

MedStar Health, Inc.

POLICY AND PROCEDURE MANUAL

Policy Number: MP.138.MH
Last Review Date: 11/08/2018
Effective Date: 01/01/2019

MP.138.MH – Oral Maxillofacial Prosthesis

This policy applies to the following lines of business:

- ✓ MedStar Employee (Select)
- ✓ MedStar CareFirst PPO

MedStar Health considers **Oral Maxillofacial Prostheses** medically necessary for the following indications:

Mandibular resection prosthesis is indicated when a portion of the mandible is missing or removed due to trauma or ablative surgery.

NOTE: Other prostheses, such as orbital and auricular, may also be needed following this type of surgery. Interim restorative supports such as oral surgical splints and obturator prostheses will be covered within the setting of a comprehensive and documented treatment plan. Maxillary and mandibular prostheses are frequently necessary for the restoration of function, as neither functions in the absence of an opposing surface.

Implants, which could be considered dental, but are being inserted to secure, attach or support the maxillofacial prosthesis will be covered when the prosthesis is to be used secondary to maxillofacial surgery or repair of traumatic injury.

NOTE: Use CPT code 21299 to bill the implants with an explanation of the intended use. Include the dates of trauma or tumor biopsy/resection, dates of radiation treatment and other pertinent medical history.

Oral maxillofacial prostheses used in the treatment of obstructive sleep apnea (OSA) will be covered when specifically fashioned to the needs and measurements of individual patients when used to treat essential sleep apnea and obstructive sleep apnea.

NOTE: Use CPT Code 21085 to represent this prosthesis and the work to develop it.

Background

More than 50% of maxillofacial injuries are in conjunction with multi-system trauma injuries. Motor vehicle accidents and assaults are the two most common causes of fractures to this region. Trauma to this area is of particular concern due to the importance of the sensory systems within the face.

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

Codes: CPT HCPCS

Code	Description
21076	Prepare face/oral prosthesis
21077	Prepare face/oral prosthesis
21079	Prepare face/oral prosthesis
21080	Prepare face/oral prosthesis
21081	Prepare face/oral prosthesis
21082	Prepare face/oral prosthesis
21083	Prepare face/oral prosthesis
21084	Prepare face/oral prosthesis
21085	Prepare face/oral prosthesis * <i>(use this code f for treatment of OSA)</i>
21086	Prepare face/oral prosthesis
21087	Prepare face/oral prosthesis
21088	Prepare face/oral prosthesis
21089	Prepare face/oral prosthesis
21299	Cranio/maxillofacial surgery

ICD-10 Codes for codes 21076, 21077, 21079, 21080, 21081, 21082, 21083, 21084, 21085, 21086, 21087 and 21088:

C00.0	Malignant neoplasm of external upper lip
C00.1	Malignant neoplasm of external lower lip
C00.2	Malignant neoplasm of external lip, unspecified
C00.3	Malignant neoplasm of upper lip, inner aspect
C00.4	Malignant neoplasm of lower lip, inner aspect
C00.5	Malignant neoplasm of lip, unspecified, inner aspect
C00.6	Malignant neoplasm of commissure of lip, unspecified
C00.8	Malignant neoplasm of overlapping sites of lip
C00.9	Malignant neoplasm of lip, unspecified
C01	Malignant neoplasm of base of tongue
C02.0	Malignant neoplasm of dorsal surface of tongue
C02.1	Malignant neoplasm of border of tongue
C02.2	Malignant neoplasm of ventral surface of tongue
C02.8	Malignant neoplasm of overlapping sites of tongue
C03.0	Malignant neoplasm of upper gum
C03.1	Malignant neoplasm of lower gum

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
Last Review Date: 11/08/2018
Effective Date: 01/01/2019

C03.9	Malignant neoplasm of gum, unspecified
C04.0	Malignant neoplasm of anterior floor of mouth
C04.1	Malignant neoplasm of lateral floor of mouth
C04.8	Malignant neoplasm of overlapping sites of floor of mouth
C05.0	Malignant neoplasm of hard palate
C05.1	Malignant neoplasm of soft palate
C05.2	Malignant neoplasm of uvula
C05.8	Malignant neoplasm of overlapping sites of palate
C05.9	Malignant neoplasm of palate, unspecified
C06.0	Malignant neoplasm of cheek mucosa
C06.1	Malignant neoplasm of vestibule of mouth
C06.2	Malignant neoplasm of retromolar area
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth
C08.9	Malignant neoplasm of major salivary gland, unspecified
C09.0	Malignant neoplasm of tonsillar fossa
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)
C09.8	Malignant neoplasm of overlapping sites of tonsil
C09.9	Malignant neoplasm of tonsil, unspecified
C10.0	Malignant neoplasm of vallecula
C10.1	Malignant neoplasm of anterior surface of epiglottis
C10.2	Malignant neoplasm of lateral wall of oropharynx
C10.3	Malignant neoplasm of posterior wall of oropharynx
C10.4	Malignant neoplasm of branchial cleft
C10.8	Malignant neoplasm of overlapping sites of oropharynx
C11.0	Malignant neoplasm of superior wall of nasopharynx
C11.1	Malignant neoplasm of posterior wall of nasopharynx
C11.2	Malignant neoplasm of lateral wall of nasopharynx
C11.3	Malignant neoplasm of anterior wall of nasopharynx
C11.8	Malignant neoplasm of overlapping sites of nasopharynx
C12	Malignant neoplasm of pyriform sinus
C13.0	Malignant neoplasm of postcricoid region
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect
C13.2	Malignant neoplasm of posterior wall of hypopharynx
C13.8	Malignant neoplasm of overlapping sites of hypopharynx

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
Last Review Date: 11/08/2018
Effective Date: 01/01/2019

C14.0	Malignant neoplasm of pharynx, unspecified
C14.2	Malignant neoplasm of Waldeyer's ring
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx
C30.0	Malignant neoplasm of nasal cavity
C30.1	Malignant neoplasm of middle ear
C31.0	Malignant neoplasm of maxillary sinus
C31.1	Malignant neoplasm of ethmoidal sinus
C31.2	Malignant neoplasm of frontal sinus
C31.3	Malignant neoplasm of sphenoid sinus
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses
C31.9	Malignant neoplasm of accessory sinus, unspecified
C32.0	Malignant neoplasm of glottis
C32.1	Malignant neoplasm of supraglottis
C32.2	Malignant neoplasm of subglottis
C32.3	Malignant neoplasm of laryngeal cartilage
C32.8	Malignant neoplasm of overlapping sites of larynx
C32.9	Malignant neoplasm of larynx, unspecified
C41.0	Malignant neoplasm of bones of skull and face
C41.1	Malignant neoplasm of mandible
C43.0	Malignant melanoma of lip
C43.10	Malignant melanoma of unspecified eyelid, including canthus
C43.11	Malignant melanoma of right eyelid, including canthus
C43.12	Malignant melanoma of left eyelid, including canthus
C43.30	Malignant melanoma of unspecified part of face
C43.31	Malignant melanoma of nose
C43.39	Malignant melanoma of other parts of face
C43.4	Malignant melanoma of scalp and neck
C43.8	Malignant melanoma of overlapping sites of skin
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck
C69.50	Malignant neoplasm of unspecified lacrimal gland and duct
C69.51	Malignant neoplasm of right lacrimal gland and duct
C69.52	Malignant neoplasm of left lacrimal gland and duct
C69.60	Malignant neoplasm of unspecified orbit
C69.61	Malignant neoplasm of right orbit

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

C69.62	Malignant neoplasm of left orbit
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck
D03.0	Melanoma in situ of lip
D03.10	Melanoma in situ of unspecified eyelid, including canthus
D03.11	Melanoma in situ of right eyelid, including canthus
D03.12	Melanoma in situ of left eyelid, including canthus
D03.30	Melanoma in situ of unspecified part of face
D03.39	Melanoma in situ of other parts of face
C69.61	Malignant neoplasm of right orbit
C69.62	Malignant neoplasm of left orbit
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck
D03.0	Melanoma in situ of lip
D03.10	Melanoma in situ of unspecified eyelid, including canthus
D03.11	Melanoma in situ of right eyelid, including canthus
D03.12	Melanoma in situ of left eyelid, including canthus
D03.30	Melanoma in situ of unspecified part of face
D03.39	Melanoma in situ of other parts of face
D03.4	Melanoma in situ of scalp and neck
D03.8	Melanoma in situ of other sites
D09.20	Carcinoma in situ of unspecified eye
D09.21	Carcinoma in situ of right eye
D09.22	Carcinoma in situ of left eye
D10.1	Benign neoplasm of tongue

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

D10.2	Benign neoplasm of floor of mouth
D10.30	Benign neoplasm of unspecified part of mouth
D10.39	Benign neoplasm of other parts of mouth
D10.4	Benign neoplasm of tonsil
D10.5	Benign neoplasm of other parts of oropharynx
D10.6	Benign neoplasm of nasopharynx
D10.7	Benign neoplasm of hypopharynx
D10.9	Benign neoplasm of pharynx, unspecified
D11.0	Benign neoplasm of parotid gland
D11.7	Benign neoplasm of other major salivary glands
D11.9	Benign neoplasm of major salivary gland, unspecified
D14.0	Benign neoplasm of middle ear, nasal cavity and accessory sinuses
D22.0	Melanocytic nevi of lip
D23.0	Other benign neoplasm of skin of lip
D31.60	Benign neoplasm of unspecified site of unspecified orbit
D31.61	Benign neoplasm of unspecified site of right orbit
D31.62	Benign neoplasm of unspecified site of left orbit
D43.3	Neoplasm of uncertain behavior of cranial nerves
D43.8	Neoplasm of uncertain behavior of other specified parts of central nervous system
D43.9	Neoplasm of uncertain behavior of central nervous system, unspecified
H05.021	Osteomyelitis of right orbit
H05.022	Osteomyelitis of left orbit
H05.023	Osteomyelitis of bilateral orbits
H05.029	Osteomyelitis of unspecified orbit
H05.30	Unspecified deformity of orbit
H05.50	Retained (old) foreign body following penetrating wound of unspecified orbit
H05.51	Retained (old) foreign body following penetrating wound of right orbit
H05.52	Retained (old) foreign body following penetrating wound of left orbit
H05.53	Retained (old) foreign body following penetrating wound of bilateral orbits
H05.89	Other disorders of orbit
H44.89	Other disorders of globe
J95.01	Hemorrhage from tracheostomy stoma
J95.03	Malfunction of tracheostomy stoma
J95.04	Tracheo-esophageal fistula following tracheostomy
J95.09	Other tracheostomy complication

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

K09.0	Developmental odontogenic cysts
K09.1	Developmental (nonodontogenic) cysts of oral region
M27.0	Developmental disorders of jaws
M27.1	Giant cell granuloma, central
M27.2	Inflammatory conditions of jaws
M27.3	Alveolitis of jaws
M27.40	Unspecified cyst of jaw
M27.49	Other cysts of jaw
M27.8	Other specified diseases of jaws
M27.9	Disease of jaws, unspecified
M30.1	Polyarteritis with lung involvement [Churg-Strauss]
M31.2	Lethal midline granuloma
M31.30	Wegener's granulomatosis without renal involvement
M31.31	Wegener's granulomatosis with renal involvement
M85.9	Disorder of bone density and structure, unspecified
M87.08	Idiopathic aseptic necrosis of bone, other site
M87.180	Osteonecrosis due to drugs, jaw
M89.18	Physeal arrest, other site
M89.9	Disorder of bone, unspecified
M94.9	Disorder of cartilage, unspecified
Q35.1 - Q35.9-	Cleft hard palate - Cleft palate, unspecified
Q37.0 - Q37.9-	Cleft hard palate with bilateral cleft lip - Unspecified cleft palate with unilateral cleft lip
Q85.00	Neurofibromatosis, unspecified
Q85.01	Neurofibromatosis, type 1
Q85.02	Neurofibromatosis, type 2
Q85.03	Schwannomatosis
Q85.09	Other neurofibromatosis
R13.0	Aphagia
R13.10	Dysphagia, unspecified
R13.11	Dysphagia, oral phase
R13.12	Dysphagia, oropharyngeal phase
S01.00XA	Unspecified open wound of scalp, initial encounter
S01.01XA	Laceration without foreign body of scalp, initial encounter
S01.02XA	Laceration with foreign body of scalp, initial encounter

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

S01.03XA	Puncture wound without foreign body of scalp, initial encounter
S01.04XA	Puncture wound with foreign body of scalp, initial encounter
S01.05XA	Open bite of scalp, initial encounter
S01.101A	Unspecified open wound of right eyelid and periocular area, initial encounter
S01.102A	Unspecified open wound of left eyelid and periocular area, initial encounter
S01.109A	Unspecified open wound of unspecified eyelid and periocular area, initial encounter
S01.111A	Laceration without foreign body of right eyelid and periocular area, initial encounter
S01.112A	Laceration without foreign body of left eyelid and periocular area, initial encounter
S01.119A	Laceration without foreign body of unspecified eyelid and periocular area, initial encounter
S01.121A	Laceration with foreign body of right eyelid and periocular area, initial encounter
S01.122A	Laceration with foreign body of left eyelid and periocular area, initial encounter
S01.129A	Laceration with foreign body of unspecified eyelid and periocular area, initial encounter
S01.131A	Puncture wound without foreign body of right eyelid and periocular area, initial encounter
S01.132A	Puncture wound without foreign body of left eyelid and periocular area, initial encounter
S01.139A	Puncture wound w/out foreign body of unspecified eyelid and periocular area, initial encounter
S01.141A	Puncture wound with foreign body of right eyelid and periocular area, initial encounter
S01.142A	Puncture wound with foreign body of left eyelid and periocular area, initial encounter
S01.149A	Puncture wound with foreign body of unspecified eyelid and periocular area, initial encounter
S01.151A	Open bite of right eyelid and periocular area, initial encounter
S01.152A	Open bite of left eyelid and periocular area, initial encounter
S01.159A	Open bite of unspecified eyelid and periocular area, initial encounter
S01.20XA	Unspecified open wound of nose, initial encounter
S01.21XA	Laceration without foreign body of nose, initial encounter
S01.23XA	Puncture wound without foreign body of nose, initial encounter
S01.25XA	Open bite of nose, initial encounter
S01.401A	Unspecified open wound of right cheek and temporomandibular area, initial encounter
S01.402A	Unspecified open wound of left cheek and temporomandibular area, initial encounter
S01.409A	Unspecified open wound of unspecified cheek and temporomandibular area, initial encounter
S01.411A	Laceration without foreign body of right cheek and temporomandibular area, initial encounter
S01.412A	Laceration without foreign body of left cheek and temporomandibular area, initial encounter
S01.419A	Laceration w/out foreign body of unspecified cheek & temporomandibular area, initial encounter
S01.421A	Laceration with foreign body of right cheek & temporomandibular area, initial encounter
S01.422A	Laceration with foreign body of left cheek & temporomandibular area, initial encounter
S01.429A	Laceration with foreign body of unspecified cheek & temporomandibular area, initial encounter
S01.431A	Puncture wound w/out foreign body of right cheek & temporomandibular area, initial encounter

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

S01.432A	Puncture wound w/out foreign body of left cheek & temporomandibular area, initial encounter
S01.439A	Puncture wound w/out foreign body of unspecified cheek & temporomandibular area, initial encounter
S01.441A	Puncture wound w/ foreign body of right cheek and temporomandibular area, initial encounter
S01.442A	Puncture wound w/ foreign body of left cheek & temporomandibular area, initial encounter
S01.449A	Puncture wound w/ foreign body of unspecified cheek & temporomandibular area, initial encounter
S01.451A	Open bite of right cheek and temporomandibular area, initial encounter
S01.452A	Open bite of left cheek and temporomandibular area, initial encounter
S01.459A	Open bite of unspecified cheek and temporomandibular area, initial encounter
S01.501A	Unspecified open wound of lip, initial encounter
S01.502A	Unspecified open wound of oral cavity, initial encounter
S01.511A	Laceration without foreign body of lip, initial encounter
S01.512A	Laceration without foreign body of oral cavity, initial encounter
S01.521A	Laceration with foreign body of lip, initial encounter
S01.522A	Laceration with foreign body of oral cavity, initial encounter
S01.531A	Puncture wound without foreign body of lip, initial encounter
S01.532A	Puncture wound without foreign body of oral cavity, initial encounter
S01.541A	Puncture wound with foreign body of lip, initial encounter
S01.542A	Puncture wound with foreign body of oral cavity, initial encounter
S01.551A	Open bite of lip, initial encounter
S01.552A	Open bite of oral cavity, initial encounter
S01.80XA	Unspecified open wound of other part of head, initial encounter
S01.81XA	Laceration without foreign body of other part of head, initial encounter
S01.82XA	Laceration with foreign body of other part of head, initial encounter
S01.83XA	Puncture wound without foreign body of other part of head, initial encounter
S01.84XA	Puncture wound with foreign body of other part of head, initial encounter
S01.85XA	Open bite of other part of head, initial encounter
S01.90XA	Unspecified open wound of unspecified part of head, initial encounter
S01.91XA	Laceration without foreign body of unspecified part of head, initial encounter
S01.92XA	Laceration with foreign body of unspecified part of head, initial encounter
S01.93XA	Puncture wound without foreign body of unspecified part of head, initial encounter
S01.94XA	Puncture wound with foreign body of unspecified part of head, initial encounter
S01.95XA	Open bite of unspecified part of head, initial encounter
S02.5XXA	Fracture of tooth (traumatic), initial encounter for closed fracture
S02.5XXB	Fracture of tooth (traumatic), initial encounter for open fracture

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
 Last Review Date: 11/08/2018
 Effective Date: 01/01/2019

S03.2XXA	Dislocation of tooth, initial encounter
S05.20XA	Ocular laceration & rupture w/ prolapse or loss of intraocular tissue, unspecified eye, initial encounter
S05.21XA	Ocular laceration & rupture w/ prolapse or loss of intraocular tissue, right eye, initial encounter
S05.22XA	Ocular laceration & rupture w/ prolapse or loss of intraocular tissue, left eye, initial encounter
S05.30XA	Ocular laceration w/out prolapse or loss of intraocular tissue, unspecified eye, initial encounter
S05.31XA	Ocular laceration without prolapse or loss of intraocular tissue, right eye, initial encounter
S05.32XA	Ocular laceration without prolapse or loss of intraocular tissue, left eye, initial encounter
S05.40XA	Penetrating wound of orbit with or without foreign body, unspecified eye, initial encounter
S05.41XA	Penetrating wound of orbit with or without foreign body, right eye, initial encounter
S05.42XA	Penetrating wound of orbit with or without foreign body, left eye, initial encounter
S05.50XA	Penetrating wound with foreign body of unspecified eyeball, initial encounter
S05.51XA	Penetrating wound with foreign body of right eyeball, initial encounter
S05.52XA	Penetrating wound with foreign body of left eyeball, initial encounter
S05.60XA	Penetrating wound without foreign body of unspecified eyeball, initial encounter
S05.61XA	Penetrating wound without foreign body of right eyeball, initial encounter
S05.62XA	Penetrating wound without foreign body of left eyeball, initial encounter
S05.70XA	Avulsion of unspecified eye, initial encounter
S05.71XA	Avulsion of right eye, initial encounter
S05.72XA	Avulsion of left eye, initial encounter
S05.8X1A	Other injuries of right eye and orbit, initial encounter
S05.8X2A	Other injuries of left eye and orbit, initial encounter
S05.8X9A	Other injuries of unspecified eye and orbit, initial encounter
S05.90XA	Unspecified injury of unspecified eye and orbit, initial encounter
S05.91XA	Unspecified injury of right eye and orbit, initial encounter
S09.93XA	Unspecified injury of face, initial encounter

ICD-10 codes for CPT code 21085 (when used to represent prosthesis for treatment of OSA):

G47.30	Sleep apnea, unspecified
G47.31	Primary central sleep apnea
G47.32	High altitude periodic breathing
G47.33	Obstructive sleep apnea (adult) (pediatric)
G47.34	Idiopathic sleep related nonobstructive alveolar hypoventilation
G47.35	Congenital central alveolar hypoventilation syndrome
G47.36	Sleep related hypoventilation in conditions classified elsewhere

MP.138.MH – Oral Maxillofacial Prosthesis

Policy Number: MP.138.MH
Last Review Date: 11/08/2018
Effective Date: 01/01/2019

G47.37	Central sleep apnea in conditions classified elsewhere
G47.39	Other sleep apnea

References

1. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD) L35047 – Oral Maxillofacial Prosthesis Retirement Date 10/04/2018
<https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=35047&ver=15&Date=&DocID=L35047&bc=iAAAABAAAA&>
2. Delpachitra SN, Rahmel BB. Orbital fractures in the emergency department: a review of early assessment and management. Emerg Med J. 2015 Sep 10.
<https://emj.bmj.com/content/33/10/727.long>
3. Maxillofacial trauma. Tintinalli JE, Kelen GD, Stapczynski JS, eds. Emergency Medicine: A Comprehensive Study Guide. 6th ed. New York, NY: McGraw-Hill; 2004. 1583-9.
4. Muzaffar AR, Adams WP Jr, Hartog JM, et al. Maxillary reconstruction: Functional and aesthetic considerations. Plast Reconstr Surg. 1999;104(7):2172-2183
5. Oikarinen KS. Clinical management of injuries to the maxilla, mandible, and alveolus. Dent Clin North Am. 1995; 39(1):113-131.
<https://insights.ovid.com/pubmed?pmid=11149786>
6. Rosen P, Barkin R. Face. Rosen P, et al, eds. Emergency Medicine Concepts and Clinical Practice. 5th ed. St. Louis, Mo: Mosby-Year Book; 2002. 315-29.

Disclaimer:

MedStar Health medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of MedStar Health and its affiliated managed care entities. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

MedStar Health reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

These policies are the proprietary information of Evolent Health. Any sale, copying, or dissemination of said policies is prohibited.