



Driscoll Health Plan

News and Updates



Date:

Jan-04

2024

Contact Information

For questions or additional assistance, contact:

Provider Relations
956-632-8308

To enter authorization requests and upload clinical via the Provider Portal, visit driscollhealthplan.com/providers

To verify authorization requirements via the Authorization Requirement Portal, visit driscollhealthplan.com/priorauthcheck

To submit authorization requests or clinical to the UM Dept. via fax, send to 1-866-741-5650

Attention: Authorization Requirement Updates

Effective 01/01/2024, DHP will not require prior authorization for the following procedure code within the benefit limit:

Surgical/Anesthesia Services:

- 62322, caudal block

Effective 02/01/2024, DHP will require prior authorization for the following procedure codes:

Pharmacy:

- J3401, Vyjuvek (beremagene geperpavec-svdt) - treatment of wounds in members 6 months of age and older with dystrophic epidermolysis bullosa (DEB).
- J1412, Roctavian (valoctocogene roxaparvovec-rvox) - treatment of adult members with severe hemophilia A (congenital Factor VIII deficiency with Factor VIII activity less than 1 IU/dL) without pre-existing antibodies to adeno-associated virus serotype 5 (AAV5) detected by an FDA-approved test.

* To access the DHP provider portal , visit driscollhealthplan.com