



Driscoll Health Plan

News and Updates



Date:

Oct-01
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 11/01/2025:

Per HHSC guidance, the UA modifier will be required on all PDN authorization requests (procedure code T1000) for members requiring specialized services because they are dependent on invasive ventilation to breathe or they have a functioning tracheostomy. Providers are responsible for indicating the UA modifier on the authorization request and the claim.

Members receiving non-invasive ventilation from a ventilator machine capable of providing invasive ventilation for the sole purpose of functioning as a respiratory assist device (RAD), including continuous positive airway pressure (CPAP), auto-titrating PAP (APAP), bi-level PAP (BPAP, BiPAP), or adaptive servo-ventilation (ASV), do not require specialized services and do not qualify for additional reimbursement provided by the UA modifier.

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