



Dear Peach State Health Plan Provider,

We appreciate your partnership with Peach State Health Plan. We are working to enhance our Payment Integrity solutions as required by state and federal governing entities. As part of this commitment, we are rolling out policy updates effective on or after **August 1, 2026**.

Edit Name	Description	Lines of Business
CP.MP.121 Homocysteine Testing	<ul style="list-style-type: none"> <li>• Expanded criteria to include:</li> <li>• First-degree relative with homocystinuria</li> <li>• Markedly elevated serum and urine homocysteine Characteristic physical findings including one of the following:               <ul style="list-style-type: none"> <li>○ Developmental delay</li> <li>○ Marfanoid appearance</li> <li>○ Osteoporosis</li> <li>○ Ocular abnormalities (ectopia lentis)</li> <li>○ Thromboembolic disease</li> <li>○ Severe premature atherosclerosis</li> </ul> </li> <li>• Added dementia as a not medically necessary indication. Updated background with no impact to criteria.</li> <li>• Removed table of Medically Necessary ICD10 codes and replaced with a table of Not Medically Necessary ICD-10 codes. References reviewed and updated. Reviewed by external specialist.</li> </ul> <p>Removed Z01.8 and replaced with Z01.810, Z01.811, Z01.812, and Z01.819.</p>	Medicaid
CP.MP.113 Holter Monitors	Removed criteria II regarding efficacy not established for all other indications. New codes added to existing ranges including I24.81 and I24.89.	Medicaid

Thank you for your continued cooperation in our efforts to provide quality healthcare. We look forward to supporting you in delivering the highest standard of care to our members.

Sincerely,

Peach State Health Plan