

REIMBURSEMENT POLICY STATEMENT

Michigan Medicaid

Policy Name & Number	Date Effective
Screening and Surveillance for Colorectal Cancer-MI MCD-PY-1454	06/01/2024
Policy Type	
REIMBURSEMENT	

Reimbursement Policies prepared by CareSource and its affiliates are intended to provide a general reference regarding billing, coding and documentation guidelines. Coding methodology, regulatory requirements, industry-standard claims editing logic, benefits design and other factors are considered in developing Reimbursement Policies.

In addition to this Policy, Reimbursement of services is subject to member benefits and eligibility on the date of service, medical necessity, adherence to plan policies and procedures, claims editing logic, provider contractual agreement, and applicable referral, authorization, notification and utilization management 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 area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider.

The REIMBURSEMENT Policy Statement detailed above has received due consideration as defined in the REIMBURSEMENT Po



- D. The following are reimbursed:
- 1.

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



2. Cancer Intervention and Surveillance Modeling Network Colorectal Cancer Working Group. *Colorectal Cancer Screening: An Updated Decision Analysis for the U.S. Preventive Services Task Force*. Agency for Healthcare Research and Quality; 2021. AHRQ Publication No 20-05271-EF-2. Accessed March 4, 2024. www.ncbi.nlm.nih.gov
3. Gupta S, Lieberman D, Anderson J, et al. Recommendations for follow-up after colonoscopy and polypectomy: a consensus update by the US Multi-Society Task Force on colorectal cancer. *Gastrointest Endosc*. 2020;91(3):463-485.e5. doi:10.1016/j.gie.2020.01.014
4. *Provider Manual*. HAP CareSource; 2024. Accessed March 4, 2024. www.michigan.gov
5. Qaseem A, Harrod CS, Crandall CJ, et al. Screening for colorectal cancer in asymptomatic average-risk adults: a guidance statement from the American College of Physicians. *Ann Intern Med*. 2023;176(8):1017-1144. doi:10.7326/M23-0779
6. Screening for colorectal cancer: US Preventive Services Task Force recommendation statement. *JAMA*. 2021;325(19):1965-1977. doi:10.1001/jama.2021.6238
7. Wilkins T, McMechan D, Talukder A. Colorectal cancer screening and prevention. *Am Fam Physician*. 2018;97(10):658-665. Accessed March 4, 2024. www.aafp.org

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