

PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

Prior Authorization Changes Effective July 21, 2024

Effective Date: July 21, 2024

Health Plans Affected: Priority Partners

Type of Change: Prior Authorization

Explanation of Change:

Please note the following No Prior Authorization (NPA) and Prior Authorization (PA) required changes for hospice codes for Priority Partners effective July 21, 2024.

Hospice Codes: Prior Authorization (PA) Required

- **Q5004:** Hospice care provided in skilled nursing facility (SNF) - **PA**
- **Q5005:** Hospice care provided in inpatient hospital – **PA**
- **Q5006:** Hospice care provided in inpatient hospice facility – **PA**
- **Q5007:** Hospice care provided in long-term care facility – **PA**
- **Q5008:** Hospice care provided in inpatient psychiatric facility – **PA**
- **Q5009:** Hospice or home health care provided in place not otherwise specified (NOS) – **PA**

Hospice Codes: No Prior Authorization (NPA) Required

- **Q5001:** Hospice or home health care provided in patient's home/residence - **NPA**
- **Q5002:** Hospice or home health care provided in assisted living facility – **NPA**
- **Q5003:** Hospice care provided in nursing long-term care facility (LTC) or nonskilled nursing facility (NF) – **NPA**
- **Q5010:** Hospice home care provided in a hospice facility – **NPA**