October 1, 2026

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*.

2027 publication schedule
We are changing to a monthly newsletter next year, and we'll discontinue publishing *The Bulletin*. Notification about medical and reimbursement policy updates will be published in our monthly newsletter.

Medical policies

Changes effective October 1, 2026
Allied Health

- Enteral and Oral Nutrition Therapy in the Outpatient Setting (#05)
    - Clarified criteria for use of standard formulas

Behavioral Health

- Eye Tracking to Detect Autism Spectrum Disorder in Children (#38)
    - New policy

Durable Medical Equipment

- Transcutaneous Spinal Stimulation (#100)
    - New policy

Genetic Testing

- Evaluating the Utility of Genetic Panels (#64)
    - Added two investigational panels to the policy
- Fetal Red Blood Cell Antigen Genotyping Using Maternal Plasma (#74)
    - Added medical necessity criteria for cell-free fetal DNA RhD genotyping
- Identification of Microorganisms Using Nucleic Acid Probes (#85)
    - Added quantitative testing for BK virus to the policy

Laboratory

- Multianalyte Assays with Algorithmic Analysis for the Evaluation and Monitoring of Patients with Chronic Liver Disease (#47)
    - Added new investigational test to the policy

Medicine

- New and Emerging Medical Technologies and Procedures (#149)
    - Updated the policy in alignment with the 2026 Q4 annual code update

Surgery

- Retinal Prosthesis (#194)
  - Modified the criteria to be more general for retinal prostheses
- Surgical Treatment for Glaucoma (#227)
  - Added new investigational treatment for glaucoma
- Varicose Vein Treatment (#104)
  - Updated the policy in alignment with the 2026 Q4 annual code update

Changes effective January 1, 2027
Durable Medical Equipment

- Sleep Position Trainer (#99)
  - New policy

Surgery

- Bone Lengthening (Distraction Osteogenesis) (#29)
  - New policy
- Devices for Treatment of Benign Prostatic Hyperplasia, Urethral Stricture, and Urethral Stenosis (#230)
  - Adding medical necessity criteria for Optilume
- Hypoglossal Nerve Stimulation (#215)
  - Updating criteria to include new devices
- Iris Prosthesis (#246)
  - New policy
- Surgical Treatments for Lymphedema and Lipedema (#220)
  - Adding criteria related to maximum aspirate volume and timeframes for optimal medical management and weight loss measures

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

Transition to new policy format

We are transitioning our reimbursement policies to PDF format. You may notice this change to some policies in our *Reimbursement Policy Manual* beginning October 1, 2026.

Changes effective October 1, 2026
Administrative

- Injection and Infusion Services (#109)
  - Revised CPT definition
  - Updated references
  - Made minor grammar changes
- Preventive Medicine Evaluation and Management Visits (#133)l
  - Added new definitions
  - Added clarifying statement to the policy statement section
  - Clarified information regarding problem-oriented evaluation and management (E&M) services throughout
  - Removed HCPCS codes
  - Added reference to CPT manual
  - Made minor grammar changes

Modifier

- Modifier 26; Professional Component, Modifier TC; Technical Component (#106)
  - Updated reference link

Changes effective January 1, 2027
Administrative

- Global Days (#101)
  - Updating to remove maternity information, which will be addressed in *Maternity Care* (Medicine #107)
  - Revising wording to match preventable adverse events references
- Virtual Care (#132)
  - Adding and removing definitions
  - Adding new covered services
  - Updating reference links
  - Making minor grammar changes throughout

Medicine

- Maternity Care (#107)
  - Updating policy to align with the American Medical Association (AMA) unbundling of maternity care services
  - Adding new CPT codes
  - Adding definitions and references

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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