## An important message from **Provider Relations**







## **Payment Policy Updates**

## Effective June 1, 2018

Thank you for your continued partnership with Home State Health. As you know, Home State continually reviews and updates our payment and utilization policies to ensure that they are designed to comply with industry standards while delivering the best patient experience to our members. This notice is to inform you of new policies Home State Health will be implementing effective June 1, 2018.

In order to align with standard coding guidelines, encourage appropriate utilization of resources, and encourage the highest quality treatment, effective for dates of service beginning **June 1**, **2018**, Home State is implementing five new policies and practices across all lines of business. We will apply these as medical claims reimbursement edits within our claims adjudication system. These policies should be familiar, as they follow CMS/National Correct Coding Initiative (NCCI) guidelines, American College of Obstetricians and Gynecologists (ACOG) and have already been put in place by other payers. They are developed based on medical literature and research, industry standards and guidelines as published and defined by the American Medical Association's Current Procedural Terminology and most will impact only a small segment of providers who may be coding outside of standard practice.

Our current payment policies, including these policies, are located on our public website at <a href="https://www.homestatehealth.com">www.homestatehealth.com</a>. Below is a matrix outlining the five polices, which will apply to our various products.

Please don't hesitate to reach out to your Provider Partnership Associate with any questions you may have.

Number	Policy Name	Policy Description	Line of Business
CP.MP.152	Measurement of Serum 1,25- dihydroxyvitamin D	This policy address when measurement of 1,25(OH)2D is appropriate and medically necessary.	Medicaid, Medicare, Marketplace
CP.MP.153	Helicobacter Pylori (H. pylori) Serology Testing	This policy outlines why serologic antibody testing cannot distinguish between an active infection and a past infection, and why alternative, non-invasive testing methods (e.g., the urea breath test and stool antigen test) exist for detecting the presence of H. pylori.	Medicaid, Medicare, Marketplace
CP.MP.154	Thryoid Hormones and Insulin Testing in Pediatrics	This policy discusses the medical necessity requirements for the testing of thyroid stimulating hormone [TSH], thryoxine [T4] as well as by insulin.	Medicaid, Medicare, Marketplace
CP.MP.155	EEG in the Evaluation of Headache	This policy addresses the use of EEG in the diagnostic evaluation of headache.	Medicaid, Medicare, Marketplace
CP.MP.157	25-hydroxyvitamin D Testing in Children and Adolescents	The policy outlines the recommendations against universal screening for vitamin D deficiency in healthy children.	Medicaid, Medicare, Marketplace