



NETWORK *Notification*

Notice Date: November 7, 2024
To: **All Marketplace Providers**
From: CareSource
Subject: QHP Hypoglossal/Allergen Modifiers Notification - **REVISION**
Effective Date: November 15, 2024

This notification is a revision to the [network notification](#) posted on October 21, 2024. The content of this notification is only applicable to Marketplace providers – not D-SNP providers. Updates are in red font.

Summary

Beginning with claims processed on or after November 15, 2024, **CareSource Marketplace** will implement new claims editing logic for **Hypoglossal Nerve Simulation for Obstructive Sleep Apnea and Allergen Immunotherapy** services, to keep in alignment with the Centers for Medicare & Medicaid Services (CMS) payment policies.

Important Policy Changes

Required Billing:

- A secondary diagnosis indicating a body mass index of less than 35 kg/m² is required when billing **CPT 64582**, otherwise it will be denied.

Correct Coding:

- **CPT Code 95165:** PT code 95165 is used to report professional services for the supervision of preparation and provision of antigen maintenance mix for immunotherapy, with a maximum of 120 billable units per year.

Reference:

- CMS IOM Publication 100-04, *Medicare Claims Processing Manual*, Chapter 12, Section 200

Questions?

Please contact Provider Services at **1-833-230-2101** with any questions.

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