Podiatry Services Payment Policy

Policy
Network Health covers medically necessary podiatry services for Network Health Together® (MassHealth), Network Health Forward® (Commonwealth Care), and Network Health Extend™ (Medical Security Program) members, including routine foot care for members with diabetes.

Definition
Podiatry services are medical and/or surgical services for the foot and ankle as defined by licensing or state regulations.

Authorization requirements

In-network providers
Network Health does not require prior authorization for nonroutine medically necessary podiatry services. Network Health also does not require prior authorization for routine foot care for members with diabetes.

Network Health requires prior authorization for routine foot care for members without diabetes.

Out-of-network and nonpreferred in-network providers
Network Health requires prior authorization for all podiatry services.

Referral requirement
Network Health requires some primary care providers (PCPs) to request referrals for specialty services, including podiatry services, rendered after January 16, 2011. Before providing care, podiatrists should check which members require a referral, or the status of an existing request, with Network Health Connect. Podiatrists can also determine whether to request a referral by checking for “PCP referral required” on the member’s ID card.

Billing and reimbursement
Providers can submit a claim for podiatry services on a CMS-1500 Form or via Health Insurance Portability and Accountability Act (HIPAA)-compliant electronic formats. Claims must include the appropriate Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) codes and modifiers. Network Health may require supporting medical documentation and/or invoices.

This policy applies to Network Health Together, Network Health Forward, and Network Health Extend plans. Payment is based on member benefits and eligibility; medical necessity review, where applicable; and the Network Health provider agreement. Adherence to these guidelines by a provider does not guarantee payment. Network Health reserves the right to amend a payment policy at its discretion.