

Stay Informed with the Provider Manual

The Provider Manual is available at [MedMutual.com/Provider](https://www.MedMutual.com/Provider) > [Provider Manual](#). It is updated quarterly to include the latest policies, procedures and guidelines providers need to work effectively with Medical Mutual.

Sub-sections Revised or Added— Current updates to the Provider Manual include:

- Section 1 – Overview: The following section was revised:
 - Contact Information
- Section 2 – Claims Overview: The following section was revised:
 - Coding Instructions for Selected Services and Related Billing Policies and Procedures
- Section 3 – Clinical Quality and Health Services Overview:
The following sections were revised:
 - Prior Authorization
 - Clinical Review Process
 - Clinical Practice Guidelines
 - Standard Benefit Exclusions
- Section 6 – Adjustment and Provider Inquiries Overview:
The following section was revised:
 - Provider Inquiries
- Section 9 – Institutional Reimbursement Overview:
The following section was revised:
 - Audit Provisions

Contact Us

The phone number for our Medical Mutual Provider Contracting team is now 1-800-625-2583. This number is being used for all our provider contracting regions.

If you do not know who your Provider Contracting Representative is, you can find the information on the contact us page of [MedMutual.com/Provider](https://www.MedMutual.com/Provider).



General Information

Notice of Material Amendment to Contract: New Reimbursement Policy

Effective November 1, 2025, Medical Mutual is implementing the following Reimbursement Policy:

- Laboratory and Venipuncture Services (Policy Number RP-202513)

New Reimbursement Policies

Effective August 1, 2025, Medical Mutual is implementing the following Reimbursement Policies:

- Assistant-at-Surgery (Policy Number RP-202510)
- Critical Care Services and Trauma Activation (Policy Number RP-202511)

Effective October 1, 2025, Medical Mutual is implementing the following Reimbursement Policy:

- Contrast and Radiopharmaceutical Materials (Policy Number RP-202512)

Revised Reimbursement Policies

Effective August 1, 2025, Medical Mutual is revising the following Reimbursement Policy:

- Multiple Procedure Payment Reduction – Outpatient Surgical Procedures, RP-202410

To view these policies, visit [MedMutual.com/Provider](https://www.MedMutual.com/Provider) and under the Providers menu select Policies and Standards > [Reimbursement Policies](#).

Network Fee Schedule Update

The Medical Mutual updated network fee schedule will be available for reference on July 1, 2025, on our secure Provider Portal in Availity, which you can access at [MedMutual.com/Provider](https://www.MedMutual.com/Provider). Revisions will be effective for dates of service on or after Oct. 1, 2025.

In addition to this revision, fees in the network fee schedule for certain codes will continue to be updated on a more frequent basis.

- The Centers for Medicare and Medicaid Services (CMS) updates its fee schedule for J-codes and radiological materials on a quarterly basis. Similarly, Medical Mutual will continue to update the fees in its Network Fee Schedule and Medicare Advantage Fee Schedule for J-codes and radiological materials as described below:
 - The fees for J-codes and radiological materials in Medical Mutual's fee schedule are 100% of the then-current Medicare fee schedule and will be updated on a quarterly basis to be effective on Jan. 1, April 1, July 1, and Oct. 1 of each year. Fees will reflect the quarterly updates made by CMS to the CMS Average Sales Price (ASP) file and by the Medicare Administrative Contractor for the state of Ohio (currently CGS Administrators, LLC) to its ASP file.
 - Each quarter, the updated fee schedules with revised fees for J-codes and radiological materials will be available via Medical Mutual's Provider Portal in Availity, which you can access at [MedMutual.com/Provider](https://www.MedMutual.com/Provider).

- Medical Mutual will continue to update the fees in its Network Fee Schedule and Medicare Advantage Fee Schedule for immunizations as described below:
 - Fees for immunizations are updated on a semi-annual basis on Jan. 1 and July 1 of each year to be 100% of the then-current average Average Wholesale Price (AWP) for all known and active National Drug Codes (NDCs) associated with a particular immunization code.
 - In addition to the fee updates on Jan. 1 and July 1 of each year, if any, the fees for flu vaccines will be updated to be effective on Aug. 1 of each year to be 100% of the then-current average AWP for all known and active NDCs associated with the particular flu vaccine code.
 - When Medical Mutual makes updates to immunization fees, the updated fee schedules with revised fees for immunizations will be available via Medical Mutual's Provider Portal in Availity, which you can access at [MedMutual.com/Provider](https://www.MedMutual.com/Provider).

The Medical Mutual Provider Portal in Availity offers search features based on a provider's individual National Provider Identifier and Tax Identification Number to view contract rates by:

- Procedure code submitted by your practice most frequently.
- Commonly submitted procedure codes for specialties.
- Contracted fees for individual procedure codes.

If you have any questions regarding this update, please contact your Medical Mutual Provider Contracting Manager toll free at 1-800-625-2583. If you don't know who your Provider Contracting Manager is, please visit the Contact Us page at [MedMutual.com/Provider](https://www.MedMutual.com/Provider).

Reminder: Provider Electronic Communications Notification

We want to remind you that **effective June 30, 2025**, all regular notice communications like our Mutual News Provider Newsletters and Mutual News Bulletins will only be available on our Medical Mutual provider website on the News and Information page. This page can be easily accessed from our [MedMutual.com/Provider](https://www.MedMutual.com/Provider) home page. After June 30th, we will no longer be sending out these communications to providers via mail unless you completed a waiver request by the previous deadline.

Please Note: Providers who have an existing certified mail delivery provision for communications in their provider contract with us will continue to receive communications that way.

As part of this transition, at the top of the News & Information page you can register for email notification which will allow us to notify you anytime a new newsletter or bulletin is available on the website. This email notification is available to anyone within your organization and is not limited to select positions.

Thank you for the care you provide to our members, and we look forward to continuing to improve our communications with you.

Reminder: Discontinuation of Paper Claims

Effective September 1, 2025, paper claims will not be accepted without an approved waiver.

As noted in the [March 2025 Mutual News Newsletter](#), providers were notified that effective September 1, 2025, Medical Mutual will no longer accept paper medical claims except for limited situations approved by a waiver.

The electronic claims waiver request must be submitted for review by any provider who has sufficient reason(s) to be exempt from the process. This form will be reviewed, along with history claims data. You will be notified via a letter of our decision. **Providers already submitting electronic claims will NOT be approved for a waiver.** An electronic claim waiver request form is available on our website at [MedMutual.com](#). **Paper claim forms submitted by providers after September 1, 2025, without an approved waiver will result in a letter reminding you to submit claims electronically.**

Please Note: Dental claims are not included with this change; however, electronic submission of dental claims is highly encouraged to expedite processing. Medical Mutual receives and processes electronic dental claims from several clearinghouses: DentalXChange, Tesia and Change Healthcare, under payor ID 29076 (Medical Mutual) and 31117 (Superior Dental).

Electronic claims can be submitted through a clearinghouse. If you do not have an established clearinghouse, you can submit claims electronically through our provider portal in Availity without the overhead of purchasing a practice management system. Availity allows you to submit claims through a streamlined web-based interface at no cost. You can register for Availity now at <https://www.availity.com/essentials-portal-registration/>.

You can [Log in to the Availity Portal](#) and select Medical Mutual to access:

- Eligibility and Benefits
- Claims Status
- Electronic Remittance Advice (eRA) Statements
- Fee Schedule Lookup
- Provider Record Updates
- Provider Action Request (appeal form)
- Professional Claim - Training Demo [link](#)

Availity will be conducting live webinar training to assist providers who are not currently using Availity Essentials or submitting claims electronically during the months of July and August.



Provider Webinars

Webinar Information

Availity Essentials Intro & Setup for Administrators, 07/30/25, 2:30 - 3:30 PM ET

Availity Essentials Intro & Setup for Administrators, 08/05/25, 1:30 - 2:30 PM ET

Availity Essentials Applications Overview for Providers (Paper Submitters), 07/31/25, 3:30 - 4:30 PM

Availity Essentials Applications Overview for Providers (Paper Submitters), 08/07/25, 3:30 - 4:30 PM ET

Providers can access the Availity Learning Center and register for the training webinar by taking the following steps:

Log in to the Availity Essentials.

1. Click Help & Training | Get Trained in the top navigation bar. The Availity Learning Center (ALC) displays in a separate tab/window.
2. For live webinars, click Session at the top of top of the page and select the month of the webinar.
3. Once you have located a session, click View Course.
4. Then click Enroll.

Reminder: Medical Mutual Provider Line Hours Changed

Effective June 1, 2025, the Medical Mutual Provider Line hours changed to 8AM – 5PM, Monday through Friday.

If you have any questions, please contact your provider contracting manager.

Medical Policy Updates

Medical Policy Updates

The Corporate Medical Policies (CMPs) developed, revised or retired between March 1, 2025 and May 31, 2025 are outlined in the following charts. CMPs are regularly reviewed, updated, added or withdrawn, and are subject to change. For a complete list of CMPs, please visit [MedMutual.com/Provider](https://www.medmutual.com/Provider) and select Policies and Standards > Corporate Medical Policies.

Medical Drug CMPs	
Policy Name	New, Revised, or Retired
Adzynma	Revised
Aldurazyme	Revised
Alpha-1_Proteinase Inhibitors	Revised
Amondys 45	Revised
Amvuttra	Revised
Bavencio	Revised
Bendamustine	Revised
Beqvez	Retire
Bevacizumab	Revised
Brineura	Revised
C1 esterase inhibitor: Cinryze, Haegarda	Revised
Cabazitaxel	Revised
Cerezyme	Revised
Compounded Drugs	Revised
Copaxone, glatiramer acetate, Glatopa	Revised
Corticotropin	Revised
Coverage of New and Unproven Drug policy	Revised
Darzalex_IV	Revised
Darzalex_SQ	Revised
Datroway	New
Dupixent	Revised
Elaprase	Revised
Ellyso	Revised
Elevidys	Revised
Elfabrio	Revised
Elrexfio	Revised
Elzonris	Revised
Empaveli	Revised
Empliciti	Revised

Medical Drug CMPs

Policy Name	New, Revised, or Retired
Enbrel	Revised
Encelto	New
Enhertu	Revised
Enjaymo	Revised
Entyvio SC	Revised
Erbitux	Revised
Evenity	Revised
Evkeeza	Revised
Exondys 51	Revised
Fabrazyme	Revised
Gamifant	Revised
GCSF- Long Acting	Revised
GCSF-Short Acting	Revised
General Oncology	Revised
Global PA	Revised
Imfinzi	Revised
Imjudo	Revised
Infliximab	Revised
Inhaled Nitric Oxide	Revised
Izervay	Revised
Jemperli	Revised
Kanuma	Revised
Kevzara	Revised
Keytruda	Revised
Kyprolis	Revised
Lamzede	Revised
Lenmeldy	Revised
Leukine	Revised
Libtayo	Revised
Loqtorzi	Revised
Lucentis	Revised
Lumizyme	Revised
Lymphir	Revised
Medicare Part B Step	Revised
Mepsevii	Revised
Mylotarg	Revised



Medical Drug CMPs

Policy Name	New, Revised, or Retired
Naglazyme	Revised
Nexviazyme	Revised
Niktimvo	Revised
Nulibry	Revised
Ocrevus	Revised
Opdivo	Revised
Orencia SC	Revised
Paclitaxel Albumin-Bound	Revised
Pemetrexed	Revised
Piasky	Revised
Pluvicto	Revised
Pombiliti	Revised
Poteligeo	Revised
Provenge	Revised
Qfitlia	New
Reblozyl	Revised
Revcovi	Revised
Rituximab_IV	Revised
Rivfloza	Revised
Romidepsin	Revised
Ruconest	Revised
Ryoncil	Revised
Ryplazim	Revised
Rystiggo	Revised
Rytelo	Revised
Sarclisa	Revised
Scenesse	Revised
Simponi	Revised
Simponi_ARIA	Revised
Soliris	Revised
Spevigo IV	Revised
Spevigo SQ	Revised
Stelara IV	Revised
Stelara SQ	Revised
Susvimo	Revised
Sylvant	Revised

Medical Drug CMPs

Policy Name	New, Revised, or Retired
Taltz	Revised
Talvey	Revised
Tecentriq_IV	Revised
Tecvayli	Revised
Tevimbra	Revised
Tezspire	Revised
Tocilizumab_IV	Revised
Trastuzumab_IV	Revised
Tremfya IV	Revised
Tremfya SQ	Revised
Trisenox	Revised
Ultomiris	Revised
Unloxcyt	Revised
Uplizna	Revised
Vabysmo	Revised
Viltepso	Revised
Vimizim	Revised
Viscos - HAD	Revised
VPRIV	Revised
Vyalev	New
Vyondys53	Revised
Vyvgart_IV	Revised
Vyvgart_SQ	Revised
Vyxeos	Revised
Xenpozyme	Revised
Xgeva	Revised
Xolair	Revised
Yervoy	Revised
Ziihera	Revised
Zynyz	Revised

For a list of services requiring prior approval or considered investigational, please visit [MedMutual.com/Provider](https://www.medmutual.com/Provider) and select Policies and Standards > [Prior Approval & Investigational Services](#).

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Medical CMPs

Policy Name	Number	Status
Genetic Testing and Genetic Counseling General Policy	201303	Revised
Temporary Ventricular Assist Device	201804	Revised
Computer Assisted Musculoskeletal Surgical Navigation System	2019-D	Revised
Subchondroplasty (SCP)	2019-B	Revised
Rapid Desensitization	99006	Revised
Transcatheter Pulmonary Valve Implantation (TPVI) and Transcatheter Tricuspid Valve Repair	201426	Revised
Gender Affirming Surgery	201609	Revised
Rhinoplasty & Septoplasty	200509	Revised
Magnetic Resonance-Guided Focused Ultrasound	202308	Revised
MCG Frequency Limitations	202014	Revised
Endoscopic Thoracic Sympathectomy for Treatment of Hyperhidrosis	200313	Revised
Skin Substitutes	200233	Revised
Cochlear Implants	202020	Revised
Genetic Testing and Genetic Counseling General Policy	201303	Revised
Genetic Testing and Genetic Counseling General Policy	201303	Revised
Diabetes Management	200117	Revised
Rebyota	202301	Revised
Skin Substitutes	200233	Revised
Manipulation Under Anesthesia	95029	Revised
Surgical Treatments for Glaucoma	201721	Revised
POEM	202101	Revised
Rethymic	202201	Revised
Leadless Cardiac Pacemakers	202504	Revised
Treatments for Benign Prostatic Hypertrophy	201913	Revised
Oncotype DX AR-V7 Nucleus Detect Assay	201924	Revised
Dry Needling	202009	Revised
Gender Affirming Surgery (FEHB)	201609-CSTM	Revised
Gender Affirming Surgery (PSHB)	201609-CSTM2	Revised

Medical CMPs		
Policy Name	Number	Status
Microsurgical Treatments for Lymphedema	202011	Revised
Transcatheter Mitral Valve Repair (TMVr)	202012	Retired
Wireless pulmonary artery pressure monitoring-CardioMEMS	2019-A	Retired
Leadless Cardiac Pacemaker (i.e., MICRA Transcatheter Pacemaker System)	2017-B	Retired

For a list of services requiring prior approval or considered investigational, please visit [MedMutual.com/Provider and select Policies and Standards > Prior Approval & Investigational Services](https://www.medmutual.com/Provider-and-select-Policies-and-Standards->Prior-Approval-&Investigational-Services).

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Pharmacy

Pharmacy Prior Approval Requirements

Medical Mutual requires prior approval for the following drugs regardless of whether they are covered under the medical or pharmacy benefits:

- All new specialty drugs
- All new drugs with significant safety, clinical or potential abuse or diversion concerns

This requirement is intended to ensure medications are used safely and will be effective for members. The prior approval criteria for these drugs are detailed in the Global PA/New Drug Prior Approval policy available at [Medmutual.com/Provider](https://www.medmutual.com/Provider) on the following pages:

For drugs covered under the medical benefit: Select Policies and Standards > [Corporate Medical Policies](#). This page also includes all current Corporate Medical Policies and information about our prior approval services and [Magellan Rx's secure provider portal](#), a web-based tool at www1.magellanrx.com that providers can use to manage prior approval requests for medications.

For drugs covered under the pharmacy benefit: Select Policies and Standards > Prescription Drug Resources, then click the link under [Prior Authorization](#) to see the list. This page also includes information about our other coverage management programs (e.g., step therapy, quantity limits) and formularies, as well as a link to the ExpressPath tool.



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Receive this Newsletter in Your Email!

Enroll or login to Availity at [Availity.com/medicalmutual](https://www.availity.com/medicalmutual), locate the Medical Mutual payer space, go to the Applications Tab and input the applicable email address.

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