

An important message from **Provider Relations**



Payment Policy Updates

Effective December 1, 2017

Thank you for your partnership with Home State Health Plan. We appreciate your help in achieving our shared goal of delivering quality, accessible, and affordable healthcare to our members.

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 **December 1, 2017**, we are 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 <u>www.homestatehealth.com</u>. Below is a matrix outlining the five policies, which will apply to our various products.

Number	Policy Name	Policy Description	Line of Business
CP.PP.055	Physician's Office Lab Testing	The purpose of this policy is to define payment criteria for in-office laboratory procedures to be used in making payment decisions and administering benefits.	Medicaid/Home State Medicare/Allwell Exchange/Ambetter
CP.PP.057	Problem Oriented Visits with Preventative Visits	The purpose of this policy is to define payment criteria for problem-oriented visits when billed with preventative visits to be used in making payment decisions and administering benefits.	Medicaid/Home State Medicare/Allwell Exchange/Ambetter
CP.PP.052	Problem Oriented Visits with Surgical Procedures	The purpose of this policy is to define payment criteria for problem-oriented visits when billed on the same day as a surgical procedure to be used in making payment decisions and administering benefits.	Medicaid/Home State Medicare/Allwell Exchange/Ambetter
CC.MP.149	PROM Testing	The policy provides a statement of medical necessity for non-invasive testing for rupture of fetal membranes.	Medicaid/Home State Medicare/Allwell Exchange/Ambetter
CC.PP.056	Urine Specimen Validity Testing	The purpose of this policy is to define payment criteria for urine specimen validity testing to be used in making payment decisions and administering benefits.	Medicaid/Home State Medicare/Allwell Exchange/Ambetter

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