90 days
Smoking Cessation	96156, 96158–96159, 96164–96165	P62	120 days
Speech Therapy – Acute Injuries	92521–92524, 92507	P39A	120 days
Speech Therapy – Post-Op Care	92521–92524, 92507	P39B	150 days
Speech Therapy – Long-Term Conditions	92521–92524, 92507, 92610	P39C	180 days
Synagis	90378	P67	150 days
Terminal Leave Blanket Authorization	99202–99215, 90791–90792, 99202–99205	P128	This request type is to be used by military hospitals or clinics only
Trigger Point Injections	20552–20553	P41	90 days
Ultrasound Abdominal	76700 –76705, 76770–76775	P189	365 days
Ultrasound Extremity	76881–76882	P190	365 days
Ultrasound Female Pelvic	76830 –76830, 76856–76857	P191	365 days
Ultrasound Infant Hips	76885–76886	P192	365 days
Urgent Care	99202–99205	P45	5 days after and 15 days prior to the date of service
Vestibular Testing	92537–92537, 92540–92544, 92546–92547 99213–99213	P193	365 days
Videofluoroscopic Swallowing Study	74230–74230, 92610–92610	P194	365 days

*= generic request type

Outpatient Authorization Request Types (continued)

Behavioral Health

The Approval Duration column shows HNFs' standard authorization time frames. However, if the PCM's specialty referral is still valid (see p. 2 for referral durations), servicing providers should request a date extension using the online **Authorization Change Request Form** rather than asking the PCM for a new referral.

Description	Included CPT®, NDC, HCPCS Codes	Request Type	Approval Duration
Outpatient Therapy (BH)	90791–90792, 90832–90840, 90846–90853, 99211–99215, 90785, 99202–99205	P50	90 days for codes 90791–90792, 99202–99205 180 days for codes 90832–90840, 90846–90853, 99211–99215, 90785
Electroconvulsive Therapy (BH)	90791–90792, 90870	P64	90 days for codes 90791–90792 180 days for code 90870
IOP Psych (BH)	S9480	P156	90 days
IOP Substance Abuse (BH)	H0015	P157	90 days
Medication Assistant Treatment (BH)*	*generic request type (enter codes manually)	P167	180 days
Medication Management (BH)	99202–99215	P51	180 days
Observation Stay (BH)	G0379	P75	10 days
PHP Psych Full Day (BH)	0913	P71	90 days
PHP Psych Half Day (BH)	0912	P73	90 days
PHP Substance Abuse Full Day (BH)	0913	P72	90 days
PHP Substance Abuse Half Day (BH)	0912	P74	90 days
Psychological/Neuropsychological Testing (BH)	90791–90792, 96130–96146	P171	90 days for codes 90791–90792 180 days for codes 96130–96146
Sparvato® Esketamine (BH)	G2082–G2083	P173	90 days
Transcranial Magnetic Stimulation (BH)	90791–90792, 90867–90869	P166	90 days for codes 90791–90792 365 days for codes 90867–90869

BH = behavioral health, *= generic request type

Durable Medical Equipment Request Types

The Approval Duration column shows HNFS' standard authorization time frames. However, if the PCM referral is still valid (see p. 2 for referral durations), servicing providers may request a date extension using the online **Authorization Change Request Form** rather than going back to the PCM for a new referral.

Description	Included CPT®, NDC, HCPCS Codes	Request Type	Approval Duration
ASV (Adaptive Servo-Ventilation Machine) Purchase and Supplies	E0471, E0562, A7027–A7039, A7046, A4604	P168P	455 days
ASV Rental and Supplies	E0471, E0562, A7027–A7039, A7046, A4604	P168R	455 days
BiPap Purchase and Supplies	E0561–E0562, E0470–E0472, A7030–A7039, A7044–A7046, A4604–A4604	P17P	455 days
BiPap Rental and Supplies	E0561–E0562, E0470 –E0472, A7030–A7039, A7044–A7046, A4604–A4604	P17R	455 days
BiPAP Supplies Only	A4604–A4604, A7027–A7039, A7044–A0746, E0470–E0472, E0561–E0562	P17S	455 days
Breast Pump and Supplies – Heavy Duty Hospital Grade	E0604, A4281–A4286, A9999, A9900	P160	90 days for codes E0604 455 days for codes A4281-A4286, A9999, A9900
Breastfeeding Pump and Supplies	E0602–E0603, A4281–A4286, A9999, A9900	P158	455 days
Commode (3 in 1)	E0163	P57	455 days
CPAP Standard Purchase and Supplies	E0601–E0601, E0561–E0562, A7027–A7039, A7044–A7046, A4604–A4604	P16P	455 days
CPAP Standard Rental and Supplies	E0601–E0601, E0561–E0562, A7027–A7039, A7044–A7046, A4604–A4604	P16R	455 days
CPAP Portable Purchase and Supplies	E0601, E0562, E1399, A7027–A7039, A7046, A4604	P172P	455 days
CPAP Portable Rental and Supplies	E0601, E0562, E1399, A7027–A7039, A7046, A4604	P172R	455 days
CPAP Supplies Only	A7027–A7039, A7044–A7046, A4604–A4604, E0561–E0562	P155	455 days
CPM Machine – Knee	E0935	P54	21 days
CPM Machine – Other	E0936	P65	21 days
DME Purchase and Med Supplies Generic (Outpatient)*	*generic request type (enter codes manually)	P108	455 days
DME Rental and Med Supplies Generic (Outpatient)*	*generic request type (enter codes manually)	P107	455 days
Insulin Pump Purchase and Pump Supplies	E0784, A4222, A4231-A4232	P15P	455 days
Insulin Pump Rental and Pump Supplies	E0784, A4222, A4231-A4232	P15R	455 days
LVAD	L9900	P61	455 days
Nebulizer	A7003–A7003, A7005–A7005, A7013–A7013 A7015–A7015, E0570–E0570	P195	455 days
Personal Incontinence Supplies	A4520, T4521–T4536, T4539, T4543	P161	365 days
Prosthetics and Orthotics Generic (Outpatient)*	*generic request type (enter codes manually)	P109	180 days
Rolling Walker	E0143	P56	455 days
Synthetic Sheepskin Pad	E0188	P55	455 days
TENS Unit – Purchase	E0720–E0730, A4595, E0731	P113	455 days
TENS Unit – Rental	E0720–E0730, A4595, E0731	P112	455 days
Wheelchair Rental – Basic	K0001, E0990	P18	455 days
Wound Vacuum	E2402, A6550, A7000, A4221, A4222	P21	180 days

*= generic request type

Inpatient Authorization Request Types

For use with CareAffiliate® only. The Web Authorization/Referral Form (WARF) does not support inpatient requests.

Description	Included CPT®, NDC, HCPCS Codes	Request Type	Approval Duration
Bariatric Surgery Laparoscopic Roux-en-Y (Inpatient PH)	43644	P97	30 days
Bariatric Surgery Laproscopic Banding (Inpatient PH)	43770–43774	P98	30 days
Bariatric Surgery Open Roux-en-Y (Inpatient PH)	43846	P100	30 days
Bariatric Surgery Vertical Banding (Inpatient PH)	43842	P99	30 days
BH Admit (Inpatient)	99221	P81	5 days
Chemical Dependency (BH CD) – Detoxification	99221	P83	7 days
Chemical Dependency (BH CD) – Rehabilitation	99221	P84	5 days
C-Section Delivery (Inpatient)	59514	P80	180 days
Custodial Care (Inpatient)	99324	P164	30 days
Double Lung Transplant (Inpatient PH)	32852–32584	P89	365 days
Heart Lung Transplant (Inpatient PH)	33935	P90	365 days
Heart Transplant (Inpatient PH)	33945	P94	365 days
Intestinal Transplant (Inpatient PH)	44135–44136	P93	365 days
Islet Cell Transplant (Inpatient PH)	48160	P92	365 days
Kidney Transplant (Inpatient PH)	50360, 50365, 50380	P86	355 for code 50360 365 for code 50365, 50380
Liver Transplant (Inpatient PH)	47135–47136	P87	365 days
Long Term Acute Care (Inpatient PH)	99221	P104	30 days
Medical Admit (Inpatient PH)	99221	P77	5 days
Pancreas Transplant (Inpatient PH)	48554	P91	365 days
Rehabilitation – Acute (Inpatient PH)	99221	P103	30 days
Residential Treatment Center (BH Inpatient)	99221	P82	5 days
Single Lung Transplant (Inpatient PH)	32851	P88	365 days
Skilled Care (Inpatient PH)	0022	P102	30 days
Stem Cell Transplant Allogeneic (Inpatient PH)	38240	P95	365 days
Stem Cell Transplant Autologous (Inpatient PH)	38241	P96	365 days
Surgical Admit (Inpatient PH)*	*generic request type (enter codes manually)	P78	30 days
Vaginal Delivery (Inpatient)	59409	P79	180 days

BH = behavioral health, PH = physical health, *= generic request type