



Date:

June-2 2025

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 07/01/2025, DHP <u>will</u> require prior authorization for the following procedure codes:

General Surgery Services

- 44135, intestinal allotransplantation from a cadaver donor.
- 44136, intestinal allotransplantation from a cadaver donor.

Equipment and Supplies

• V5255, a monaural hearing aid designed for one ear that amplifies sound to help individuals with hearing loss hear more clearly.

Skin Substitutes

- C9360, dermal substitute made of native, non-denatured collagen from neonatal bovine origin, specifically the SurgiMend Collagen Matrix.
- C9361, collagen matrix nerve wrap.
- C9362, porous purified collagen matrix bone void filler, specifically the Integra Mozaik Osteoconductive Scaffold Strip, per 0.5 cc.
- C9367, endoform dermal template.

Oculoplastic/Oculofacial Plastic Surgery

- V2790, amniotic membrane for surgical reconstruction, per procedure.
- 65780, Ocular Surface Reconstruction; amniotic membrane transplantation, multiple layers.

Medical Transportation Services - Non Urgent/Non Emergent

- S0215, used for billing non-emergency transportation services where the mileage is a component of the cost, such as for a patient needing to travel to a medical facility for an appointment. Mileage.
- T2003, used to bill for transportation services when a patient needs to travel to a medical appointment or treatment, but the situation isn't considered an emergency. Per trip.
- T2004, used for transporting patients who don't require immediate emergency care but need transportation to medical appointments or treatments. Per trip.

OB/MFM Services

 S2405, surgically repairing a sacrococcygeal teratoma in a fetus, performed in utero

Home Health Services

- T1002, used for services provided by a Registered Nurse (RN) in a patient's home or other non-institutional setting, for a duration of 15 minutes or less.
- T1003, used for billing purposes in the healthcare industry, specifically for services provided by Licensed Practical Nurses (LPNs) or Licensed Vocational Nurses (LVNs) for a maximum duration of 15 minutes.
- T1023, used for screening to determine the appropriateness of an individual for participation in a specific program, project, or treatment protocol.

* To access the DHP provider portal , visit <u>driscollhealthplan.com</u>