















Policy Revisions: Allergy Testing and Therapy and Testing for Select Genitourinary Conditions

March 22, 2023

Dear Provider,

Thank you for your continued partnership with SilverSummit Healthplan. As you know, we continually review and update our payment and utilization policies to ensure that they are designed to comply with industry standards while delivering the best patient experience to our members. We are writing today to inform you of the revision to existing policies SilverSummit Healthplan will be implementing effective **05/15/2023**.

Policy Number	Policy Name	Policy Description	Lines of Business
CP.MP.100	Allergy Testing and Therapy	Change codes 86160, 86161 and 86162 from not payable to NOT payable only when billed with the following diagnosis codes:, B44.81, H10.01* through H10.45, J30.1 through J30.9, J30.0, J31.0, J45.2* through J45.998, L20.84, L20.89, L20.9, L23.0 through L23.9*, L25.1 through L25.9, L27.0 through L27.9, L50.0, L50.1, L50.6, L50.8, L50.9, L56.1, L56.2, L56.3, R06.2, T36.0X5A through T50.995S, T63.001* - T63.94*, T78.00X* through T78.1XXS, T78.49XA through T78.49XS, T80.52XA through T80.52XS, T88.6XXA through T88.6XXS, Z88.0 through Z88.9, Z91.010 through Z91.018, Add the following diagnosis codes as payable with 86003, 86005, 86008, 95004, 95017, 95018, 95024, 95027 and 95028. L20.0, L20.81-L20.83, L24.9, L30.2.	Medicaid Marketplace
		Add CPT 86001 as NOT payable.	
CP.MP.97	Testing for Select Genitourinary Conditions	Added 0330U and 0352U as not med nec for members over age 13 (new code for July '22 with no utilization/cost data).	Medicaid Marketplace Medicare
		Changed matching requirements for ICD-10 B37.3 to apply to B37.31 and B37.32 which together now replace B37.3. There will be no savings change from this edit.	
		Changed CPT 87481 from not medically necessary in any circumstance to not med nec when paired with the following dx codes, and only applied to members 13 years and over. Required the same dx code matching for new code 0353U (with no utilization/cost data): B37.31, B37.32, L29.2, L29.3, N39.0,N72, N76.0, N76.1, N76.2, N76.3, N76.81, N76.89, N77.1, N89.8, N89.9, N90.89, N90.9, N91.0 –N91.5, N92.0, N93.0, N93.8, N93.9, N94.3, N94.4 – N94.6, N94.89, N94.9, O09.00-O09.03, O09.10-O09.13, O09.A0-O09.A3, O09.211-O09. 219,O09. 291-O09. 299,O09.30-O09.33,O09. 40-O09.43, O09.511-O09.519, O09.521- O09. 529, O09.611-O09.619, O09.621-O09.629, O09.70-O09.73, O09.811-O09.819, O09.821-O09.829, O09.891-O09.899, O09.90-O09.93, O23.511 – O23.93, Z00.00,Z00.8,Z01.419,Z11.3,Z11.51,Z22.330,Z23,Z30.011 – Z30.019,Z30.02, Z30.09,Z30.40 – Z34.93, Z36.0-Z36.5, Z36.81-Z36.9, Z38.00 – Z34.83, Z34.90 – Z34.93, Z36.0-Z36.5, Z36.81-Z36.9, Z38.00 – Z38.01, Z38.30 – Z38.31, Z38.61 – Z38.69, Z39.0 – Z39.2, Z3A.00 – Z3A.49, Z72.51 – Z72.53, Z86.19, Z97.5	

For detailed information about these policies, please refer to our website at www.silversummithealthplan.com. And for questions about this or any of our payment policies, please don't hesitate to reach out to our Provider Services team at 1.844.366.2880.

Sincerely, SilverSummit Healthplan