



Date:

Aug-30

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 - Neurotransmitter, Preventative Med., and Dental Anesthesia Services-2nd Notice

Effective 09/01/2024, DHP will not require prior authorization for the following procedure codes:

Neurotransmitters:

- 64553, percutaneous implantation of neurostimulator electrode array; cranial nerve
- 64555, percutaneous implantation of neurostimulator electrode array; peripheral
- 64590, insertion or replacement of peripheral, sacral, or gastric neurostimulator pulse generator or receiver
- 64596, insertion or replacement of percutaneous electrode array, peripheral nerve, initial electrode array
- 64597, insertion/replacement of percutaneous electrode array, peripheral nerve, additional electrode array
- 64598, revision/removal of neurostimulator electrode array, peripheral nerve,

Preventative Medicine Services:

- 99386, preventive medicine evaluation and management (E/M)
- 99387, preventive medicine evaluation and management (E/M)
- 99396, preventive medicine evaluation and management (E/M)
- 99397, preventive medicine evaluation and management (E/M)

Dental Anesthesia Services:

- G0330, facility services for dental rehabilitation procedures when monitored anesthesia or use of an operating room is required, STAR and STAR Kids members greater than 6 years of age with diagnosis: K02.3, K02.51, K02.53, K02.61, K02.63, K02.7, K02.9-K03.9, or K04.0

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