

## Medical policies and clinical utilization management guidelines update

Published: Dec 1, 2020 - **State & Federal** / Medicare

The *Medical Policies, Clinical Utilization Management (UM) Guidelines* and *Third-Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

Please share this notice with other members of your practice and office staff.

To view a guideline, visit <https://www11.anthem.com/search.html>.

### Updates:

Updates marked with an asterisk (\*) notate that the criteria may be perceived as more restrictive.

- **00134** – Noninvasive Heart Failure and Arrhythmia Management and Monitoring System:
  - Revised Investigational and Not Medically Necessary indications
- **00156** – Implanted Artificial Iris Devices:
  - Revised Investigational and Not Medically Necessary indications
- **00157** – Minimally Invasive Treatment of the Posterior Nasal Nerve to Treat Rhinitis:
  - Revised Investigational and Not Medically Necessary indications
- **CG-DME-07** – Augmentative and Alternative Communication (AAC) Devices with Digitized or Synthesized Speech Output:
  - Revised Medically Necessary and Not Medically Necessary indications

- **00052** – Whole Genome Sequencing, Whole Exome Sequencing, Gene Panels, and Molecular Profiling:
  - Revised Medically Necessary indications
- **00077** – Uterine Fibroid Ablation: Laparoscopic, Percutaneous or Transcervical Image Guided Techniques:
  - Expanded scope and revised Investigational and Not Medically Necessary indications
- **00112** – Implantation of Occipital, Supraorbital or Trigeminal Nerve Stimulation Devices (and Related Procedures):
  - Revised scope, and Investigational and Not Medically Necessary indications
- **CG-REHAB-12** – Rehabilitative and Habilitative Services in the Home Setting: Physical Medicine/Physical Therapy, Occupational Therapy and Speech-Language Pathology:
  - A **new clinical *UM Guideline*** was created from content contained in CG-REHAB-04, CG-REHAB-05, CG-REHAB-06.
  - There are no changes to the guideline content.
  - Publish date is scheduled for December 8, 2020.
- The following ***AIM Specialty Health®\* Clinical Appropriateness Guidelines*** have been revised and will be effective on December 6, 2020. To view AIM guidelines, visit the [AIM Specialty Health page](#):
  - Interventional Pain Management (See August 16, 2020, version.)\*
  - Chest Imaging (See August 16, 2020, version.)\*
  - Oncologic Imaging (See August 16, 2020, version.)\*
  - *Sleep Clinical Guidelines* (See August 16, 2020, version.)\*

### ***Medical Policies***

On August 13, 2020, the Medical Policy and Technology Assessment Committee (MPTAC) approved the following *Medical Policies* applicable to Anthem Blue Cross and Blue Shield (Anthem). These guidelines take effect December 6, 2020.

<b>Publish date</b>	<b>Medical Policy #</b>	<b>Medical Policy title</b>	<b>New or revised</b>
10/7/2020	<b>*MED.00134</b>	Non-invasive Heart Failure and Arrhythmia Management and Monitoring System	New
10/7/2020	<b>*SURG.00156</b>	Implanted Artificial Iris Devices	New
10/7/2020	<b>*SURG.00157</b>	Minimally Invasive Treatment of the Posterior Nasal Nerve to Treat Rhinitis	New
9/1/2020	<b>*GENE.00052</b>	Whole Genome Sequencing, Whole Exome Sequencing, Gene Panels, and Molecular Profiling	Revised
10/7/2020	<b>*SURG.00077</b>	Uterine Fibroid Ablation: Laparoscopic, Percutaneous or Transcervical Image Guided Techniques	Revised
10/1/2020	<b>*SURG.00112</b>	Implantation of Occipital, Supraorbital or Trigeminal Nerve Stimulation Devices (and Related Procedures)	Revised

### **Clinical UM Guidelines**

On August 13, 2020, the MPTAC approved the following *Clinical UM Guidelines* applicable to Anthem. These guidelines adopted by the medical operations committee for Medicare Advantage members on September 24, 2020. These guidelines take effect December 6, 2020.

<b>Publish date</b>	<b>Clinical UM Guideline #</b>	<b>Clinical UM Guideline title</b>	<b>New or revised</b>
10/7/2020	<b>*CG-DME-07</b>	Augmentative and Alternative Communication (AAC) Devices with Digitized or Synthesized Speech Output	Revised
10/7/2020	<b>CG-DME-25</b>	Seat Lift Mechanisms	Revised
8/20/2020	<b>CG-GENE-03</b>	BRAF Mutation Analysis	Revised
8/20/2020	<b>CG-SURG-83</b>	Bariatric Surgery and Other Treatments for Clinically Severe Obesity	Revised

\* AIM Specialty Health is an independent company providing some utilization review services on behalf of Anthem Blue Cross and Blue Shield.

514784MUPENMUB

**URL:** <https://providernews.anthem.com/ohio/article/medical-policies-and-clinical-utilization-management-guidelines-update-37>

**Featured In:**

December 2020 Anthem Provider News - Indiana, December 2020 Anthem Provider News - Kentucky, December 2020 Anthem

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield in Virginia, and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), which underwrites or administers the PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by CompCare or WCIC; CompCare Health Services Insurance Corporation (CompCare) underwrites or administers the HMO policies and Wisconsin Collaborative Insurance Company (WCIC) underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association. Use of the Anthem websites constitutes your agreement with our Terms of Use.

---