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The following new and revised medical policies were endorsed at the July 26, 2018 Medical Policy & Technology Assessment Committee (MPTAC) meeting. These, and all Anthem medical policies, are available at anthem.com/provider > scroll down and select 'Find Resources for [state]' > [Medical Policies and Clinical UM Guidelines](#).

If you do not have access to the internet, you may request a hard copy of any updated policy by contacting the [Provider Call Center](#).

Please note that the Federal Employee Program® Medical Policy Manual may be accessed at www.fepblue.org > Benefit Plans > [Brochures and Forms](#) > Medical Policies.

Revised medical policies effective August 2, 2018

(The following policies were revised to expand medical necessity indications or criteria.)

DRUG.00067 - Ramucirumab (Cyramza®)
DRUG.00071 - Pembrolizumab (Keytruda®)
GENE.00011 - Gene Expressions Profiling for Managing Breast Cancer Treatment
GENE.00028 - Genetic Testing for Colorectal Cancer Susceptibility
MED.00124 - Tisagenlecleucel (Kymriah®)
SURG.00023 - Breast Procedures; including Reconstructive Surgery, Implants and Other Breast Procedures
SURG.00032 - Transcatheter Closure of Patent Foramen Ovale and Left Atrial Appendage for Stroke Prevention

Revised medical policies effective August 29, 2018

(The following policies were revised to expand medical necessity indications or criteria.)

ADMIN.00007 - Immunizations
DRUG.00046 - Ipilimumab (Yervoy®)
DRUG.00050 - Eculizumab (Soliris®)
DRUG.00075 - Nivolumab (Opdivo®)
DRUG.00088 - Atezolizumab (Tecentriq®)
DRUG.00098 - Lutetium Lu 177 dotatate (Lutathera®)
GENE.00006 - Epithelial Growth Factor Receptor (EGFR) Testing
GENE.00029 - Genetic Testing for Breast and/or Ovarian Cancer Syndrome
GENE.00043 - Genetic Testing of an Individual's Genome for Inherited Diseases
LAB.00027 - Selected Blood, Serum and Cellular Allergy and Toxicity Tests

Revised medical policies effective August 29, 2018

(The following policies were reviewed and may have word changes or clarifications, but had no significant changes to the policy position or criteria.)

ADMIN.00002 - Preventive Health Guidelines
ADMIN.00004 - Medical Necessity Criteria
ADMIN.00005 - Investigational Criteria
ANC.00006 - Biomagnetic Therapy
DME.00024 - Transtympanic Micropressure for Treatment of Meniere's Disease
DME.00030 - Altered Auditory Feedback Devices for the Treatment of Stuttering
DME.00034 - Standing Frames
DME.00037 - Cooling Devices and Combined Cooling/Heating Devices
DME.00039 - Prefabricated Oral Appliances for the Treatment of Obstructive Sleep Apnea
DRUG.00015 - Prevention of Respiratory Syncytial Virus Infections
DRUG.00095 - Ocrelizumab (Ocrevus®)
DRUG.00111 - Monoclonal Antibodies to Interleukin-23
GENE.00021 - Chromosomal Microarray Analysis (CMA) for Developmental Delay, Autism Spectrum Disorder, Intellectual Disability (Intellectual Developmental Disorder) and Congenital Anomalies
GENE.00041 - Short Tandem Repeat Analysis for Specimen Provenance Testing
GENE.00042 - Genetic Testing for Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy (CADASIL) Syndrome
LAB.00016 - Fecal Analysis in the Diagnosis of Intestinal Dysbiosis
LAB.00031 - Advanced Lipoprotein Testing
LAB.00033 - Protein Biomarkers for the Screening, Detection and Management of Prostate Cancer Test
LAB.00035 - Multi-biomarker Disease Activity Blood Tests for Rheumatoid Arthritis
MED.00055 - Wearable Cardioverter Defibrillators
MED.00090 - Wireless Capsule for the Evaluation of Suspected Gastric and Intestinal Motility Disorders
MED.00098 - Hyperoxemic Reperfusion Therapy
MED.00106 - Sipuleucel-T (Provenge®)
MED.00109 - Corneal Collagen Cross-Linking
MED.00121 - Implantable Interstitial Glucose Sensors
OR-PR.00005 - Upper Extremity Myoelectric Orthoses
RAD.00002 - Positron Emission Tomography
RAD.00034 - Dynamic Spinal Visualization (Including Digital Motion X-ray and Cineradiography/ Videofluoroscopy)
RAD.00049 - Low-Field and Conventional Magnetic Resonance Imaging (MRI) for Screening, Diagnosing and Monitoring
RAD.00063 - Magnetization-Prepared Rapid Acquisition Gradient Echo Magnetic Resonance Imaging (MPRAGE MRI)
SURG.00005 - Partial Left Ventriculectomy
SURG.00010 - Treatments for Urinary Incontinence
SURG.00028 - Surgical and Minimally Invasive Treatments for Benign Prostatic Hyperplasia (BPH) and Other Genitourinary Conditions
SURG.00071 - Percutaneous and Endoscopic Spinal Surgery
SURG.00076 - Nerve Graft after Prostatectomy
SURG.00077 - Uterine Fibroid Ablation: Laparoscopic or Percutaneous Image Guided Techniques
SURG.00084 - Implantable Middle Ear Hearing Aids

SURG.00105 - Bicompartamental Knee Arthroplasty
SURG.00116 - High-Resolution Anoscopy Screening for Anal Intraepithelial Neoplasia (AIN) and Squamous Cell Cancer of the Anus
SURG.00118 - Bronchial Thermoplasty
SURG.00120 - Internal Rib Fixation Systems
SURG.00122 - Venous Angioplasty with or without Stent Placement or Venous Stenting Alone
SURG.00125 - Radiofrequency and Pulsed Radiofrequency Ablation of Trigger Point Pain
SURG.00126 - Irreversible Electroporation
SURG.00133 - Alcohol Septal Ablation for Treatment of Hypertrophic Cardiomyopathy
SURG.00134 - Interspinous Process Fixation Devices
SURG.00141 - Doppler-Guided Transanal Hemorrhoidal Dearterialization
SURG.00143 - Perirectal Spacers for Use during Prostate Radiotherapy
SURG.00145 - Mechanical Circulatory Assist Devices (Ventricular Assist Devices, Percutaneous Ventricular Assist Devices and Artificial Hearts)
TRANS.00028 - Hematopoietic Stem Cell Transplant for Hodgkin's Disease & Non-Hodgkin's Lymphoma

Archived medical policy effective September 1, 2018

GENE.00008 - Analysis of Fecal DNA for Colorectal Cancer Screening and Surveillance

Archived medical policies effective September 20, 2018

(These policies are now an Anthem Clinical Guidelines.)

DME.00027 - Ultrasonic Bone Growth Stimulation
DRUG.00006 - Botulinum Toxin
DRUG.00024 - Omalizumab (Xolair®)
DRUG.00040 - Abatacept (Orencia)
DRUG.00047 - Brentiximab Vedotin (Adcetris)
DRUG.00058 - Pharmacotherapy for Hereditary Angioedema
DRUG.00064 - Enteral Carbidopa and Levodopa Intestinal Gel Infusion
DRUG.00087 - Asfotase alfa (Strensiq™)
DRUG.00091 - Naltrexone Implants for the Treatment of Alcohol and Opioid Dependence
DRUG.00093 - Sebelipase alfa (Kanuma™)
DRUG.00103 - Abaloparatide (Tymlos) Abaloparatide
MED.00005 - Hyperbaric Oxygen Therapy (Systemic / Topical)
MED.00051 - Implantable Ambulatory Event Monitors and Mobile Cardiac Telemetry
MED.00081 - Cognitive Rehabilitation
MED.00107 - Medical and other Non-Behavioral Health Related Treatments for Autism Spectrum Disorders and Rett Syndrome
RAD.00019 - Magnetic Source Imaging and Magneto-Encephalography
RAD.00042 - SPECT/CT Fusion Imaging
SURG.00014 - Cochlear Implant and Auditory Brainstem Implants
SURG.00020 - Bone Anchored and Bone Conduction Hearing Aids
SURG.00049 - Mandibular/ Maxillary (Orthognathic) Surgery
SURG.00074 - Nasal Surgery for the Treatment of Obstructive Sleep Apnea (OSA) and Snoring
SURG.00085 - Mastectomy for Gynecomastia

SURG.00090 - Radiofrequency and Pulsed Radiofrequency for Neurolysis for Trigeminal Neuralgia

TRANS.00018 - Donor Lymphocyte Infusion for Hematologic Malignancies after Allogeneic Hematopoietic Progenitor Cell Transplantation

Archived medical policies effective September 20, 2018

(These polices are now AIM Clinical Guidelines.)

RAD.00022 - Magnetic Resonance Spectroscopy

RAD.00029 - CT Colonography (Virtual Colonoscopy) for Colorectal Cancer

RAD.00043 - Computed Tomography Scans for Lung Cancer Screening

RAD.00045 - Cerebral Perfusion Imaging using Computed Tomography

RAD.00046 - Cerebral Perfusion Studies using Diffusion and Perfusion Magnetic Resonance Imaging

RAD.00049 - Low-Field and Conventional Magnetic Resonance Imaging (MRI) for Screening, Diagnosing and Monitoring

RAD.00051 - Functional Magnetic Resonance Imaging (MRI)

RAD.00055 - Magnetic Resonance Angiography of the Spinal Canal

Archived medical policies effective October 31, 2018

(These policies are now Clinical Guidelines.)

SURG.00024 - Bariatric Surgery and other Treatments for Clinically Severe Obesity

SURG.00051 - Hip Resurfacing

SURG.00054 - Endovascular/Endoluminal Repair of Aortic Aneurysms, Aneurysms Aortoiliac Disease, Aortic Dissection and Aortic Transection

Revised medical policy effective January 1, 2019

(The following policy was revised to expand medical necessity indications or criteria.)

GENE.00025 - Molecular Profiling and Proteogenomic Testing for the Evaluation of Malignant Tumors

Revised medical policies effective January 1, 2019

(The following policies listed below might result in services that were previously covered now being considered either not medically necessary and/or investigational.)

ANC.00007 - Cosmetic and Reconstructive Services; Skin Related

DRUG.00003 - Chelation Therapy

DRUG.00031 - Subcutaneous Hormone Replacement Implants

GENE.00043 - Genetic Testing of an Individual's Genome for Inherited Diseases

LAB.00027 - Selected Blood, Serum and Cellular Allergy and Toxicity Tests

MED.00123 - Axicabtagene ciloleucel (Yescarta®)

MED.00124 - Tisagenlecleucel (Kymriah®)

New medical policy effective January 1, 2019

(The policy below is new and determined to not have significant change.)

DRUG.00096 - Ibalizumab-uiyk (Trogarzo™)

GENE.00049 - Circulating Tumor DNA Testing for Cancer (Liquid Biopsy)

URL: <https://providernews.anthem.com/new-hampshire/article/medical-policy-updates-are-available-on-anthemcom-5>

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October 2018 Anthem New Hampshire Provider Newsletter

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