



NETWORK *Notification*

Notice Date: October 15, 2026
To: WI MP Marketplace Providers
From: CareSource
Subject: Prior Authorization Requirement Update
Effective Date: December 1, 2026

Notification of prior authorization requirement updates, effective December 1, 2026:

Detailed code-level changes are listed in **Addendum A** (see the following page).

Prior authorization is required for all nonparticipating providers and for inpatient service requests. Authorization approval and/or payment may depend on factors including, but not limited to:

- Member eligibility
- Members younger than 21 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 for CPT or HCPCS codes in the CareSource Procedure Lookup Tool.

Questions?

For questions, contact your Provider Engagement Representative or Provider Services at 1-833-230-2101. We are open Monday through Friday, 7 a.m. to 5 p.m. Central Time (CT).

Addendum A: New Codes Requiring Prior Authorization

Category	Codes
Radiosurgery	77372, 77373
External Beam Radiation	77402, 77407, 77412
Brachytherapy	77424, 77425, 77750, 77761, 77762, 77763, 77767, 77768, 77770, 77771, 77772, 77778, 77789, 0395T
Proton Therapy	77520, 77522, 77523, 77525
Hyperthermia	77600, 77605, 77610, 77615, 77620
Radioactive Sources	C1717

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Plans issued by Common Ground Healthcare Cooperative