



Important Provider Notice



March 1, 2025

PA Medicare Policy Updates Effective April 1, 2025

An Update for Medicare Providers and Clinicians

Annually Reviewed Medical Policies with Changes

[MP-101-MC-PA Ambulatory Electrocardiograph \(AECG\) Monitoring \(L39490\)](#)

No changes to clinical criteria. Updated CMS hyperlinks and 'Reference Sources' section. Removed HCPCS code G2066, per CMS guidance.

[MP-073-MC-PA Upper Gastrointestinal Endoscopy \(Diagnostic and Therapeutic\) \(L35350\)](#)

No changes to clinical criteria. Updated CMS hyperlinks and 'Reference Sources' section. Removed the following ICD-10 code: C88.4; added the following ICD-10 code: C88.40, per CMS guidance.

Annually Reviewed Medical Policies without Changes

[MP-001-MC-PA Cataract Extraction \(including Complex Cataract Surgery\) \(L35091\)](#)

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

[MP-053-MC-PA Electrocardiographic Services \(NCD 20.15\)](#)

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

[MP-093-MC-PA Gastrointestinal Pathogen \(GIP\) Panels Utilizing Multiplex Nucleic Acid Amplification Techniques \(NAATs\) \(L38229\)](#)

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

[MP-089-MC-PA Hypoglossal Nerve Stimulation for the Treatment of Obstructive Sleep Apnea \(L38385\)](#)

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

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").