



Provider Web Portal Medical Accumulators

The South Country Health Alliance (South Country) provider web portal displays medical accumulators for specific services with benefit limits or utilization thresholds.

Accumulator information is based on available claims and eligibility data and is intended to help providers monitor benefit use. Please refer to the South Country Provider Manual and the members' applicable Evidence of Coverage or Member Handbook for additional coverage requirements, information on thresholds, and limitations.

The following sections provide additional details for accumulators displayed in the portal.

Hearing aid accumulators

Hearing aid accumulators are determined by a procedure code that identifies a monaural or set of binaural hearing aids and paid claims data for the **past three years**. The original dispense date identifies the date of service on which the first monaural or set of binaural hearing aids were dispensed.

Breast pump Accumulators

Breast pump accumulators are determined by the procedure code E0603 for electric breast pump and are limited to **one every year**.

Hospice election accumulators

If a member has elected hospice, the accumulator will display as "*Hospice Election Y*" and will include the date the member elected hospice. If there is no indication under the medical accumulator section of the hospice election, it means South Country has not yet been notified of the member's hospice election.

Mammogram screening

South Country allows one mammogram screening, **every five rolling years**, for members enrolled in our **AbilityCare** program between the **ages of 35-40**.

Acupuncture accumulators

South Country allows up to **20 visits per calendar year** of acupuncture services without prior authorization. Request authorization if additional units are needed. Note: If the accumulator displays a count over the allowed units, it means South Country Health Alliance has authorized additional units.

Blood glucose monitoring accumulators

South Country covers blood glucose monitors with a limit of **2 per 6 rolling months**. Blood glucose monitor accumulators are determined by procedure code A9277.

Colon screening accumulators

Colon screening by sigmoidoscopy for members age 49 and under is limited to **2 per 5 rolling years**. This accumulator is determined by procedure code G0104.

Cologuard screening accumulators

Cologuard screening accumulators are determined by procedure code 81528 and is limited to **1 per 3 calendar years**.

High-risk colonoscopy accumulators

High-risk colonoscopy accumulators are determined by procedure codes G0105 and G0121 and are limited to **2 per 2 rolling years**.

Colorectal screening accumulators

Colorectal screening by flexible sigmoidoscopy is limited to **2 per 4 rolling years**. This accumulator is determined by procedure code G0104.

Continuous glucose monitor/receiver accumulators

A continuous glucose monitor/receiver is limited to **1 per 3 rolling years**. This accumulator is determined by procedure code K0554.

Eyewear frame accumulators

Eyewear frames are limited to **1 per 2 calendar years** and accumulators are determined by procedure codes V2020 and V2025.

Nebulizer accumulators

A nebulizer is limited to **1 per 3 rolling years**, and the accumulator is determined by procedure code E0580.

Oximeter accumulators

An oximeter is limited to **3 per 6 calendar months**. This accumulator is determined by procedure code E0445.

Shingles (Zoster) vaccine accumulators

The shingles (Zoster) vaccine, CPT 90750, is limited to **2 per lifetime**.

Therapeutic insert accumulators

For members with a diabetes diagnosis, therapeutic inserts are limited to **6 per calendar year**. This accumulator is determined by procedure codes A5512, A5513, A5514, and K0903.

Therapeutic shoe accumulators

For members with a diabetes diagnosis, therapeutic shoes are limited to **4 per calendar year**, and the accumulator is determined by procedure codes A5503, A5504, A5505, A5506, A5507, and A5510.

***Because coverage can differ by program, providers should also review the program-specific resources below.*

Program-specific information

For program specific information, please refer to the program's *Evidence of Coverage* or

Member Handbook:

- [Families and Children](#) also known as Prepaid Medical Assistance Program or PMAP
- [MinnesotaCare](#)
- [Minnesota Senior Care Plus \(MSC+\)](#)
- [AbilityCare \(HMO SNP\)](#) – Integrated SNBC
- [SingleCare](#) - SNBC
- [SharedCare](#) - SNBC
- [SeniorCare Complete \(HMO SNP\)](#) - MSHO