April 2022 Bleeblast sm News Providers Can Use



Healthy Connections



FACILITIES

Policy Update: Inpatient Readmissions (Policy G-13001)

Effective July 1, 2022, when a member is readmitted within 30 days as part of a planned readmission and placed on a leave of absence, the admissions will be considered one admission, and only one DRG will be reimbursed.

To review the inpatient readmission reimbursement policy, visit <u>www.HealthyBlueSC.com</u> and select **Providers**.

PCPS

Quality Incentive Reminder: Well-Child

Primary care physicians (PCPs) can receive the \$60 incentive for each Healthy Blue child who receives a wellness exam that falls into the categories listed below.

Well-infant visit: Members who will turn 12 months to 15 months within the current year

CPT/HCPCS	Modifier	ICD-10
99381 – 99385, 99391 – 99395, 99461	EP	Z00.0X, Z00.1XX, Z00.X, Z02.X, Z02.71, Z02.79, Z02.8X
G0438 – G0439		

Well-child visit: Members who will turn 3 to 6 within the current year

CPT/HCPCS	Modifier	ICD-10
99381 – 99385, 99391 – 99395, 99461		Z00.0X, Z00.1XX, Z00.X, Z02.X, Z02.71, Z02.79, Z02.8X

Adolescent well-child visit: Members who will turn 12 to 20 within the current year

CPT/HCPCS	Modifier	ICD-10
99461, 99381 – 99385, 99391 – 99395	EP	Z00.0X, Z00.1XX, Z00.X, Z02.X, Z02.71, Z02.79, Z02.8X, Z02.9

The incentive should be billed on the same claim as the well-child exam. The G9153 should be filed on the line directly following the well-child exam code, and the diagnosis pointers for both must match.

- Date of Service: Date of the well-child exam
- CPT/HCPCS: G9153 Days/Units: 1 Billed Charges: \$60

Facilities

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PCPs

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Adult Outpatient Urology and Ophthalmology Surgery **Precertification Initiative**

Effective April 1, 2022, Healthy Blue will require outpatient urology and ophthalmology surgery procedures to be provided at an ambulatory surgery center (ASC) or provider office unless precertified at a hospital. Services that cannot be provided safely and effectively at a free-standing ASC or an office will be approved to be performed at the hospital.



Updates for Medications Billed Under the Medical Benefit

Effective for dates of service on and after June 1, 2022, the following medication codes billed on medical claims from current or new clinical criteria documents will require prior authorization.

Please note, inclusion of a national drug code on your medical claim is necessary for claim processing of drugs billed with a not otherwise classified (NOC) code.

Visit the <u>Clinical Criteria</u>* page to search for the specific clinical criteria in the chart.

Clinical criteria	HCPCS or CPT [®] code(s)	Drug name
ING-CC-0192	J1448	Cosela™
ING-CC-0193	J1305	Evkeeza®
ING-CC-0194	J0741	Cabenuva
ING-CC-0195	Q2055	Abecma™



Clinical Criteria Updates

On Nov. 19, 2021, Dec. 13, 2021, and Jan. 10, 2022, the Pharmacy and Therapeutics (P&T) Committee approved the following clinical criteria applicable to the medical drug benefit for Healthy Blue. These policies were developed, revised or reviewed to support clinical coding edits.

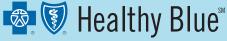
Visit the <u>Clinical Criteria</u>* page to search for specific policies. For questions or additional information, use this <u>email</u>.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations representative or call the Customer Care Center at **866-757-8286**.









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*Some links in this newsletter lead to third-party sites. Those organizations are solely responsible for the content and privacy policies on these sites.

The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information.

To report fraud, call our confidential Fraud Hotline at 877-725-2702. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email fraudres@scdhhs.gov.