May 2024: Medical Policies, Coding/Reimbursement

Select Health publishes the Policy Update Bulletin monthly with new, revised, and archived policy information as well as policy developments and related practice management tips. Policy updates are featured below and on page 2; there are no coding updates this month.

Questions? Contact Marcus.Call@selecthealth.org for information on content of a medical policy, Brandi.Luna@selecthealth.org for questions about coding and reimbursement policies, or your Provider Relations representative for any other questions.

Select Health Policy Updates

This update includes **no new policies.** There are **six** revised policies in this update (see Table 1 below and on the next page).

Policies listed in Table 1 are arranged alphabetically by title, with a link to the online specialty-based book and page number where the policy can be found (or to the policy itself if coding/reimbursement).

There is **one archived policy: Eating Disorders:** Inpatient (211), which was archived on 05/06/24; applicable InterQual criteria are now used for reviewing these claims.

Policies are also available on the current **Select Health Provider Portal** (secure login required).

Table 1. Revised Medical Policies (no changes to Coding/Reimbursement Policies this month)

Policy Title (Number)	Revision Date: Summary of Change (applies ONLY to Commercial plan policy unless summary text appears in BOLD)
Genetic Testing: Expanded Carrier Screening (452), see page 119 in the Genetic Testing booklet.	 05/14/2024: Clarified the following coverage and exclusion: "Select Health covers expanded carrier screening, only once per lifetime.* Select Health covers the individual five genes (CFTR, SMN1, HBB, HBA1, HBA2) recommended by the American College of Obstetricians and Gynecologists (ACOG) for carrier testing. Select Health does not cover the UNITY Carrier Screen as it does not align with the minimum gene panel recommendations for expanded carrier screening, per the American College of Medical Genetics and Genomics (ACMG) and Select Health guidelines; and could lead to duplication of appropriate testing." * Select Health will cover CPT 81443 (at least 15 genes [see code description below]) once per lifetime; and if appropriate, will also cover CPT 81412 (Ashkenazi panel, see code description below) once per lifetime.
CODING & REIMBURSEMENT: In-Network Coverage of Medical Services with an Out- of-Network Provider (124)	05/13/2024: Added distance guidelines for Colorado-based plans and Nevada-based Medicare plans



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Table 1. Revised Policies, Continued

Policy Title (Number)	Revision Date: Summary of Change (applies ONLY to Commercial plan policy unless summary text appears in BOLD)
Oral Appliances for Sleep Apnea (492), see page 32 in the <u>Durable Medical</u> <u>Equipment booklet</u> .	05/16/2024 : Added the following clarification regarding requirements listed in the policy: "Note: For purposes of this policy, apnea is defined as a cessation of airflow for at least 10 seconds with at least a 3% oxygen desaturation. Hypopnea is defined as an abnormal respiratory event lasting at least 10 seconds with at least a 30% reduction in thoraco-abdominal movement or airflow as compared to baseline, and with at least a 3% oxygen desaturation."
Percutaneous Transcatheter Closure for the Treatment of Atrial Septal Defects (ASD) and Patent Foramen Ovale (PFO) (174), see page 58 in the Cardiovascular booklet.	05/17/2024 : Clarified requirements in criterion #1: "Patient has a documented history of cryptogenic, clinically evident transient ischemic episode or cryptogenic stroke, which has been verified by an independent, qualified neurologic specialist documenting the PASCAL classification system and RoPE scores*."
Sleep Disorder Evaluation and Treatment (625), see page 47 in the Pulmonary booklet.	05/08/2024 : Changed minimum age requirement to qualify for a home sleep study in Section I, Criterion #A from 18 years to 15 years
Withdrawal Management (638), see page 40 in the Behavioral Health booklet.	04/26/2024 : Modified scores in Ambulatory Detoxification criteria section for Clinical Institute Withdrawal Assessment for Alcohol (CIWA) scale [16 or above] or the Clinical Opiate Withdrawal Scale (COWS) scale [36 or greater], which would prompt seeking treatment at a higher level of care

