

PROVIDER Update



Health Net®

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Health Net Implements New Clinical Payment Policies

In order to improve affordability for our members and to encourage appropriate utilization of resources and the highest quality of treatment, Health Net of California, Inc., Health Net Community Solutions, Inc. and Health Net Life Insurance Company (Health Net) are implementing clinical payment policies that will guide how claims for certain services are adjudicated and paid. Health Net will institute these policies to provide clinically based rule content to evaluate claims against clinical payment policies to ensure accurate reimbursement. This is in addition to all other reimbursement processes that Health Net currently employs.

The policies that dictate the coding and billing rules applied are based on industry standards and guidelines as published and defined in the Current Procedural Terminology (CPT), Centers for Medicare & Medicaid Services (CMS) and public domain specialty society edits, unless specifically addressed in the fee-for-service provider manual published by California or in regulations.

The policies listed in the table on page 2 are effective as of September 14, 2018. The table includes a list of the policies, including the policy number, policy title, a brief description, and impacted lines of business.

These policies can be accessed via Health Net's provider operations manual online at the following sites:

- Health Net providers serving individual Medicare Advantage (MA) and Individual Family Plan (IFP) members can access the Health Net provider operations manual through the new Health Net provider website at provider.healthnetcalifornia.com. Select product type; on the Home screen, under Welcome, select *Resources > Contractual > Go to the Provider Library*. Once in the Provider Library, go to *Operations Manuals > Claims Coding Policies > Clinical Payment Policies*.
- Health Net providers serving employer group HMO, Point of Service (POS), HSP, PPO, and EPO members; MA employer group members, and Medi-Cal members can access the Health Net provider operations manual through the original Health Net provider website at provider.healthnet.com under *Working with Health Net > Contractual > Policy Library > Go to the Provider Library*. Once in the Provider Library, go to *Operations Manuals > Claims Coding Policies > Clinical Payment Policies*.

Relevant sections of Health Net's provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library, located on Health Net's provider website as listed in the right-hand column.

If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center by email at provider_services@healthnet.com within 60 days, by telephone or through the Health Net provider website as listed in the right-hand column.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

provider_services@healthnet.com

EnhancedCare PPO (IFP)

1-844-463-8188

provider.healthnetcalifornia.com

EnhancedCare PPO (SBG)

1-844-463-8188

provider.healthnet.com

Health Net Employer Group HMO, POS, HSP, PPO, & EPO

1-800-641-7761

provider.healthnet.com

IFP – CommunityCare HMO, PPO, PureCare HSP, PureCare One EPO

1-888-926-2164

provider.healthnetcalifornia.com

Medicare (individual)

1-800-929-9224

provider.healthnetcalifornia.com

Medicare (employer group)

1-800-929-9224

provider.healthnet.com

Medi-Cal – 1-800-675-6110

provider.healthnet.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com

healthnet.com

fax 1-800-937-6086

CLINICAL PAYMENT POLICIES

Policy Number	Policy	Policy Description	Line of Business
CP.MP.152	Measurement of Serum 1,25-dihydroxyvitamin D	This policy addresses when measurement of 1,25(OH)2D is appropriate and medically necessary	Medicare, Medi-Cal, Cal MediConnect, Commercial*
CP.MP.153	Helicobacter Pylori Serology Testing	This policy outlines why serologic antibody testing cannot distinguish between an active infection and a past infection, and why alternative, non-invasive testing methods (for example, the urea breath test and stool antigen test) exist for detecting the presence of <i>H. pylori</i>	Medicare, Medi-Cal, Cal MediConnect, Commercial
CP.MP.154	Thyroid Hormones and Insulin Testing in Pediatrics	This policy discusses the medical necessity requirements for the testing of thyroid stimulating hormone (TSH), thyroxine (T4) as well as by insulin	Medi-Cal, Commercial
CP.MP.155	EEG in the Evaluation of Headache	This policy addresses the use of electroencephalography (EEG) in the diagnostic evaluation of headache	Medicare, Medi-Cal, Cal MediConnect, Commercial
CP.MP.156	Cardiac Biomarker Testing for Acute Myocardial Infarction	This policy discusses the medical necessity requirements for testing of cardiac biomarkers	Medicare, Medi-Cal, Cal MediConnect, Commercial
CP.MP.157	25-hydroxyvitamin D Testing in Children and Adolescents	This policy outlines the recommendations against universal screening for vitamin D deficiency in healthy children	Medi-Cal, Commercial

*Commercial includes HMO, POS, HSP, PPO, EPO and products offers through Covered California.