

NEW POLICY UPDATES - NOVEMBER 28, 2017: CLINICAL PAYMENT, CODING AND POLICY CHANGES

Effective for dates of service beginning November 28, 2017:

Diagnosis Code Guidelines-ICD10 Laterality- One of the unique attributes to the ICD-10-CM code set is that laterality has been built into code descriptions. Some ICD-10-CM codes specify whether the condition occurs on the left or right, or is bilateral. The CPT code modifier should be consistent with the ICD and line level diagnoses should not be conflicting.

Diagnosis Code Guidelines-ICD10-Excludes 1 Notes-Another of the unique attributes of the ICD-10-CM code set is the new concept of Excludes 1 Notes. An Excludes 1 Note indicates that the excluded code identified in the note should never be used at the same time as the code or code range listed above the Excludes 1 Note. An Excludes 1 Note is used to indicate when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition. These conditions are mutually exclusive code combinations.

Obstetrics and Gynecology-Genital Herpes Screening-According to the U.S. Preventive Services Task Force (USPSTF) and the American Academy of Family Physicians, routine serologic screening for genital herpes simplex virus infection in asymptomatic adolescents and adults (13 years or older), including those who are pregnant, is not recommended based on its high false-positive rate, potential psychosocial harms and evidence from randomized clinical trials that do not establish a benefit from preventive antiviral medication for an asymptomatic HSV-2 infection.

Obstetrics and Gynecology-Human Papilloma Virus (HPV) Testing-According to the American College of Obstetricians and Gynecologists (ACOG) and the U.S. Preventive Services Task Force (USPSTF), for women age 30 to 65, screening for Human Papilloma Virus infection combined with cytology every 5 years offers an appropriate balance of harms and benefits. More frequent screening has little additional benefit and significant harms associated with additional procedures for transient lesions.

Obstetrics and Gynecology- Bacterial Vaginosis Screening- According to the United States Preventive Services Task Force, American College of Obstetricians and Gynecologists, and Centers for Disease Control and Prevention, there is insufficient evidence to support screening for bacterial vaginosis in normal pregnancies for asymptomatic patients.

Ophthalmology- Special Ophthalmological Services- The American Medical Association defines special ophthalmologic procedures (including but not limited to gonioscopy, ophthalmoscopy, ophthalmic ultrasound etc.) as not routinely part of a comprehensive medical eye evaluation; rather, these procedures should be performed for a specific finding encountered during a history and physical examination.

Pain Management- Epidural Steroid Injections- According to the American Pain Society and the American Society of Anesthesiologists, epidural injection therapy is not effective for back pain without radiculopathy as there is insufficient evidence to support it.

Primary Care- Chest X-Ray for Tuberculosis Screening- According to the Infectious Diseases Society of America and the Centers for Disease Control, chest x-rays are not recommended as the initial screening test for detecting tuberculosis (TB) in asymptomatic patients. Chest x-rays are only recommended to rule out active TB in a person who has symptoms or in an asymptomatic person who has a positive skin or blood test.

Radiology- Radiological Examination Chest for Asthma- According to the National Institutes of Health and the American Academy of Family Physicians, a chest x-ray is not recommended for an individual with an uncomplicated asthma exacerbation as it has not been shown to alter the patient care.