

New policy updates

Clinical payment, coding and policy changes

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. In an effort to keep our providers informed, please see the chart below highlighting upcoming new policy(ies).

Effective for dates of service beginning 10/1/2026:

West Virginia Medicaid-policy guidelines

Revenue code guidelines

Evaluation and management (E/M) services billed with specialty treatment room revenue codes

According to the Uniform Billing Editor (UBE) and policy, revenue codes must be appropriate for the services reported on the claim. Specialty treatment room revenue codes are intended to identify services performed in a specialty treatment setting and may not be appropriate when reported with certain evaluation and management (E/M) services.

The following evaluation and management (E/M) codes are included in this policy:

- 98000-98016 (telemedicine)
- 99202-99499 (evaluation and management services)
- G0380-g0384 (Medicare Type B emergency department visits)

The following revenue codes are included in this policy:

- 0760, 0761, 0769 (specialty treatment room)

Effective 10/01/2026, Aetna Better Health of WV will deny evaluation and management service codes 98000-98016, 99202-99499, and g0380-g0384 when billed with revenue code 0760, 0761, or 0769.