MO HealthNet Managed Care (Medicaid)

https://provider.healthybluemo.com Provider Services: 833-405-9086



# **Provider News**

**June 2022** 



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#### BMO-NL-0129-22

Healthy Blue is a Medicaid product offered by Missouri Care, Inc., a MO HealthNet Managed Care health plan contracting with the Missouri Department of Social Services. Healthy Blue is administered statewide by Missouri Care, Inc. and administered in the Kansas City service region by Missouri Care, Inc. in cooperation with Blue Cross and Blue Shield of Kansas City. Missouri Care, Inc. and Blue Cross and Blue Shield of Kansas City are both independent licensees of the Blue Cross and Blue Shield Association.



## COVID-19 information from Healthy Blue

Healthy Blue is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the COVID-19 Updates page on our website.



## **Administrative**

### Provider notice for COVID-19 testing

#### Evaluation and management services for COVID testing — professional

Effective with dates of service on or after September 1, 2022, Healthy Blue will facilitate review of selected claims for COVID-19 visits reported with evaluation and management (E&M) services submitted by professional providers to align with CMS reporting guidelines. When the purpose of the visit is for COVID-19 testing only, reimbursement for CPT® code 99211 (office or other outpatient visit) is allowed when billed with place of service office (11), mobile unit (15), walk-in retail health clinic (17), or urgent care facility (20). Claims for exposure only may be affected. Professional providers are encouraged to code their claims to the highest level of specificity in accordance with ICD-10 coding guidelines.



Prior to payment, Healthy Blue will review the selected claims to determine, in accordance with correct coding requirements and/or reimbursement policy as applicable, whether the E&M code level submitted is appropriate for the COVID-19 visit reported. If the visit is determined to be solely for the purpose of COVID-19 testing, Healthy Blue will reimburse using CPT code 99211.

Professional providers that believe their medical record documentation supports reimbursement for the originally submitted level for the E&M service will be able to follow the Claims Payment Dispute process (including submission of such documentation with the dispute) as outlined in the provider manual.

BM0-NL-0124-22



### **Provider coding education**

You can access all provider-coding education events for Healthy Blue with one easy **link**. We will add new topics to the training page, so please check it often. Enjoy informative webinars designed specifically for network providers, coders, billers, and office staff. A variety of helpful and educational topics are available relating to coding and documentation, claims and billing issues, member care, quality measures, and more.

**Live events:** Each live training webinar event offers awards one unit of continuing education.

#### **Upcoming topics include:**

- Social drivers of health.
- 2022 coding updates.
- Improving cultural competency.
- HEDIS® behavioral health.
- HEDIS pediatric screening.

#### Register today.

Please reserve your place at least 24 hours prior to the start of the event. There are two easy ways to register:

 Access the Healthy Blue training at https://bit.ly/36QfLpQ.

• You may also access the page using the QR code to the right. Use the camera on your device to capture the QR code. A link will appear. Tap the link to open the training page.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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## **Policy Updates**

### Updates to AIM Specialty Health Clinical Appropriateness Guidelines

As part of the AIM Specialty Health<sub>®</sub>\* (AIM) guideline annual review process, these updates are focused on advancing efforts to drive clinically appropriate, safe, and affordable healthcare services.

#### **Advanced Imaging**

Effective for dates of service on and after September 11, 2022, several updates will apply to the AIM Advanced Imaging *Clinical Appropriateness Guidelines*.



BMO-NL-0118-22

#### **Sleep Disorder Management**

Effective for dates of service on and after September 11, 2022, several updates will apply to the AIM Sleep Disorder Management Clinical Appropriateness Guidelines.



BMO-NL-0119-22



#### Musculoskeletal

Effective for dates of service on and after September 11, 2022, several updates will apply to the AIM Specialty Health<sub>®</sub> (AIM) Musculoskeletal *Clinical Appropriateness Guidelines*.



BMO-NL-0125-22

\* AIM Specialty Health is an independent company providing some utilization review services on behalf of Healthy Blue.

## Policy Updates — Prior Authorization



## Prior authorization update for select durable medical equipment (DME) items

Effective July 1, 2022, the following durable medical equipment (DME) codes will require prior authorization (PA).

<ul><li>E0328</li></ul>	• E2222	<ul><li>E2397</li></ul>	<ul><li>K0886</li></ul>	<ul><li>L3003</li></ul>	<ul> <li>L5321</li> </ul>	<ul><li>L5845</li></ul>	<ul><li>L5988</li></ul>
• E0329	• E2230	• E2609	<ul><li>K0890</li></ul>	<ul><li>L4631</li></ul>	<ul><li>L5590</li></ul>	<ul><li>L5856</li></ul>	<ul><li>L5999</li></ul>
• E0638	• E2291	<ul><li>E2617</li></ul>	<ul><li>K0891</li></ul>	• L5050	<ul> <li>L5613</li> </ul>	<ul><li>L5858</li></ul>	<ul><li>L6100</li></ul>
<ul><li>E0641</li></ul>	• E2292	<ul><li>K0007</li></ul>	<ul><li>K0899</li></ul>	<ul><li>L5100</li></ul>	<ul><li>L5649</li></ul>	<ul><li>L5960</li></ul>	<ul><li>L6677</li></ul>
• E0642	• E2293	<ul><li>K0009</li></ul>	<ul><li>L0999</li></ul>	• L5200	<ul><li>L5700</li></ul>	<ul><li>L5968</li></ul>	• S1040
<ul><li>E0954</li></ul>	• E2294	<ul> <li>K0012</li> </ul>	<ul><li>L1499</li></ul>	• L5210	<ul><li>L5701</li></ul>	<ul><li>L5973</li></ul>	
• E1011	• E2295	<ul><li>K0014</li></ul>	<ul><li>L2034</li></ul>	• L5220	• L5702	<ul><li>L5979</li></ul>	
• E1012	• E2301	<ul><li>K0868</li></ul>	<ul><li>L2036</li></ul>	• L5280	<ul><li>L5814</li></ul>	<ul><li>L5980</li></ul>	
• E1018	• E2331	<ul><li>K0877</li></ul>	<ul><li>L2037</li></ul>	<ul><li>L5301</li></ul>	<ul><li>L5828</li></ul>	<ul><li>L5981</li></ul>	
<ul> <li>E1220</li> </ul>	<ul><li>E2358</li></ul>	<ul><li>K0884</li></ul>	<ul><li>L2628</li></ul>	<ul> <li>L5312</li> </ul>	<ul><li>L5840</li></ul>	<ul><li>L5987</li></ul>	

#### What is the impact of this change?

Providers should review the list of codes that will require PA. For code-specific PA requirements, visit **https://provider.healthybluemo.com**.

#### How do I obtain precertification?

PA requests can be submitted through the **Availity\* Portal** or by calling Provider Services at **833-405-9086.** 

<sup>\*</sup> Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue. BM0-NL-0114-22



# Policy Updates — Medical Policies and Clinical Guidelines

### February 2022 update

The Medical Policies, Clinical Utilization Management (UM) Guidelines, and Third-Party Criteria below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

To view a guideline, visit https://provider.healthybluemo.com/missouri-provider/medical-policies-and-clinical-guidelines.

#### Notes/updates:

Updates marked with an asterisk (\*) notate that the criteria may be perceived as more restrictive:

- \*CG-LAB-20 Thyroid Testing:
  - Outlines the Medically Necessary and Not Medically Necessary criteria for thyroid testing.
- \*CG-LAB-21 Serum Iron Testing:
  - Outlines the Medically Necessary and Not Medically Necessary criteria for serum iron testing.
- \*LAB.00043 Immune Biomarker Tests for Cancer:
  - Oncologic immune biomarker tests are considered Investigational and Not Medically Necessary for all indications.
- \*LAB.00044 Saliva-Based Testing to Determine Drug-Metabolizer Status:
  - Saliva-based testing to determine drug-metabolizer status is considered Investigational and Not Medically Necessary for all indications.
- \*LAB.00045 Selected Tests for the Evaluation and Management of Infertility:
  - The following tests or procedures are considered Investigational and Not Medically Necessary for diagnosing or managing infertility:
    - Endometrial receptivity analysis
    - Sperm-capacitation test

- Sperm deoxyribonucleic acid (DNA) fragmentation test
- Sperm penetration assay
- Uterine natural killer (uNK) cells test
- \*LAB.00046 Testing for Biochemical Markers for Alzheimer's Disease:
  - Measurements of biochemical markers (including but not limited to tau protein, AB-42, neural thread protein) is considered Investigational and Not Medically Necessary as a diagnostic technique for individuals with symptoms suggestive of Alzheimer's disease.
  - Measurements of biochemical markers as a screening technique in asymptomatic individuals with or without a family history of Alzheimer's disease is considered Investigational and Not Medically Necessary.
  - Moved content related to biomarker testing for Alzheimer's disease from GENE.00003 Biochemical Markers for the Diagnosis and Screening of Alzheimer's Disease to this document.





#### February 2022 update (cont.)

- \*RAD.00067 Quantitative Ultrasound for Tissue Characterization:
  - Quantitative ultrasound for tissue characterization is considered Investigational and Not Medically Necessary for all indications.
- \*SURG.00154 Microsurgical Procedures for the Prevention or Treatment of Lymphedema:
  - Revised Position Statement to include the prevention of lymphedema.
- \*SURG.00160 Implanted Port Delivery Systems to Treat Ocular Disease:
  - The use of a port delivery system to treat ocular disease is considered Investigational and Not Medically Necessary for all indications.
- \*TRANS.00038 Thymus Tissue Transplantation:
  - Outlines the Medically Necessary and Investigational and Not Medically Necessary criteria for allogeneic processed thymus tissue.

#### **Medical Policies**

On February 17, 2022, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to Healthy Blue. These guidelines take effect July 8, 2022.

#### Clinical UM Guidelines

On February 17, 2022, the MPTAC approved several *Clinical UM Guidelines* applicable to Healthy Blue. These guidelines adopted by the Medical Operations Committee for Healthy Blue members on March 24, 2022. These guidelines take effect July 8, 2022.



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