

Georgia Medicaid

# *Policy Updates* July 2020

- Administrative
- Medical
- Reimbursement

## AT CARESOURCE, WE LISTEN TO OUR PROVIDERS, AND WE STREAMLINE OUR BUSINESS PRACTICES TO MAKE IT EASIER FOR YOU TO WORK WITH US.

We have worked to create a predictable cycle for releasing administrative, medical and reimbursement policies, so you know what to expect.

Check back each month for a consolidated network notification of policy updates from CareSource.

## HOW TO USE THIS NETWORK NOTIFICATION

- Reference the list of policy updates.
- Note the effective date and impacted plans for each policy.
- Click the hyperlinked policy title to open the webpage with the full policy.

## FIND OUR POLICIES ONLINE

To access all CareSource policies, visit [CareSource.com](https://www.caresource.com) > Providers > Tools & Resources > [Provider Policies](#). Select your plan and state, then the type of policy. Each policy page has an archive where you can find previous versions of policies.

## POLICY UPDATES

POLICY NAME & NUMBER	POLICY TYPE	EFFECTIVE DATE	PLAN	PRIOR AUTHORIZATION IMPACT?
<a href="#">Continuous Glucose Monitoring (CGM) MM-0223</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Breast Reduction Surgery MM-0253</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Screening and Diagnostic Mammography MM-0135</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Implantable Spinal Cord Stimulator MM-0812</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Implantable Spinal Cord Stimulator PY-1075</a>	REIMBURSEMENT	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY

## POLICY UPDATES

POLICY NAME & NUMBER	POLICY TYPE	EFFECTIVE DATE	PLAN	PRIOR AUTHORIZATION IMPACT?
<a href="#">Trigger Point Injections MM-0221</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Trigger Point Injections PY-1099</a>	REIMBURSEMENT	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY
<a href="#">Epidural Steroid Injections MM-0217</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Sacroiliac Joint Procedures MM-0215</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	REVISION NO PA REQUIREMENT CHANGE
<a href="#">Sacroiliac Joint Procedures PY-1091</a>	REIMBURSEMENT	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY
<a href="#">Sacroiliac Joint Fusion MM-1040</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY

## POLICY UPDATES

POLICY NAME & NUMBER	POLICY TYPE	EFFECTIVE DATE	PLAN	PRIOR AUTHORIZATION IMPACT?
<a href="#">Sacroiliac Joint Fusion PY-1216</a>	REIMBURSEMENT	SEPTEMBER1, 2020	MEDICAID	NEW POLICY
<a href="#">Facet Joint Interventions MM-0974</a>	MEDICAL	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY
<a href="#">Facet Joint Interventions PY-1162</a>	REIMBURSEMENT	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY
<a href="#">Pass-Through Billing AD-0809</a>	ADMINISTRATIVE	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY
<a href="#">Overpayment Recovery PY-1112</a>	REIMBURSEMENT	SEPTEMBER 1, 2020	MEDICAID	NEW POLICY