

Medicare Prior Authorizations, 2026

This is a listing of services you will need prior authorizations for, you can refer to your Evidence of Coverage (EOC) for more.

Prior Authorization	Evidence of Coverage Benefit
Bariatric surgery	Outpatient hospital Outpatient surgery
Blepharoplasty	Outpatient hospital Outpatient surgery
Bone-anchored hearing aid	Outpatient hospital Outpatient surgery
Bronchial thermoplasty	Outpatient hospital Outpatient surgery
Cochlear implants	Outpatient hospital Outpatient surgery
Computed Tomography Angiography (CTA)	Outpatient diagnostic tests/therapeutic services
Computerized Tomography (CT) scan	Outpatient diagnostic tests/therapeutic services
Continuous glucose monitors (CGM)	Durable medical equipment (DME)
Cosmetic and reconstructive surgery	Outpatient hospital Outpatient surgery
Dental services (Medicare-covered)	Outpatient hospital Outpatient surgery Physician/practitioner services (specialist)
Durable medical equipment (DME) item(s) that cost more than \$1,000	Durable medical equipment (DME)
Durable medical equipment (DME) rentals	Durable medical equipment (DME)

Prior Authorization	Evidence of Coverage Benefit
Electroencephalogram (EEG)	Outpatient diagnostic tests/therapeutic services Outpatient hospital Outpatient surgery
Experimental, investigational or unproven care	Outpatient hospital Outpatient surgery
Fixed winged air transportation	Ambulance services
Gender affirming surgery	Outpatient hospital Outpatient surgery
Genetic testing	Outpatient diagnostic tests/therapeutic services
Home infusion therapy	Home infusion services
Implanted cardiac devices	Outpatient hospital Outpatient surgery Physician/practitioner services (specialist)
Infusion pumps (implantable)	Outpatient hospital Outpatient surgery
Injectable drugs	Medicare Part B prescription drugs
Inpatient hospital care (elective)	Inpatient hospital care
Inpatient mental health care admissions (elective)	Inpatient services in a psychiatric hospital
Insulin pumps	Durable medical equipment (DME)
Magnetic Resonance Angiography (MRA)	Outpatient diagnostic tests/therapeutic services
Magnetic Resonance Imaging (MRI)	Outpatient diagnostic tests/therapeutic services
Nuclear cardiology studies	Outpatient diagnostic tests/therapeutic services

Prior Authorization	Evidence of Coverage Benefit
Orthopedic procedures (such as but not limited to, joint arthroplasties, joint arthroscopies, laminectomies and related decompression procedures, shoulder repairs, vertebral fusions, artificial intervertebral disc and associated procedures)	Physician/practitioner services (specialist) Outpatient hospital Outpatient surgery
Parenteral/enteral nutritional therapy	Prosthetic devices and related supplies
Partial hospitalization	Partial hospitalization
Positron Emission Tomography (PET) scan	Outpatient diagnostic tests/therapeutic services
Prosthetics and orthotics item(s) that cost more than \$1,000	Prosthetic devices and related supplies
Radical Prostatectomy	Outpatient hospital Outpatient surgery
Radiofrequency catheter ablation for back pain	Outpatient hospital Outpatient surgery
Radiation oncology procedures (such as but not limited to, intensity-modulated radiation therapy (IMRT), neutron beam radiotherapy (NBRT), proton beam radiotherapy (PBRT), stereotactic radiosurgery (SRS), stereotactic body radiation therapy (SBRT)	Outpatient hospital Outpatient surgery
Skilled nursing facility admissions	Skilled nursing facility (SNF) care
Sleep studies (except in-home)	Outpatient diagnostic tests/therapeutic services
Stimulators	Durable medical equipment (DME)
Stimulators (implanted)	Outpatient hospital Outpatient surgery

Prior Authorization	Evidence of Coverage Benefit
Transcatheter heart procedures	Outpatient hospital Outpatient surgery
Transcranial magnetic stimulation	Outpatient hospital Physician/practitioner services (specialist)
Transplant evaluations (except corneal transplant evaluations)	Physician/practitioner services (specialist) Inpatient hospital care Outpatient hospital Outpatient surgery
Transplant surgery (except for corneal transplant surgery)	Inpatient hospital care Outpatient hospital Outpatient surgery