



## SKIN SUBSTITUTE PRIOR AUTHORIZATION UPDATES Effective November 1, 2021

9/30/21

Dear Care1st Providers and Staff:

Effective November 1, 2021, Care1st is updating the skin substitute prior authorization (PA) requirements to align with the AHCCCS preferred products. **Non-preferred products will require authorization for all providers.** Preferred products with their own specific code will not require an authorization for in-network providers.

Please reference the Prior Authorization Reference Grid on our website to confirm if a specific code(s) requires PA. The Prior authorization Reference Grid is located:

[www.care1st.com](http://www.care1st.com) > Care1st > Providers > Prior Authorization Guidelines & Criteria > Attachment 1- Detailed Outpatient Procedure Code Authorization Requirements

**Please review the table on the following pages for details on skin substitute products, procedure codes, and PA requirements.**

*If you have any questions, please contact the Care1st Pharmacy Department at 602.778.1800 or 1.866.560.4042 (Options 5, 5).*

Thank you for your partnership and assistance in assuring our members continue to receive quality medical care.

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Care1st Network Management

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Visit our website at [www.care1staz.com](http://www.care1staz.com)

*Looking for your assigned Provider Network Rep? On our website go to Providers > Provider Rep Contact Info*



Skin Substitute Product Name	HCPCS Code	Preferred Status	PA Required?	Skin Substitute Type	Manufacturer
ALLOPATCH PLIABLE THIN	Q4128	Preferred	No PA for PAR Providers	Cellular/dermal replacement from human placental membrane	MTF Biologics
AMNIOBAND MEMBRANE	Q4151	Preferred	No PA for PAR Providers	Allograft Placental Matrix - a fresh amniotic membrane aseptically processed and hypothermally preserved.	MTF Biologics
AMNIOBAND MEMBRANE PARTICULATE	Q4168	Preferred	No PA for PAR Providers	Allograft Placental Matrix - a fresh amniotic membrane aseptically processed and hypothermally preserved.	MTF Biologics
AMNIOEXCEL / AMNIOEXCEL PLUS	Q4137	Preferred	No PA for PAR Providers	Acellular Dermal- dehydrated human amnion-derived tissue allograft with intact extracellular matrix	Integra LifeScience
APPLIGRAF	Q4101	Preferred	No PA for PAR Providers	Cellular/epidermal and dermal replacement from combined human and animal sources	Organogenesis
CYTAL 1, 2, 3 & 6 LAYER	Q4166	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is comprised of porcine urinary bladder matrix with an intact epithelial basement membrane	Integra LifeScience
DERMGRAFT	Q4106	Preferred	No PA for PAR Providers	Cellular/dermal replacement from combined natural and synthetic materials	Organogenesis
KERECIS	Not Assigned J3590	Preferred	PA requ'd for all providers due to unassigned J-code	Acellular/Dermal replacement from animal tissue source - Fish dermal matrix composed of fish collagen	Kerecis
OMNIGRAFT	Q4105	Preferred	No PA for PAR Providers	Bilayer matrix epidermal layer and collagen/chondroitin-6-sulfate matrix promoting dermal regeneration	Integra LifeScience
PRIMATRIX	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience
PRIMATRIX AG	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience
PRIMATRIX AG FENESTRATED	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience

Skin Substitute Product Name	HCPCS Code	Preferred Status	PA Required?	Skin Substitute Type	Manufacturer
PRIMATRIX AG MESHED	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience
PRIMATRIX FENESTRATED	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience
PRIMATRIX MESHED	Q4110	Preferred	No PA for PAR Providers	Acellular/Dermal replacement from animal tissue source - is derived from fetal bovine dermis.	Integra LifeScience
PURAPLY XT	Q4195	Preferred	No PA for PAR Providers	Porcine intestinal collagen	Organogenesis
SOMAGEN MESHED THIN	Q4100	Preferred	No PA for PAR Providers	Allograft Dermal Matrix	MTF Biologics
THERASKIN	Q4121	Preferred	No PA for PAR Providers	Biologically active cryopreserved human skin allograft with both epidermis and dermis layers	Soluble Systems LLC
AFFINITY	Q4159	Non-Preferred	PA requ'd for all providers	Human Amniotic Allograft	Organogenesis
EPIFIX / EPIFEX MESH	Q4186	Non-Preferred	PA requ'd for all providers	Acellular Dermal -dehydrated amniotic products	MIMEDX GROUP, INC
GRAFIX PL PRIME / GRAFIX PRIME	Q4102	Non-Preferred	PA requ'd for all providers	Cellular/dermal replacement from human placental membrane	SMITH+NEPHEW
LENEVA	Not Assigned J3590	Non-Preferred	PA requ'd for all providers	Allograft Placental Matrix	MTF Biologics
Oasis® Wound Matrix Fenestrated	Q4133	Non-Preferred	PA requ'd for all providers	Porcine intestinal collagen - are naturally derived scaffolds of ECM, composed of porcine small intestinal submucosa	SMITH+NEPHEW
EZ DERM	Q4136	Non-Preferred - Pending AHCCCS review	PA requ'd for all providers	Porcine Dermis	Mölnlycke Health Care