GI & Imaging Codes No Longer Requiring Prior Authorization for UnitedHealthcare Commercial and ACA Marketplace Plans

Full code lists are available from UHC | All changes effective Oct. 1, 2026

Note:

- For UHC's Commercial and ACA Marketplace insurance plans, the codes no longer requiring prior authorization *are not consistent or identical* between plans.
- For UHC's Commercial plans, if the prior authorization requirement was removed, then the HOPD site-of-service medical necessity review was also removed. These reviews may still apply for ACA plans.
- For UHC's Medicare Advantage plans, ACG *did not* identify any GI codes that no longer require prior authorization.

*If you see a checkmark below, that means the code **no longer requires** a prior authorization for that plan*

Procedure Code	Procedure Code Description	For Commercial: Was prior authorization requirement removed?	For ACA: Was prior authorization requirement removed?
0506U	GI BARRETTS ESOPHGL CELL DNA MTHYLTN ALYS NGS 89	✓	✓
43200	ESOPHAGOSCOPY FLEXIBLE TRANSORAL DIAGNOSTIC	✓	✓
43201	ESOPHAGOSCOPY FLEXIBLE TRANSORAL W SUBMUCOUS INJ	✓	
43202	ESOPHAGOSCOPY FLEXIBLE TRANSORAL WITH BIOPSY	✓	✓
43204	ESOPHAGOSCOPY FLEX TRANSORAL INJECTION VARICES	✓	
43205	ESPHGOSCOPY FLEX W/BAND LIGATION ESOPHGL VARICES	✓	
43211	ESOPHAGOSCOPY FLEXIBLE TRANSORAL MUCOSAL RESEXN	✓	
43212	ESOPHAGOSCOPY TRANSORAL STENT PLACEMENT	✓	
43213	ESOPHAGOSCOPY RETROGRADE DILATE BALLOON/OTHER	✓	
43214	ESOPHAGOSCOPY DILATE ESOPHAGUS BALLOON 30 MM	✓	
43215	ESOPHAGOSCOPY FLEXIBLE REMOVAL FOREIGN BODY	✓	

Procedure Code	Procedure Code Description	For Commercial: Was prior authorization requirement removed?	For ACA: Was prior authorization requirement removed?
43216	ESPHAGOSCOPY FLEX LESION REMOVAL HOT BX FORCEPS	✓	
43217	ESOPHAGOSCOPY FLEXIB LESION REMOVAL TUMOR SNARE	✓	
43220	ESOPHAGOSCOPY FLEX BALLOON DILAT <30 MM DIAM	✓	✓
43226	ESOPHAGOSCOPY FLEXIBLE GUIDE WIRE DILATION	✓	✓
43227	ESOPHAGOSCOPY FLEXIBLE W/BLEEDING CONTROL	✓	
43229	ESOPHAGOSCOPY FLEX TRANSORAL LESION ABLATION	✓	✓
43233	EGD ESOPHAGUS BALLOON DILATION 30 MM OR LARGER	✓	
43235	ESOPHAGOGASTRODUODENOSCOPY TRANSORAL DIAGNOSTIC	✓	✓
43236	ESOPHAGOGASTRODUODENOSCOPY SUBMUCOSAL INJECTION	✓	
43239	EGD TRANSORAL BIOPSY SINGLE/MULTIPLE	✓	✓
43241	EGD INTRALUMINAL TUBE/CATHETER INSERTION	✓	
43243	EGD INJECTION SCLEROSIS ESOPHGL/GASTRIC VARICES	✓	
43244	EGD BAND LIGATION ESOPHGEAL/GASTRIC VARICES	✓	
43245	EGD DILATION GASTRIC/DUODENAL STRICTURE	✓	
43246	EGD PERCUTANEOUS PLACEMENT GASTROSTOMY TUBE	✓	
43247	EGD FLEXIBLE FOREIGN BODY REMOVAL	✓	✓
43248	EGD INSERT GUIDE WIRE DILATOR PASSAGE ESOPHAGUS	✓	✓
43249	EGD BALLOON DILATION ESOPHAGUS <30 MM DIAM	✓	✓
43250	EGD FLEX REMOVAL LESION(S) BY HOT BIOPSY FORCEPS	✓	✓

Procedure Code	Procedure Code Description	For Commercial: Was prior authorization requirement removed?	For ACA: Was prior authorization requirement removed?
43251	EGD REMOVAL TUMOR POLYP/OTHER LESION SNARE TECH	✓	✓
43254	EGD TRANSORAL ENDOSCOPIC MUCOSAL RESECTION	✓	✓
43255	EGD TRANSORAL CONTROL BLEEDING ANY METHOD	✓	✓
43266	EGD ENDOSCOPIC STENT PLACEMENT W/WIRE& DILATION	✓	
43270	EGD ABLATE TUMOR POLYP/LESION W/DILATION& WIRE	✓	✓
43882	REVISION/RMVL GASTRIC NSTIM ELTRD ANTRUM OPEN	✓	✓
44388	COLONOSCOPY STOMA DX INCLUDING COLLJ SPEC SPX	✓	✓
44389	COLONOSCOPY STOMA W/BIOPSY SINGLE/MULTIPLE	✓	✓
44390	COLONOSCOPY STOMA W/RMVL FOREIGN BODY	✓	
44391	COLONOSCOPY STOMA CONTROL BLEEDING	✓	
44392	COLONOSCOPY STOMA RMVL LES BY HOT BIOPSY FORCEPS	✓	✓
44394	COLONOSCOPY STOMA W/RMVL TUM POLYP/OTH LES SNARE	✓	✓
44799	UNLISTED PROCEDURE SMALL INTESTINE		✓
44401	COLONOSCOPY STOMA ABLATION LESION	✓	
44402	COLONOSCOPY STOMA W/ENDOSCOPIC STENT PLCMT	✓	
44403	COLONOSCOPY STOMA W/ENDOSCOPIC MUCOSAL RESCJ	✓	
44404	COLONOSCOPY STOMA W/SUBMUCOSAL INJECTION	✓	
44405	COLONOSCOPY STOMA W/BALLOON DILATION	✓	
45172	EXC RCT TUM INCL MUSCULARIS PROPRIA	✓	

Procedure Code	Procedure Code Description	For Commercial: Was prior authorization requirement removed?	For ACA: Was prior authorization requirement removed?
45378	COLONOSCOPY FLX DX W/COLLJ SPEC WHEN PFRMD	✓	✓
45379	COLONOSCOPY FLX W/REMOVAL OF FOREIGN BODY(S)	✓	✓
45380	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	✓	✓
45381	COLSC FLX WITH DIRECTED SUBMUCOSAL NJX ANY SBST	✓	✓
45382	COLSC FLEXIBLE W/CONTROL BLEEDING ANY METHOD	✓	
45384	COLSC FLX W/REMOVAL LESION BY HOT BX FORCEPS	✓	✓
45385	COLSC FLX W/RMVL OF TUMOR POLYP LESION SNARE TQ	✓	✓
45386	COLSC FLEXIBLE W/TRANSENDOSCOPIC BALLOON DILAT	✓	✓
45388	COLONOSCOPY FLX ABLATION TUMOR POLYP/OTHER LES	✓	
45389	COLONOSCOPY FLX WITH ENDOSCOPIC STENT PLACEMENT	✓	
45390	COLONOSCOPY FLX W/ENDOSCOPIC MUCOSAL RESECTION	✓	✓
45398	COLONOSCOPY FLEXIBLE WITH BAND LIGATION(S)	✓	✓
45399	UNLISTED PROCEDURE COLON		✓
74150	CT ABDOMEN W/O CONTRAST MATERIAL		✓
74160	CT ABDOMEN W/CONTRAST MATERIAL		✓
74170	CT ABDOMEN W/O CONTRAST FLWD BY CONTRAST MATRL		✓
74174	CTA ABD&PLVS W/CNTRST & IMG POSTPROCESSING		✓
74175	CTA ABDOMEN W/CONTRAST&IMG POSTPROCESSING		✓
74176	CT ABDOMEN & PELVIS W/O CONTRAST MATERIAL		✓

Procedure Code	Procedure Code Description	For Commercial: Was prior authorization requirement removed?	For ACA: Was prior authorization requirement removed?
74177	CT ABDOMEN & PELVIS W/CONTRAST MATERIAL		✓
74178	CT ABD&PLV W/O CNTRST 1/BTH FLWD CNTRST 1/BTH		✓
74181	MRI ABDOMEN W/O CONTRAST MATERIAL		✓
74182	MRI ABDOMEN W/CONTRAST MATERIAL		✓
74183	MRI ABDOMEN W/O CONTRAST FLWD BY W/CONTRAST		✓
74185	MRA ABDOMEN W/WO CONTRAST MATERIAL		✓
74261	CT COLONOGRPHY DX IMAGE POSTPROCESS W/O CONTRAST		✓
74262	CT COLONOGRPHY DX IMAGE POSTPROCESS W/CONTRAST		✓
74263	CT COLONOGRAPHY SCREENING IMAGE POSTPROCESSING		✓
91110	GI TRC IMG INTRALUMINAL ESOPHAGUS-ILEUM W/I&R	✓	
91111	GI TRACT IMAGING INTRALUMINAL ESOPHAGUS WI&R	✓	
91113	GI TRACT IMAGING INTRALUMINAL COLON I&R	✓	
G0105	COLOREC CANCR SCR; COLONSCPY INDIVIDUL@HIGH RISK	✓	✓
G0121	COLOREC CANCR SCR; COLNSCPY NOT MEET HI RISK	✓	✓