Important Provider Notice

HIGHMARK WHOLECARE

August 1, 2024

PA Medicaid Policy Updates Effective September 1, 2024

An Update for Medicaid Providers and Clinicians

Annually Reviewed Medical Policies with Changes

MP-118-MD-PA Experimental/Investigational Services

No changes to clinical criteria. Added the following experimental/investigational procedure codes: 69716 , 69719 , 69726 , 69727, 30568, 77089, 77090, 77091, 0198T, 0444T, 0445T, 0484T, 0505T, 0523T, 0525T, 0526T, 0527T, 0528T, 0529T, 0530T, 0531T, 0532T, 0544T, 0545T, 0569T, 0570T, 0596T, 0597T, 0598T, 0599T, 0600T, 0601T, 0607T, 0608T, 0613T, 0615T, 0620T, 0621T, 0622T, 0646T, 0660T, 0661T, 0662T, 0663T, L2006, L8701, & L8702. Removed the following procedure codes as they are currently listed on the PA Fee Schedule: 30469 & 69728. Updated 'Summary of Literature' and 'Reference Sources' sections.

MP-001-MD-PA Wearable Cardioverter Defibrillators in the Home Setting

Added diagnosis code I21.B to the 'Coding Requirements' section. Removed PA DHS TAG determination for HCPCS code K0606. This code no longer requires a Program Exception for approval.

MP-123-MD-PA Laboratory Studies for Diagnosing and Managing Inflammatory Bowel Disease

No changes to clinical criteria. Revised 'Procedures' section, Updated 'Summary of Literature' and 'Reference Sources' sections.

Annually Reviewed Medical Policies without Changes

MP-122-MD-PA Selected Tests for Rheumatic Diseases

No changes to clinical criteria. Updated 'Summary of Literature' and 'Reference Sources'.

MP-069-MD-PA Home Oxygen Therapy (HOT)

No changes to clinical criteria. Updated 'Summary of Literature' and 'Reference Sources' sections.

MP-101-MD-PA Repetitive Transcranial Magnetic Stimulation

No change to E/I determination. Updated 'Reference Sources' and 'Summary of Literature' section.

MP-121-MD-PA Experimental/Investigational Laboratory Services

No changes to criteria. Updated 'Reference Sources' section.

MP-066-MD-PA Fecal Microbiota Transplant

No changes to clinical criteria. Updated ‘Summary of Literature’ and ‘Reference Sources’ sections.

Health benefits or health benefit administration may be provided by or through Highmark Wholecare, coverage by Gateway Health Plan, an independent licensee of the Blue Cross Blue Shield Association (“Highmark Wholecare”).