



Date:



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 <u>driscollhealthplan.com/providers</u>

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

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

Attention: Authorization Requirement Updates- PT Treatment Status Post Select Orthopedic Procedures

Effective 07/01/2025, DHP **will not** require prior authorization within the benefit limit for Physical Therapy Treatment procedure codes: 97012, 97014, 97016, 97018, 97022, 97024, 97026, 97028, 97032-97036, 97110, 97112, 97113, 97116, 97124, 97140, 97150, 97530, 97535, 97537, 97542, 97750, 97760, 97761, 97763, and 97799, when submitted with one of the following diagnosis codes: Z47, Z47.1, Z47.2, Z47.3, Z47.31, Z47.32, Z47.33, Z47.8, Z47.81, Z47.82, Z47.89, Z47.9, Z48.81, Z51.89, or Z98.890, for a total quantity of up to 6 visits/24 units.