Texas Medicaid Claims Editing Enhancements August 6, 2023

6/6/2023

What's happening

Effective August 1, 2023, Blue Cross and Blue Shield of Texas (BCBSTX) will enhance our claims editing and review process to help ensure accurate coding and reimbursement of services. Below is a list of policies that will be affected once the new edits go into effect.

Medicaid – Global Surgery Policy	
Topic	Description
Modifier (24) with E/M Services During	Deny E/M services when billed with modifier 24 and a minor surgical
the Postoperative Period of Minor	procedure with a 10-day postoperative period has been billed in the
Procedures	previous 10 days and the E/M service has a primary diagnosis associated
	to the 10-day medical or surgical service. (CMS)

Medicaid – Neurology Policy	
Topic	Description
Polysomnography and Sleep Studies	Deny 95782, 95783, 95808, 95810 or 95811 (Polysomnography) when
	billed in any combination more than one unit per date of service by any
	provider.

Questions

Providers, for questions or additional information, please:

- Contact our BCBSTX Medicaid Provider Service Center at 1-877-560-8055
- Contact your BCBSTX Medicaid Provider Network Representative at 1-855-212-1615
- Submit via email to <u>TexasMedicaidNetworkDepartment@bcbstx.com</u>

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

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