CareSource | NETWORK Notification

Notice Date: January 1, 2024
To: Georgia Medicaid Providers
From: CareSource
Subject: TurningPoint 2024 Cardiac and Musculoskeletal Policy Update

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Summary
CareSource has partnered with TurningPoint to cover cardiac and musculoskeletal services for our CareSource Georgia Medicaid members.

Our goal is to keep you informed with timely information about our cardiac and musculoskeletal services updates and changes. As changes occur and as needs arise, we issue network notifications to our providers.

This notification is intended to provide you notification of changes to the policies listed below. The policies can be accessed via TurningPoint's website at www.myturningpoint-healthcare.com, located under clinical policies.

Policies

Policy Name	Plans	Effective Date
Automated Implantable Cardioverter Defibrillator – CA-1001	Georgia Medicaid	04/01/2024
Leadless Pacemaker – CA-1002	Georgia Medicaid	04/01/2024
Pacemaker – CA-1003	Georgia Medicaid	04/01/2024
Revision or Replacement of Implanted Cardiac Device – CA-1004	Georgia Medicaid	04/01/2024
Coronary Artery Bypass Grafting (Non-emergent) – CA-1005	Georgia Medicaid	04/01/2024
Coronary Angioplasty and Stenting – CA-1006	Georgia Medicaid	04/01/2024
Non-Coronary Angioplasty and Endovascular Stent – CA-1007	Georgia Medicaid	04/01/2024
Implantable Cardiac Monitoring – CA-1008	Georgia Medicaid	04/01/2024
Wearable Cardioverter Defibrillator – CA-1009	Georgia Medicaid	04/01/2024

Percutaneous Left Atrial Appendage Closure – CA-1010	Georgia Medicaid	04/01/2024
Valve Replacement – CA-1011	Georgia Medicaid	04/01/2024
Peripheral Arterial Revascularization – CA-1012	Georgia Medicaid	04/01/2024
Assistants at Surgery – GN-1001	Georgia Medicaid	04/01/2024
Medical Record Documentation – GN-1002	Georgia Medicaid	04/01/2024
Site of Service – GN-1004	Georgia Medicaid	04/01/2024
Total Hip Replacement – OR-1001	Georgia Medicaid	04/01/2024
Total Knee Replacement – OR-1002	Georgia Medicaid	04/01/2024
Lumbar Disc Replacement – OR-1003	Georgia Medicaid	04/01/2024
Lumbar Spinal Fusion – OR-1004	Georgia Medicaid	04/01/2024
Bone Morphogenetic Protein – OR-1005	Georgia Medicaid	04/01/2024
Cervical Disc Replacement – OR-1006	Georgia Medicaid	04/01/2024
Cervical Laminectomy, Laminoplasty, and Discectomy – OR-1007	Georgia Medicaid	04/01/2024
Lumbar Laminectomy, Discectomy, and Laminotomy – OR-1008	Georgia Medicaid	04/01/2024
Sacroiliac Joint Fusion – OR-1009	Georgia Medicaid	04/01/2024
Thoracic Laminectomy and/or Thoracic Discectomy – OR-1010	Georgia Medicaid	04/01/2024
Thoracic Spinal Fusion – OR-1011	Georgia Medicaid	04/01/2024
Cervical Spinal Fusion – OR-1012	Georgia Medicaid	04/01/2024
ACL Repair – OR-1013	Georgia Medicaid	04/01/2024
Treatment of Osteochondral Defects – OR-1014	Georgia Medicaid	04/01/2024
Spinal Cord Stimulator – OR-1015	Georgia Medicaid	04/01/2024
Revision of Total Hip Replacement – OR-1016	Georgia Medicaid	04/01/2024
Total Knee Replacement – OR-1017	Georgia Medicaid	04/01/2024
Acromioplasty and Rotator Cuff Repair – OR-1018	Georgia Medicaid	04/01/2024
Shoulder Fusion – OR-1019	Georgia Medicaid	04/01/2024
Surgery for Spinal Deformity – OR-1020	Georgia Medicaid	04/01/2024
Total Ankle Replacement – OR-1021	Georgia Medicaid	04/01/2024
Elbow Replacement – OR-1022	Georgia Medicaid	04/01/2024
Shoulder Replacement (Total, Hemi, Reverse, and Revision) – OR-1023	Georgia Medicaid	04/01/2024
Vertebral Augmentation (Kyphoplasty and Vertebroplasty) – OR-1024	Georgia Medicaid	04/01/2024
Femoroacetabular Arthroscopy – OR-1025	Georgia Medicaid	04/01/2024

Hip Resurfacing – OR-1026	Georgia Medicaid	04/01/2024
Meniscal Allograft Transplantation – OR-1027	Georgia Medicaid	04/01/2024
Partial Knee Replacement – OR-1028	Georgia Medicaid	04/01/2024
Knee Arthroscopy – OR-1029	Georgia Medicaid	04/01/2024
Ankle Fusion – OR-1030	Georgia Medicaid	04/01/2024
Hip Arthroscopy – OR-1031	Georgia Medicaid	04/01/2024
Wrist fusion – OR-1032	Georgia Medicaid	04/01/2024
Wrist Replacement – OR-1033	Georgia Medicaid	04/01/2024
Implantable Infusion Pumps – OR-1034	Georgia Medicaid	04/01/2024
Computer Assisted Navigation – OR-1035	Georgia Medicaid	04/01/2024
Shoulder Procedures – OR-1036	Georgia Medicaid	04/01/2024
Spinal Devices – OR-1037	Georgia Medicaid	04/01/2024
Sacral Decompression – OR-1038	Georgia Medicaid	04/01/2024
Thermal Intradiscal Procedures – OR-1039	Georgia Medicaid	04/01/2024
Manipulation Under Anesthesia – OR-1040	Georgia Medicaid	04/01/2024
Hip Osteotomy – OR-1042	Georgia Medicaid	04/01/2024
MPFL Reconstruction – OR-1043	Georgia Medicaid	04/01/2024
Osteotomies for Spinal Deformity – OR-1045	Georgia Medicaid	04/01/2024
Bone Graft Substitutes – OR-1046	Georgia Medicaid	04/01/2024
Orthopedic Applications of Stem Cell Therapy – OR-1047	Georgia Medicaid	04/01/2024
Percutaneous Tenotomy - OR-1049	Georgia Medicaid	04/01/2024
Hip Core Decompression – OR-1050	Georgia Medicaid	04/01/2024