



### Date:

# Feb-2

# 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](https://driscollhealthplan.com/providers)

To verify authorization requirements via the Authorization Requirement Portal, visit [driscollhealthplan.com/priorauthcheck](https://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 03/01/2024, DHP **will not** require prior authorization for the following procedure codes within the benefit limit:

Neurostimulators:

- E0733 - Transcutaneous Electrical Nerve Stimulator, restricted to diagnosis code G50.0 and limited to one every five years
- A4541 - Monthly supplies for use of device coded at E0733, restricted to diagnosis code G50.0 and limited to one per month

Neurology Services: for members with at least one of the following diagnosis codes: G12.20, G12.22, G12.23-G12.25, G12.29, G12.8, G12.9, G47.35, G82.50-G82.54, G83.89, J96.10-J96.12, J96.20-J96.22, R06.81, Z99.11

- 33276 - insertion of phrenic stimulator generator and stimulating lead(s)
- 33277 - insertion of phrenic nerve stimulator sensing leads
- 33278 - Removal of phrenic nerve stimulator generator and lead(s)
- 33279 - removal of phrenic nerve stimulator stimulation or sensing lead(s)
- 33280 - removal of phrenic nerve stimulator pulse generator
- 33281 - repositioning of phrenic nerve stimulator lead(s)
- 33287 - removal and replacement of phrenic nerve stimulator pulse generator
- 33288 - removal and replacement of phrenic nerve stimulator stimulation or sensing lead(s)
- 93150 - Therapy activation of the implanted phrenic nerve stimulator system
- 93151 - evaluation and programming of implanted phrenic nerve stimulator system
- 93153 - evaluation of implanted phrenic nerve stimulator system

Pharmacy Services:

- Q4081 - Epoetin Alfa, for members with at least one of the following diagnosis codes: D63.1, N18.1, N18.2, N18.30, N18.31, N18.32, N18.4, N18.5, N18.6, N18.9, N19
- J2260 - Milrinone
- 90676 - Rabies Vaccine, for age appropriate members 19 years and older
- 90380 - RSV, monoclonal antibody, for age appropriate members birth to 19 months
- 90381 - RSV, monoclonal antibody, for age appropriate members birth to 19 months
- 96380 - administration procedure code for RSV
- 96381 - administration code for RSV seasonal dose

Effective 03/01/2024, DHP **will** require prior authorization for the following procedure codes:

Pharmacy Services:

- J1000 - Depo-Estradiol Cypionate
- J1071 - Testosterone Cypionate
- J1380 - Estradiol Valerate
- J3121 - Testosterone Enanthate
- J3145 - Testosterone Undecanoate
- J3315 - Triptorelin Pamoate
- J9155 - Degarelix
- J9218 - Leuprolide Acetate
- S0189 - Testosterone Pellet

\* To access the DHP provider portal , visit [driscollhealthplan.com](https://driscollhealthplan.com)