



## ADMINISTRATIVE POLICY STATEMENT Marketplace

Policy Name & Number	Date Effective
Molecular Diagnostics Testing-MP-AD-1202	IN, GA, WV, KY: 09/01/2022-07/31/2023 OH: 10/01/2022-08/31/2023
Policy Type	
<b>ADMINISTRATIVE</b>	

Administrative Policy Statement prepared by CareSource and its affiliates are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local

### This policy applies to the following Marketplace(s):

Georgia

Indiana

Kentucky

OhcT 2

- D. Policy 2
- E. Conditions of Coverage 3
- F. Related Policies Rules 3
- G. Review/Revision History 3
- H. References 3
- I. State-Specific Information 3



A. Subject

**Molecular Diagnostics Testing**

B. Background

Molecular diagnostic testing (MDT), following a diagnosis or suspected diagnosis, can help guide appropriate therapy by identifying specific

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E. Conditions of Coverage  
NA

F. Related Policies/Rules  
NA

G. Review/Revision History

	DATE	ACTION
Date		

Archived

The ADMINISTRATIVE Policy Statement detailed above has received due consideration as defined in the ADMINISTRATIVE Policy Statement Policy and is approved.