

The Bulletin

This monthly bulletin includes recent changes to our medical policies and reimbursement policies. It is a supplement to our bimonthly provider newsletter, [Provider News](#). **Note:** Medication policy updates are published in *Provider News*.

Medical policies

Changes effective March 1, 2024

Allied Health

- Administrative Guidelines to Determine Dental vs Medical Services (#35)
 - Clarified criteria with no change to intent

Genetic Testing

- Expanded Molecular Testing of Cancers to Select Targeted Therapies (#83)
 - Added whole genome, whole exome and whole transcriptome testing of cancer tissue
- Whole Exome and Whole Genome Sequencing (#76)
 - Removed references to testing for cancer treatment selection, which will now be addressed in *Expanded Molecular Testing of Cancers to Select Targeted Therapies* (Genetic Testing #83)

Changes effective June 1, 2024

Laboratory

- Folate Testing (#79)
 - New medical policy

[View our Medical Policy Manual](#)

Join our medical policy discussion

We welcome your input and feedback as we draft our medical policies. [Join our email reviewer list](#). While we prefer to receive input as policies are developed, we also have a formal process that allows you to submit additional information, such as clinical trial results, that may warrant a policy review.

Recent updates and archived medical policies

[Recent updates and archived medical policies](#) may include revisions that will be published in the next issue of *The Bulletin*.

Reimbursement policies

Changes effective January 1, 2024

Administrative

- Virtual Care (#132)
 - Added HCPCS G2211 to reimbursable telehealth services to align with the Centers for Medicare & Medicaid Services' (CMS') additions to the 2024 reimbursement schedule when billed with an appropriate evaluation and management (E&M) code
 - Added new 2024 HCPCS codes G0017, G0018 and G0136 to reimbursable telehealth services
 - Updated the list of eligible provider types who may bill for covered telehealth to align with CMS's addition of licensed marriage and family therapists (LMFTs) and licensed mental health counselors (LMHCs)

Changes effective June 1, 2024

Medicine

- Maternity Care (#107)
 - Clarified that global codes may be appropriate when the same practice group provides the antepartum, delivery and postpartum care
 - Increased the antepartum period to 280 days; E&M services in this period are currently included in global reimbursement and are not separately reimbursable
 - Replaced "maternity delivery" with "date of delivery" in the global maternity package section

[View our Reimbursement Policy Manual](#)

Verify your provider information

Providing up-to-date and accurate information about the providers in each of our networks is critical for our members to access care and a compliance requirement for the Affordable Care Act (ACA).

Validating provider directory content

Please [follow these steps](#) to review the information about your practice every 90 days. **Please respond timely to any requests from us for verification of your directory data.**

If your clinic or facility submits provider rosters to us, please submit changes, corrections, additions or terminations immediately so we can update our directories as soon as possible. **Your roster must be validated and reviewed in its entirety at least once per quarter.**

We appreciate your assistance in keeping information about your practice up to date.

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