

# The Bulletin

This monthly bulletin includes recent changes to our medical and reimbursement policies. It is a supplement to our bimonthly provider newsletter, [Provider News](#). **Note:** Medication policy updates are published in *Provider News*.

## Medical policies

### Changes effective August 1, 2025

#### Behavioral Health

- Applied Behavior Analysis for the Treatment of Autism Spectrum Disorder (#18)
  - Clarified policy criteria

#### Medicine

- New and Emerging Medical Technologies and Procedures (#149)
  - Moved 12 codes from this policy to other policies:
    - 11 codes moved to new *Extravascular (Substernal) Implantable Cardioverter-Defibrillator* (Surgery #17) medical policy
    - One code moved to the *Low-Level Laser Therapy* (Medicine #105) commercial medical policy

#### Surgery

- Extravascular (Substernal) Implantable Cardioverter-Defibrillator (#17)
  - New policy
- Varicose Vein Treatment (#104)
  - Clarified required documentation for conservative therapy

[View our Medical Policy Manual](#)

### Join our medical policy discussion

We encourage input as policies are developed, but we also have a formal process that allows you to submit additional information—such as well-designed, published clinical trials—that may warrant a policy review. To share your feedback about our medical policies, join our [reviewer list](#).

### Recent updates and archived medical policies

We encourage you to review [recent updates and archived medical policies](#), which may also include revisions that will be published in the next issue of *The Bulletin*.

# Reimbursement policies

**Changes effective August 1, 2025**

## **Medicine**

- Cellular and Gene Therapy Products (#112)
  - Updated drug names and estimated FDA approval dates on list of affected products

[View our Reimbursement Policy Manual](#)

## **Verify your provider information**

Providing up-to-date and accurate information about the providers in each of our networks is critical for our members to access care, and it's a requirement for the Affordable Care Act (ACA).

## **Validating provider directory content**

**Practice information, including rosters, must be reviewed and validated in its entirety at least once every 90 days.** [Follow these steps](#) to review the information about your practice.

- Respond timely to our requests for verification of your directory data.
- If your clinic or facility submits provider rosters to us, please send changes, corrections, additions or terminations immediately so we can update our directories as soon as possible.

We appreciate your assistance in keeping information about your practice up to date.

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