

Change in Behavioral Health Prior Authorization Requirements

Effective Immediately, MVP Health Care® (MVP) prior authorization requirements are removed for the following Behavioral Health Services:

For All Lines of Business in New York

- Outpatient Substance Use Rehabilitation Services H2036 ONLY when billing without a Rate Code

For All Lines of Business in Vermont

- Clinic Visits when billing T1015 without Modifiers

For All Lines of Business in New York and Vermont

- Mental Health Partial Hospitalization (PHP): H0035, 90870, 00104, S9484HK
- Electroconvulsive Therapy (ECT): 0901,90870,00104

For Medicaid and HARP Lines of Business Only

- Continuing Day Treatment (CDT): H2012

To receive future FastFax messages by email, send a request to MVPFastFax@mvphealthcare.com.

Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at 1-800-684-9286.

