



Date:

Sept-19

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

Transplant Services

- S2053, transplantation of small intestine and liver allografts.
- S2054, Transplantation of multivisceral organs.
- S2060, Lobar lung transplantation.
- S2065, Simultaneous pancreas kidney transplantation.

Radiology Services

- S2079, Laparoscopic esophagomyotomy (Heller type).
- S2095, Transcatheter occlusion or embolization for tumor destruction.

Orthopedic Services

• S2118, Metal-on-metal total hip resurfacing, including acetabular and femoral components.

MFM Services

- S2402, Repair, congenital cystic adenomatoid malformation in the fetus, procedure performed in utero.
- S2403, Repair, extra lobar pulmonary sequestration in the fetus, procedure performed in utero.

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