Network Notification

Notice Date: July 14, 2026
To: TRICARE Prime® Demo by CareSource Military & Veterans™ Providers
From: CareSource Military & Veterans
Subject: Prior Authorization Requirement Update
Effective Date: September 1, 2026

Summary

Notification of prior authorization updates, effective September 1, 2026:

New codes have been added and will require prior authorization. Code level information can be found in Addendum A of this notice.

Some services received from out-of-network providers may require prior authorization. Requests for inpatient services require prior authorizations. Approval or payment of services can be dependent upon, but not limited to, the following criteria:

- Beneficiary eligibility
- Beneficiary younger than 18 years old
- Medical necessity
- Covered benefits
- Modifiers
- Diagnosis and revenue codes
- Limits and number of visit variances
- Provider contracts
- Provider types
- Correct coding and billing practices

Importance
Providers can check prior authorization requirements at any time by searching CPT or HCPCS codes in the CareSource Procedure Lookup Tool.

Questions?
If you have questions, please contact your Provider Engagement Representative or Provider Services at 1-833-230-2170**,** Monday through Friday 8 a.m. to 6 p.m., Eastern Time (ET).

Addendum A: New Codes Requiring Prior Authorization

Category	Codes
Durable Medical Equipment	A4295, A4296, A4297, C1608, C9811, C9815, C9816, C9817, Q4398, Q4399, Q4400, Q4401, Q4402, Q4403, Q4404, Q4405, Q4406, Q4407, Q4408, Q4409, Q4410, Q4411, Q4412, Q4413, Q4414, Q4415, Q4416, Q4417, Q4420, Q4431, Q4432, Q4433, A2036, A2037, A2038, A2039, A4288, E0658, E0659, L1007, L5657, L6034, L6035, L6036, L6038, L6039, Q4383, Q4384, Q4385, Q4386, Q4387, Q4388, Q4389, Q4390, Q4391, Q4392, Q4393, Q4394, Q4395, Q4396, Q4397
Hearing Services	92631, 92632
Inpatient Facility Services	27458, 27713, 33882, 35602, 43889, 64654, 64655, 64656, 64657, 64658, 64659
Outpatient Diagnostics	0602U, 0603U, 0604U, 0605U, 0606U, 0607U, 0608U, 0609U, 0611U, 0612U, 0613U, 0999T, 1000T, 1001T, 37263, 37264, 37265, 37266, 37267, 37268, 37269, 37270, 37271, 37272, 37273, 37274, 37275, 37276, 37277, 37278, 37280, 37281, 37282, 37283, 37284, 37285, 37286, 37287, 37288, 37289, 37290, 37291, 37292, 37293, 37294, 37295, 37296, 37297, 37298, 37299, 70471, 70472, 70473, 77436, 81524, 92930, 92945, 0576U, 0577U, 0578U, 0585U.
Outpatient Services (Facility/Professional)	0988T, 0990T, 0994T, 0995T, 1003T, 1013T, 1014T, 1015T, 1019T, 37254, 37255, 37256, 37257, 37258, 37259, 37260, 37261, 37262, 37279, 47384, 52443, 52597, 55868, 55869, 55877, 62330, 62331, 63032, 64567, 64728, 77437, 77438, 77439, 81354, C7566, C9810, G0571