



# Provider Notice

July 10, 2024

## **Procedure Codes Removed from Prior Authorization Look-Up Tool**

CountyCare Health Plan is committed to providing an efficient and consistent Utilization Management (UM) experience for our members and providers. We continuously review our [Prior Authorization Look-Up Tool](#) to ensure it aligns with current HFS fee schedules. **Please note, this update is effective immediately.\***

**The following procedure codes are being removed from the Prior Authorization Look-Up Tool (these codes are not listed on the HFS Home Health fee schedule):**

- **G0155:** Services of clinical social worker in home health or hospice settings, each 15 minutes
- **G0157:** Services performed by a qualified physical therapist assistant in the home health or hospice setting, each 15 minutes
- **G0158:** Services performed by a qualified occupational therapist assistant in the home health or hospice setting, each 15 minutes
- **G0159:** Services performed by a qualified physical therapist, in the home health setting, in the establishment or delivery of a safe and effective physical therapy maintenance program, each 15 minutes
- **G0160:** Services performed by a qualified occupational therapist, in the home health setting, in the establishment or delivery of a safe and effective occupational therapy maintenance program, each 15 minutes
- **G0161:** Services performed by a qualified speech-language pathologist, in the home health setting, in the establishment or delivery of a safe and effective speech-language pathology maintenance program, each 15 minutes
- **G0162:** Skilled services by a registered nurse (RN) for management and evaluation of the plan of care; each 15 minutes (the patient's underlying condition or complication requires an RN to ensure that essential nonskilled care achieves its purpose in the home health or hospice setting)

**CountyCare's Prior Authorization Look-Up Tool is available on the CountyCare website:** [Prior Authorization – CountyCare Health Plan](#)

**Reminder** - There are multiple ways to request Prior Authorization:

- In-network providers may submit requests via the [CountyCare Health Plan Portal](#) for a quicker response. 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](http://www.countycare.com) for fax numbers and detail.

**New Century Health:** To obtain authorizations, please follow the steps below:

- Login New Century Health Provider portal: <https://my.newcenturyhealth.com/>.
- New user can request access and training by contacting Latonia Bradshaw, Sr. Provider Network Manager, at [lbradshaw@newcenturyhealth.com](mailto:lbradshaw@newcenturyhealth.com) or by phone at 562-237-3419.
- Training available for all new staff members and refresher courses for existing staff as needed.

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



## Contact Us

If you need additional assistance on how to use the portal, please contact CountyCare Provider Services at [countycareproviderservices@cookcountyhhs.org](mailto:countycareproviderservices@cookcountyhhs.org) or your Provider Relations Representative or 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 and can also connect you with your assigned Provider Relations Representative.