

Provider Network Fax Blast

Friday, August 17, 2018



2 Executive Park Drive
Bedford, NH 03110

New Payment and Clinical Policies *Effective October 15, 2018*

The following new policies will be applied as medical claims reimbursement edits with our claims adjudication system. These are in addition to all other reimbursement processes that NH Healthy Families & Ambetter from NH Healthy Families currently employs.

The effective date for the below policies is **October 15, 2018**.

Policy Number	Policy Name	Description	Line of Business (LOB)
CC.PP.063	Place of Service Mismatch	The purpose of this policy is to identify instances in which a procedure code is billed with an inappropriate place of service per CPT/HCPCS guidelines.	Medicaid, Marketplace (Ambetter)
CC.PP.061	Non-obstetrical Pelvic and Transvaginal Ultrasounds	The purpose of this policy is to define payment criteria for multiple non-obstetrical ultrasound images in a single session.	Medicaid, Marketplace (Ambetter)
CC.MP.161	Monitored Anesthesia Care for Gastrointestinal Endoscopy	This policy outlines the indications for when Monitored Anesthesia Care is considered medically necessary during Gastrointestinal Endoscopy.	Medicaid, Marketplace (Ambetter)

These policies are developed based on medical literature and research, industry standards and guidelines as published and defined by the American Medical Association's Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS), and public domain specialty society guidance.

Visit NHhealthyfamilies.com to find NH Healthy Families Payment and Clinical Policies. Policies can be found on the Provider Resources page under Manuals, Forms & Resources.

Please contact Provider Services at **1-866-769-3085** with any questions.

Sincerely,

NH Healthy Families