

ADMINISTRATIVE POLICY STATEMENT Marketplace

Policy Name & Number	Date Effective
	IN, GA, WV, KY: 09/01/2022-07/31/2023
	OH: 10/01/2022-08/31/2023
Policy Type	
ADMINISTRATIVE	

Administrative olicy Statement prepared by Care Sourcand its affiliates are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industres standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged increased or new morbidity impairment of function dysfunction a body organ or part, or significant pain and discomfort. The services meet the standards of good medical praction the local

This policy applies to the following Marketplace(s):

Georgia

Indiana

Kentucky

OhcT 2

D. Policy_2

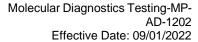
E. Conditions Coverage 3

F Related Policies Rules_3

G. ReviewRevisionIstory _3

H References_3

I. State-SpecificInformation_3





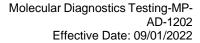
A. Subject

Molecular Diagnostics Testing

B. Background

Molecular diagnostic testing (MDT), following a diagnosis or suspected diagnosis, can help guide appropriate therapy by identifying specific







- E. Conditions of Coverage NA
- F. Related Policies/Rules NA
- G. Review/Revision History

ACTION DATE Date