



Provider Notice

November 8, 2023

Prior Authorization Changes for 2024

CountyCare Health Plan is committed to providing an efficient and consistent Utilization Management (UM) experience for our members and providers. Based on provider feedback, market analysis, and utilizations trends the following prior authorization (PA) revisions will be effective for all dates of service beginning on **01/10/2024**. The entire CPT Authorization look up tool can be found [here](#).

The following Behavioral Health Services **WILL NO LONGER REQUIRE** prior authorization:

Code Type	Code	Description
CPT	90846	Family Psychotherapy w/o pt present
CPT	90885	Psych Evaluation of records, reports, metrics, tests
CPT	90887	Interpretation of results psych, medical examination to family
CPT	90889	Preparation of reports (other than legal/consul purposes)
HCPCS	H0034	Medication Training and Support

The following Behavioral Health Service **WILL REQUIRE** prior authorization:

Code Type	Code	Description
HCPCS	H0010	Detoxification
HCPCS	H0012	Alcohol and/or drug services; sub-acute detoxification (residential addiction program outpatient)
HCPCS	H0047	Rehabilitation-Adult (Age 21+)
HCPCS	H0047	Rehabilitation-Child (Age 20 or under)
HCPCS	H2036	Adolescent Residential care

The following Medications **WILL NO LONGER REQUIRE** prior authorization:

HCPCS Code	Drug Name
J3360	Diazepam, injection (up to 5mg)
J1200	Diphenhydramine hcl, injection (to 50mg)
J1700	Hydrocortisone acetate, injection (to 25mg)
J2930	Methylprednisolone, injection (to 125mg)
J2765	Metoclopramide hcl, injection (to 10mg)
J2650	Prednisolone acetate, injection (to 1mL)
J7510	Prednisolone, oral (per 5mg)
J0780	Prochlorperazine, injection (to 10mg)
J2950	Promazine, injection (up to 25mg)
J2550	Promethazine, injection (to 50mg)
J2794	Risperidone, injection (0.5 MG)

The following Medications **WILL REQUIRE** prior authorization:

Policies can be found here under [Medical Drug Policies for Prior Authorization – CountyCare Health Plan](#)

HCPSC Code	Drug Brand Name	Associated Policy
J1576	Panzyga	RX.PA.017.CCH (IVIG/SCIG)
C9257	Avastin	RX.PA.026.CCH (Ocular Disorders)
Q5124	Byooviz	RX.PA.026.CCH (Ocular Disorders)
C9151	Syfovre	RX.PA.026.CCH (Ocular Disorders)
J1428	Exondys 51	Exondys 51 (eteplirsen) HFS State Criteria
J0256	Aralast NP	RX.PA.033.CCH (Specialty Drug Management)
J2329	Briumvi	RX.PA.033.CCH (Specialty Drug Management)
J0717	Cimzia	RX.PA.033.CCH (Specialty Drug Management)
J9210	Gamifant	RX.PA.033.CCH (Specialty Drug Management)
J0223	Givlaari	RX.PA.033.CCH (Specialty Drug Management)
J0257	Glassia	RX.PA.033.CCH (Specialty Drug Management)
J1411	Hemgenix	RX.PA.033.CCH (Specialty Drug Management)
J0135	Humira	RX.PA.033.CCH (Specialty Drug Management)
Q5131	Idacio	RX.PA.033.CCH (Specialty Drug Management)
J7213	Ixinity	RX.PA.033.CCH (Specialty Drug Management)
J0222	Onpattro	RX.PA.033.CCH (Specialty Drug Management)
J0224	Oxlumo	RX.PA.033.CCH (Specialty Drug Management)
J7336	Qutenza	RX.PA.033.CCH (Specialty Drug Management)
J1440	Rebyota	RX.PA.033.CCH (Specialty Drug Management)
J2327	Skyrizi	RX.PA.033.CCH (Specialty Drug Management)
J1961	Sunlenca	RX.PA.033.CCH (Specialty Drug Management)
J9381	Tzield	RX.PA.033.CCH (Specialty Drug Management)

This policy is intended to provide guidance for In-Network facilities. All Out of Network requests are subject to prior authorization along with Medical Director review and may be redirected to an In-Network facility.

Contact us

Please contact CountyCare Provider Services at **312-864-8200, Option 6**. You can also use our Interactive Voice Response (IVR) system to verify eligibility. The Provider Services Representatives can assist you with eligibility and claim status. They can also connect you with your assigned PR Representative.

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact your assigned Provider Relations Representative or if you do not know your assigned Representative, please contact CountyCareProviderServices@cookcountyhhs.org.

Reminder - there are multiple ways to request Prior Authorization:

- **In-network providers only:** may submit requests via the [CountyCare Health Plan Portal](#) for a quicker response. Visit CountyCare Provider Portal for details on how to sign up. **You can find the portal link [here](#).**
- Submit via phone by calling 312-864-8200, option 5, or 1-855-444-1661, option 5.
- Submit via fax by visiting www.countycare.com for fax numbers and detail.