



Payment Policy: **Dermatology**

Point32Health companies

Applies to:

Commercial Products

Public Plans Products

- ☑ Tufts Health Direct A Massachusetts Qualified Health Plan (QHP) (a commercial product)

- □ Tufts Health One Care A dual-eligible product

Senior Products

- ☑ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
- ☑ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses contracted providers for dermatology services rendered, including the diagnosis and treatment of skin disorders and disease.

Prerequisites

Applicable Point32Health referral, notification and authorization policies and procedures apply.

Harvard Pilgrim Health Care members refer to Referral, Notification and Authorization

Tufts Health Plan members refer to the Referral, Prior Authorization, and Notification Policy

General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

Point32Health Reimburses

- Actinotherapy, photochemotherapy and laser treatment for inflammatory skin diseases
- Intermediate and complex wound repairs
- Lesion Excisions when performed for indications other than cosmetic
- Mohs micrographic surgery to remove complex or ill-defined cancer
 - Each stage of Mohs, up to five specimens and each additional specimen, after the first five performed at any stage, at 100% of the allowable for each CPT code submitted
 - Biopsy at the same time of Mohs, if performed on a different site than the Mohs procedure
- Photodynamic therapy by external application of light to destroy pre-malignant and/or malignant lesions of the skin and mucosa by activation of photosensitive drugs
- The purchase of FDA-approved skin substitutes and replacements for use by one patient only, to either the contracted provider or contracted supplier; Initial site preparation is reimbursed in addition to the application of the product

Dermatology 1

Point32Health Does Not Reimburse

- Abrasion, dermabrasion, salabrasion
- Anesthesia when provided by the surgeon or dermatologist
- A simple closure or repair when performed with a benign or malignant lesion excision
- Chemical exfoliation for acne and chemical peel
- Closure or repair using adhesive strips as the sole method of repair
- Evaluation and management services on the same day as a surgical procedure unless it is a significant and separately
 identifiable service, or it is above and beyond the usual preoperative and postoperative care associated with the
 procedure, and billed with the proper modifier
- Frozen section pathology services associated with Mohs surgery
- Miscellaneous supplies, miscellaneous surgical supplies, or surgical trays
- Non-FDA-approved skin substitute products
- Photochemotherapy (PUVA) when billed without an appropriate diagnosis
- Repairs associated with surgical closure procedures
- Skin tag removal by any method

Any other dermatological services that are determined to be cosmetic, experimental, or investigational

Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

Other Information

- When billing repair of multiple wounds, add together the lengths of those in the same classification (simple, intermediate, or complex) and anatomic sites that are grouped together in the same CPT descriptor. Report the total length of each group
- A physician bill for skin substitutes should not be submitted if the supplier is billing Point32Health directly for the provision of the product.

Related Policies and Resources

Payment Policies

Harvard Pilgrim Health Care

- Anesthesia
- Coding Overview
- Evaluation and Management
- Laboratory and Pathology
- Non-Covered services
- Surgery
- Unlisted/Unspecified Procedure Codes

Tufts Health Plan Payment Policies

- Anesthesia Professional
- Anesthesia Services
- Evaluation and Management Professional
- Laboratory and Pathology
- Noncovered/ Nonreimbursahble Services
- Surgery Professional
- Unlisted and Not Otherwise Classified Codes

Clinical Policies

Harvard Pilgrim Health Care

- Gender Affirming Services
- Mohs' Micrographic Surgery (MMS)

Tufts Health Plan

Gender Affirming Services

- Mohs' Micrographic Surgery (MMS)
- Noncovered Investigational Services
- Reconstructive and Cosmetic Surgery

Publication History

09/29/23: Policy moved to new template, includes all lines of business; Removed reference to ICD-10 requirements for

reimbursement of tattooing codes 11920-11922; Administrative edits

07/01/24: Annual review: no changes

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.