



- Nata Hois
- **Aburaha**dias

The following policies are effective April 15, 2018







AT CARESOURCE, WE LISTEN TO OUR HEALTH PARTNERS, AND WE STREAMLINE OUR BUSINESS PRACTICES TO MAKE IT EASIER FOR YOU TO WORK WITH US.

We have worked to create a predictable cycle for releasing administrative, medical and reimbursement policies, so you know what to expect.

Check back each month for a consolidated network notification of policy updates from CareSource.

HOW TO USE THIS NETWORK NOTIFICATION:

- Reference the <u>Table of Contents</u> and click the policy title to navigate to the corresponding policy summary.
- The summary will indicate the effective date and impacted plans for each policy.
- Within the summary, click the hyperlinked policy title to open the webpage with the full policy.

FIND OUR POLICIES ONLINE

To access all CareSource policies, visit CareSource.com and click "Health Partner Policies" under Provider Resources.

CLAIMS AND APPEALS

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POLICY NAME	POLICY TYPE	EFFECTIVE		



POLICY NAME	POLICY TYPE	EFFECTIVE DATE	PLANS	SUMMARY	IMPACT
Breast Imaging <u>– IN MCD PY-</u> 0399	REIMBURSEMENT	APRIL 15, 2018	MEDICAID	The Breast Imaging reimbursement policy will reimburse participating providers for medically necessary breast imaging services according to Breast Imaging medical policy MM-0137 criteria.	CareSource does not require prior authorization for



POLICY NAME	POLICY TYPE	EFFECTIVE DATE	PLANS	SUMMARY	IMPACT
Breast Imaging - IN MPP MM- 0141	MEDICAL	APRIL 15, 2018	MARKETPLACE	Screening mammography aims to reduce morbidity and mortality from breast cancer by early detection and treatment of occult malignancies. Annual screening mammography of age-appropriate asymptomatic women is currently the only imaging modality that has been proven to significantly reduce breast cancer mortality.	 x Specifies diagnostic breast cancer screening mammography frequencies for individuals who are at least 35 years of age but less than 40 years of age; and individuals who are at least 40 years of age x Specifies criteria for baseline screening mammography for a person who is less than 40 years of age and determined to be high risk x Specifies the indications for clinical symptoms x Specifies the criteria for an individual being considered high risk x Specifies the criteria for which CareSource may cover a breast MRI If required, providers must submit their prior authorization number, their claim form, as well as appropriate HCPCS and/or CPT codes along with appropriate modifiers in accordance with CMS. Claims not meeting the necessary criteria as described in the policy document will be denied.

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POLICY NAME	POLICY TYPE	EFFECTIVE DATE	PLANS	SUMMARY	IMPACT
Breast Imaging – IN MPP PY- 0396	REIMBURSEMENT	APRIL 15, 2018	MARKETPLACE	A screening mammogram typically includes two standard views of each breast (cranio-caudal and medial lateral oblique) and does not require the presence of, or monitoring by the interpreting radiologist. When abnormalities are observed a diagnostic test is required to confirm the presence of malignancy.	CareSource follows the Evidence of Coverage (EOC) document criteria for mammography. Prior authorization is not required for screening and diagnostic mammograms for participating providers. All other breast imaging, other than X-ray