



## **MedStar Family Choice Maryland Effective as of Dates of Service Beginning June 1, 2025**

As MedStar Family Choice continues its partnership with Payment Integrity partner, Advanced Medical Pricing Solutions (AMPS), we are expanding our prospective (pre-payment) reviews to include additional edits based on guidance from the Centers for Medicare & Medicaid Services (CMS) Coverage Policies and National Coverage Determinations (NCD).

The additional CMS Coverage Policies and NCD Policies edits to be implemented include the following services:

- Screening Mammography
  - Place of Service - outpatient facility only.
    - Policy #916 Screening mammography must be reported with an appropriate revenue code.
- Diagnostic Mammography
  - Place of Service - professional, outpatient, ASC professional, and facility
    - Policy # 930 Diagnostic mammography must be reported with a valid ICD-10 diagnosis code.
  - Place of Service - outpatient facility only.
    - Policy # 932 Diagnostic mammography must be reported with an appropriate revenue code.
- Cytogenetic Studies
  - Place of Service - professional, outpatient, ASC professional, and facility
    - Policy #883 Cytogenetic studies must be accompanied by a valid ICD-10 diagnosis code.
- Vitrectomy
  - Place of Service - professional, outpatient, ASC professional, and facility.
    - Policy # 918 must be accompanied by a valid ICD-10 diagnosis code.
- Lung Cancer Screening with Low Dose Computed Tomography (LDCT)
  - Place of Service - professional, outpatient, ASC professional, and facility.
    - Policy # 934 allowed annually, and eleven (11) full months must elapse from the date of the last screening.

For questions or additional information, contact us via email at [MFC-ProviderRelations2@MedStar.net](mailto:MFC-ProviderRelations2@MedStar.net) or by telephone at 800-261-3371.