

December 1, 2022

PROVIDER ALERT: SUMMARY OF CHANGES TO THE QUICK AUTHORIZATION GUIDE

Effective with dates of service January 1, 2023, MedStar Family Choice District of Columbia (MFC-DC) will make the following changes to the Quick Authorization Guide:

1. **Acupuncture** for Enrollees <21 years old will still require prior authorization for >10 visits from a par provider. The change will be per **calendar year** and no longer be per condition.
2. **Chiropractic** Services for Enrollees <21 years old will still require prior authorization for >10 visits from a par provider. The change will be per **calendar year** and no longer be per condition.
3. **Diabetes and Nutritional Counseling** visits will still require prior authorization from a par provider after 3 visits. The change will be per **calendar year** and no longer be per condition.
4. **Home Health Care** visits (SN/ PT/ OT/ SLP/ PDN) will now require prior authorization for ***ALL visits*** for all disciplines.
5. **Outpatient Rehabilitation** Services (PT/OT/SLP/) for Enrollees ≥21 years old will now require prior authorization for ***ALL visits*** for all disciplines.

Required Service Codes by Discipline:

Revenue Code	HCPCS Code	Mod	Service Description
0559	T1000	TD	Private Duty Visit RN
0559	T1000	TE	Private Duty Visit LPN
0420	G0151		Physical Therapy – General
0430	G0152		Occupational Therapy – General
0440	G0153		Speech/Language Pathology – General
0570	T1004		Home Health Aide – Hourly Charge



MedStar Family Choice

DISTRICT OF COLUMBIA

For questions concerning this Provider Alert, please contact the MFC-DC Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m.

Phone: **855-798-4244, Option 2**

Email: mfcdc-providerrelations@medstar.net

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treat people.**