Important Provider Notice

HIGHMARK WHOLECARE

January 1, 2024

PA Medicare Policy Updates Effective February 1, 2024

An Update for Medicare Providers and Clinicians

Annually Reviewed Medical Policies with Changes

MP-096-MC-PA Implantable Continuous Glucose Monitors (I-CGM) (L38617)

Procedure code G0308 & G0309 have been deleted and therefore removed from this policy, per AMA guidance. Updated CMS hyperlinks and 'Reference Sources' section.

Annually Reviewed Medical Policies without Changes

MP-065-MC-PA Assessing Patient's Suitability for Electrical Nerve Stimulation Therapy (160.7.1 & 160.7)

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

MP-062-MC-PA Fecal Microbiota Transplant

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

MP-082-MC-PA Speech-Generating Devices (L33739)

No changes to clinical criteria. Updated CMS hyperlinks and '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").