



Driscoll Health Plan

News and Updates



Date:

Apr-01
2026

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 (page 1 of 2)

Effective 05/01/2026, DHP **will not** require prior authorization for the following procedure codes:

Radiology Service

- 70471- Computed Tomographic Angiography (CTA) of both the head and neck, with contrast, including non-contrast images and image postprocessing.
- 70472- CT cerebral perfusion analysis with contrast material
- 70473- CT cerebral perfusion analysis with contrast material(s), including image postprocessing, performed without concurrent CT or CT angiography of the same anatomy.
- 75577- quantification and characterization of coronary atherosclerotic plaque derived from analysis of coronary computed tomography angiography.

Pharmacy Service

- C9307- linvoseltamab-gcpt (Lynozytic), treatment for multiple myeloma, relapsed or refractory for members 18 years old and older.
- C9308- Carboplatin (Avyxa/Kyxata) initial treatment advanced ovarian carcinoma for members 18 years old and older.
- J2516- pentamidine isethionate- antifungal for the treatment and prevention of Pneumocystis pneumonia

Orthopedic Service

- C1742- A diagnostic aid for Compartment Syndrome, a pressure monitoring system, compartmental intramuscular (implantable), continuous, including all components, excludes mobile (wireless) software application.

Urology Service

- 52597- transurethral robotic-assisted waterjet resection of the prostate (Aquablation therapy).

Cardiology Service

- 33882- endovascular repair of the thoracic aorta using a branched endograft system.

Diagnostic Procedures

- 91124- Rectal sensation, tone, and compliance study
- 91125- anorectal manometry with rectal sensation and rectal balloon expulsion test.

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Attention: Authorization Requirement Updates (page 2 of 2)

Audiology Services and Hearing Devices

- 92628- Evaluation for hearing aid candidacy, unilateral or bilateral, including review and integration of audiologic function tests, assessment, and interpretation of hearing needs, discussion of candidacy results, counseling on treatment options with report, and assessment of cognitive and communication status; first 30 minutes.
- 92629- Add-on code for 92628; each additional 15 minutes.
- 92631- Hearing aid selection services, unilateral or bilateral, including review of audiologic function tests and hearing aid candidacy evaluation, assessment of visual and dexterity limitations, and psychosocial factors, establishment of device type, output requirements, signal processing strategies and additional features, discussion of device recommendations with report; first 30 minutes.
- 92632- Add-on code for 92631; each additional 15 minutes.
- 92634- Hearing aid fitting services, unilateral or bilateral, including device analysis, programming, verification, counseling, orientation, and training, and, when performed, hearing assistive device, supplemental technology fitting services; first 60 minutes.
- 92635- Add-on code for 92634; each additional 15 minutes.
- 92636- Hearing aid post-fitting follow-up services, unilateral or bilateral, including confirmation of physical fit, validation of patient benefit and performance, sound quality of device, adjustment(s), as indicated, and hearing assistive device, supplemental technology fitting services; first 30 minutes.
- 92637- Add-on code for 92636; each additional 15 minutes
- 92641- Hearing device verification, electroacoustic analysis

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