



### Date:

**Nov-15** 

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

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

# Attention: Authorization Requirement Updates for Behavioral Health Services - Second Notification Part 1

Effective 11/01/2024, DHP <u>will not</u> require prior authorization for the following procedure codes:

#### **CHIP Line of Business**

**Behavioral Health Residential Treatment Center (RTC):** no authorization is required for in network providers

99232, with diagnoses: F12.10, F31.0, F31.10, F31.12, F31.2, F31.4, F31.63, F31.64, F31.9, F32.2, F32.89, F32.9, F33.2, F33.3, F34.81, F34.89, F39, F40.10, F41.1, F41.9, F43.10, F43.12, F43.9, F43.50, F50.9, F60.3, F63.81, F65.0, F65.89, F84.0, F90.0, F90.1, F90.2, F90.8, F90.9, F91.3, F94.1, G40.813, G40.824, G40.919, Z62.810, Z62.820, Z71.3

**Partial Hospitalization Program (PHP):** No authorization is required for in network and out of network providers

- H0035, Mental health partial hospitalization, treatment, less than 24 hours
- S0201, Partial hospitalization services, less than 24 hours

**Intensive Outpatient Program (IOP), Substance Use Disorder (SUD):** No authorization is required for in network and out of network providers

• H0015, Alcohol and/or drug services; intensive outpatient

**Intensive Outpatient Program (IOP), Mental Health Services:** No authorization is required for in network providers

• \$9480, Intensive outpatient psychiatric services

### STAR and STAR Kids Line of Businesses

**Behavioral Health Residential Treatment Center (RTC):** no authorization is required for in network providers

99232, with diagnoses: F12.10, F31.0, F31.10, F31.12, F31.2, F31.4, F31.63, F31.64, F31.9, F32.2, F32.89, F32.9, F33.2, F33.3, F34.81, F34.89, F39, F40.10, F41.1, F41.9, F43.10, F43.12, F43.9, F43.50, F50.9, F60.3, F63.81, F65.0, F65.89, F84.0, F90.0, F90.1, F90.2, F90.8, F90.9, F91.3, F94.1, G40.813, G40.824, G40.919, Z62.810, Z62.820. Z71.3

In Lieu of Services

**Partial Hospitalization Program (PHP):** members 20 years and younger - no authorization is required for in network providers

- H0035, Mental health partial hospitalization, treatment, less than 24 hours
- S0201, Partial hospitalization services, less than 24 hours

**Intensive Outpatient Program (IOP):** members 20 years and younger - no authorization is required for in network providers

- H0015, Alcohol and/or drug services; intensive outpatient
- \$9480, Intensive outpatient psychiatric services