

Updated Payment Policies

April 22, 2020

PA Health & Wellness is implementing Payment & Clinical Policies that will guide how claims for certain services are adjudicated and paid. To ensure accurate reimbursement, the updated policies will provide the clinically-based rule content used to evaluate claims. This is in addition to all other reimbursement processes that PA Health & Wellness currently employs. The policies that dictate the coding and billing rules applied are based on industry standards and guidelines as published and defined in the Current Procedural Terminology (CPT), Centers for Medicare and Medicaid Services (CMS), and public domain specialty society edits, unless specifically addressed in the fee-for-service provider manual published by the State of Pennsylvania or regulations.

The effective date of the change(s) for each policy is posted within the document. These policies apply to all PA Health & Wellness products, unless otherwise noted.

The policies documents can be found on the PA Health & Wellness web site via the link below:

PAHealthWellness.com

Policy Number	Policy Name	Policy Description	Line of Business (LOB)	Adoption Date
PA.CC.PP.065	Multiple Diagnostic Cardiovascular Procedure Payment Reduction (MDCR)	This policy is based on CMS reimbursement methodologies for MPPR and applies a multiple diagnostic cardiovascular procedure reimbursement reduction (MDCR) to procedures assigned a multiple procedure indicator (MPI) of 6 on the CMS National Physician Fee Schedule (NPFS). When this occurs, only the highest-valued procedure is reimbursed at the full payment allowance (100%) and payment for subsequent procedures/units is reimbursed at 75% of the allowance.	Medicare, Medicaid, and Marketplace	4/22/2020

Provider Notification



PA.CC.PP.066	Leveling of Care: Evaluation and Management Overcoding	The purpose of this policy is to ensure that the level of E&M service reported by the provider reflects the services performed. When a provider submits an E&M service that exceeds the maximum level of E&M service based on the diagnosis and other claim documentation elements, the E&M code is reduced to reflect the maximum level of E&M service.	Medicaid	4/22/2020
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ProviderNotification



CENTENE.COM\Shared) (S) > Marketing and Communications > Website and Digital > Public Policies and Procedures > GK > Payment Policies > Dec. 2019

- PA.CC.PP.007 Maximum Units of Service 11.2019
- PA.CC.PP.008 Cerumen Removal 11.2019
- PA.CC.PP.009 UnlistedProcedureCodes 11.2019
- PA.CC.PP.010 E_M Bundling w Labs and Radiology 11.2019
- PA.CC.PP.011 Code Editing 11.2019
- PA.CC.PP.012 Intravenous Hydration 11.2019
- PA.CC.PP.013 Modifier 25 11.2019
- PA.CC.PP.014 Cincial Validation of Modifier 59 11.2019
- PA.CC.PP.015 Moderate Conscious Sedation 11.2019
- PA.CC.PP.016 Reporting the Global Maternity Package 11.2019
- PA.CC.PP.017 Never Paid Events 11.2019
- PA.CC.PP.018 Inpatient Only Procedures 11.2019
- PA.CC.PP.019 Professional Services Billed With Labs 11.2019
- PA.CC.PP.020 Distinct Procedural Modifiers 11.2019
- PA.CC.PP.021 Clean Claims 11.2019
- PA.CC.PP.022 CLIA 11.2019
- PA.CC.PP.023 Hospital Visit Codes Billed w Labs 11.2019
- PA.CC.PP.024 Cosmetic Procedures 11.2019
- PA.CC.PP.025 Pulse Oximetry w Office Visits 11.2019
- PA.CC.PP.027 Professional Component Modifier 11.2019
- PA.CC.PP.028 Modifier to Procedure Code Validation 11.2019
- PA.CC.PP.029 Assistant Surgeon 11.2019
- PA.CC.PP.030 Add-on Policy11.2019
- PA.CC.PP.031 NCCI Unbundling 11.2019
- PA.CC.PP.032 Supplies Same Day As Surgery 11.2019
- PA.CC.PP.033 Multiple CPT Codes Replacement 11.2019
- PA.CC.PP.034 Modifier DOS Validation 11.2019
- PA.CC.PP.035 Sleep Studies Place of Service_Rev_11.2019
- PA.CC.PP.036 New Patient 11.2019
- PA.CC.PP.037 Bilateral Services 11.2019
- PA.CC.PP.038 InPatient Consultation 11.2019
- PA.CC.PP.039 OutPatient Consultation 11.2019
- PA.CC.PP.040_Same Day Visits 11.2019
- PA.CC.PP.041_Preoperative Visits_ 11.2019
- PA.CC.PP.042_Postoperative Visits 11.2019
- PA.CC.PP.043 Unbundled Professional Services 11.2019
- PA.CC.PP.044_Duplicate Primary Code Billing 11.2019
- PA.CC.PP.045_Unbundled Surgical Procedures 11.2019
- PA.CC.PP.046_Status B Bundled Services 11.2019
- PA.CC.PP.047_Transgender Related Services 11.2019
- PA.CC.PP.049_Status P Bundled Services 11.2019
- PA.CC.PP.050 Robotic Surgeries 11.2019
- PA.CC.PP.051 EM Medical Decision Making 11.2019
- PA.CC.PP.052 Problem Oriented Visits with Surgical Procedures 11.2019
- PA.CC.PP.054 Physicians Consultation Services 11.2019
- PA.CC.PP.055 Physician's Office Laboratory Testing 11.2019
- PA.CC.PP.056_Urine Specimen Validity Testing 11.2019
- PA.CC.PP.057 Problem Oriented Visits with Preventative Services 11.2019
- PA.CC.PP.058_Leveling of Care Policy_Professional 11.2019
- PA.CC.PP.059 Clinic Facility Charge 11.2019
- PA.CC.PP.063 Place of Service Mismatch_11.2019
- PA.CC.PP.064 ED Facility EM Policy_11.2019
- PA.CC.PP.500 3 Day Payment Window Policy_11.2019
- PA.CC.PP.501 30 Day Readmission_11.2019
- PA.CP.MP.123 Laser Therapy for Skin Conditions_REVISIED & APPROVED_12.19.2019