Ohio Medicaid, Marketplace, and MyCare

Policy Updates July 2023

- Administrative
- Medical
- Reimbursement

The following policies are effective Aug. 1, 2023 & Sept. 1, 2023





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** > Providers > Tools & Resources > <u>Provider Policies</u>. 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?
Acupuncture Services PY-0152	REIMBURSEMENT	SEPT. 1, 2023	MEDICAID	REVISION
Diabetes Self- Management Training AD-1109	ADMINISTRATIVE	SEPT. 1, 2023	MEDICAID	REVISION
Medical Record Documentation Standards for Practitioner AD-0753	ADMINISTRATIVE	SEPT. 1, 2023	MEDICAID	REVISION
Readmission– Behavioral Health AD-1018	ADMINISTRATIVE	SEPT. 1, 2023	MEDICAID	REVISION



POLICY UPDATES

POLICY NAME & NUMBER	POLICY TYPE	EFFECTIVE DATE	PLAN	PRIOR AUTHORIZATION IMPACT?
Intraosseous Basivertebral Nerve Ablation MM-1376	MEDICAL	SEPT. 1, 2023	MARKETPLACE PLANS	REVISION
Mechanical Stretching Devices MM-1382	MEDICAL	SEPT. 1, 2023	MARKETPLACE PLANS	REVISION
Medical Record Documentation Standards for Practitioner AD-1243	ADMINISTRATIVE	SEPT. 1, 2023	MARKETPLACE PLANS	REVISION
Positive Airway Pressure Devices for Pulmonary Disorders MM-1323	MEDICAL	SEPT. 1, 2023	MARKETPLACE PLANS	REVISION



POLICY UPDATES

POLICY NAME & NUMBER	POLICY TYPE	EFFECTIVE DATE	PLAN	PRIOR AUTHORIZATION IMPACT?
Medical Necessity Determinations AD-0751	ADMINISTRATIVE	AUG. 1, 2023	MYCARE	REVISION