

## Updated Coding, Payment and Clinical Policies: *Effective 6/1/2021*

Thank you for your continued partnership with Home State Health Plan. As you know, we continually review and update 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. We are writing today to inform you of new policies Home State Health Plan will be implementing effective **6/1/2021**.

Policy Number	Policy Name	Policy Description	Lines of Business
<b>CC.PP.070</b>	340B Drug Payment Reduction	Ensures that providers participating in the 340B Drug Pricing Program are correctly reporting 340B acquired drugs according to guidelines established by the Centers for Medicare and Medicaid Services (CMS).	Medicare
<b>CP.MP.208</b>	Outpatient Testing for Drugs of Abuse: Presumptive Frequency Edits	Medical necessity criteria for presumptive (preliminary) testing for a specific drug and frequency limits for 80305, 80306, and 80307 for chronic opioid therapy.	Medicaid, Medicare, Marketplace

Claim Editing	Policy Description	Source	Lines of Business
<b>Correct Coding Update (Cotiviti 8, WCIVC B2)</b>	Cotiviti 8 is a correct coding edit of ICD-10 diagnosis codes with a focus on coding compliance in three areas: <ul style="list-style-type: none"><li>• Laterality diagnosis to diagnosis mismatch</li><li>• Laterality diagnosis to modifier mismatch</li><li>• Mutually exclusive diagnosis codes</li></ul>	ICD-10 CM Diagnosis Code Manual	Medicaid, Medicare, Marketplace

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