

Effective January 1, 2018, MVP Health Care<sup>®</sup> (MVP) is updating some reimbursement policies as outlined below. These policy changes will apply to all providers who are performing these services and procedures. Additional detail will be available regarding these policies in the *MVP Provider Resource Manual* (PRM) that will be published on 12/1/17. The MVP PRM can be found online at [mvphealthcare.com/providers](http://mvphealthcare.com/providers). Log in with your username and password and then select *Online Resources*.

### **Multiple Endoscopies**

Reimbursement for additional gastrointestinal procedures that are identified for multiple endoscopy reduction in Medicare's RBRVS fee schedule will change. The endoscopy with the highest RVU will pay according to the provider fee schedule. Reimbursement for additional procedures within the same endoscopy family is included in the reimbursement for the procedure with the highest RVU.

### **Chronic Care Management – Medicare Only**

Currently MVP reimburses for CPT code 99490 – Chronic Care Management Services performed by a physician. MVP will no longer reimburse separately for these services. The services provided for chronic care management are included in the reimbursement of other services paid to providers. The Chronic Care Management Payment Policy will be archived effective 1/1/18.

### **Unlisted Code Policy**

In order to consider reimbursement for an unlisted code, it is the provider's responsibility to submit medical records for review within contracted timeframes. Providers can submit records at the time of the claim submission or, upon denial. Providers can submit medical records via the electronic Claim Adjustment Request Form (CARF) found online at [mvphealthcare.com/providers](http://mvphealthcare.com/providers). Log in with your username and password, the MVP CARF can be found after the log in.

**If you have any questions with respect to this notice,  
please contact your Professional Relations Representative.**

