

April 6, 2022

RE: Prior Authorization Update for Oxygen Services Effective June 1, 2022

Dear Providers,

Effective June 1, 2022, the following procedure codes will not require prior authorization when billed by a network Provider:

E0439 E0434

The claim must be submitted with one or more of the following diagnosis code(s) to avoid the requirement for prior authorization:

- Z93.0 Tracheostomy status
- Z99.11 Dependence on respirator

For claims that are not submitted with the above diagnosis prior authorization is required. Out of network Providers must always submit for authorization.

Providers may contact <u>CCHPPriorAuthorizations@cookchildrens.org</u> for questions related to this guidance. For general health plan questions contact Provider Support Services at 888-243-3312 or submit a Customer Service Request via the Secure Provider Portal, select the topic: Provider Relations Outreach.

Sincerely,

Cook Children's Health Plan

801 Seventh Avenue Box 2488 Fort Worth, Texas 76113-2488 888-243-3312