



# Code Review Payment Policy

## **Policy**

Fallon Community Health Plan (FCHP) will review and assign the appropriate coverage and determine prior authorization requirements for all new and revised industry standard code sets, including but not limited to CPT, HCPCS, ICD, DRG, and Revenue codes. FCHP will notify all contracted providers of this determination via the Connection newsletter and on the FCHP Web site in the *Provider Manual*.

Consistent with industry standards, FCHP will update coverage determinations as necessary unless otherwise directed by CMS.

## **Definition**

This policy applies to the standard code set review process to ensure proper coverage assignments for all new and revised codes in a calendar year. Deleted codes will be deactivated and not be reimbursed for dates of service after the deletion date.

## **Benefits application**

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care
- Fallon Senior Plan™
- Fallon Senior Plan Preferred
- Summit ElderCare®
- NaviCare®

## **Reimbursement**

Reimbursement will be according to contract.

## **Referral/notification/prior authorization requirements**

All new procedure codes will require prior authorization until a formal review is performed by FCHP.

## **Billing/coding guidelines**

FCHP will use current industry standard codes throughout their processing systems.

The Health Insurance Portability & Accountability Act (HIPAA) Transaction & Code Set Rule requires providers to use the codes that are valid at the time the service is provided. FCHP adheres to HIPAA standards.

Providers must only use industry-standard code sets.

## **Place of service**

This policy applies to all services rendered in any place of service to FCHP members.

## **Policy history**

Origination date:	11/23/03
Previous revision date(s):	08/04/04, 08/03/05, 07/19/06, 09/12/07 01/1/09 – Add statement that providers may only use industry standard codes; retire Home Grown Codes Payment Policy.
Connection date & details:	January 2011 - Changed name Procedure Code Review to Code Review and expanded discussion to include all standard code sets.

*This payment policy has been developed to provide information regarding general billing, coding and documentation guidelines for FCHP. Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member individual benefit plans may apply and this policy is not a guarantee of payment. FCHP reserves the right to apply this payment policy to all FCHP companies and subsidiaries.*