

# The Bulletin

This monthly bulletin includes recent changes to our medical policies and reimbursement policies. It is a supplement to our bimonthly provider newsletter, *The Connection*. **Note**: Medication and dental policy updates are published in *The Connection*.

Our provider website includes <u>monthly summaries of changes</u> to our reimbursement, medication and dental policies, pre-authorization requirements, *Administrative Manual* and programs or initiatives that impact your office.

## **Medical policies**

**Disclaimer**: View the terms and conditions of using our *Medical Policy Manual*.

### Commercial

# **Changes effective October 1, 2022 Durable Medical Equipment**

- Negative Pressure Wound Therapy in the Outpatient Setting (#42)
  - Moved the required comprehensive wound care components to the criteria without change to intent; components were previously listed in the Policy Guidelines section

### Changes effective November 1, 2022 Behavioral Health

- Eating Disorder Inpatient Treatment (#25)
  - Revised criteria regarding provider types, family therapy for adults, and staff overseeing programming
- Eating Disorder Intensive Outpatient (#26)
  - Revised criteria regarding provider types, family therapy for adults, psychiatric evaluation for intensive outpatient programs, and staff overseeing programming
- Eating Disorder Partial Hospitalization (#27)
  - Revised criteria regarding provider types, family therapy for adults, and staff overseeing programming
- Eating Disorder Residential Treatment (#28)
  - Revised criteria regarding provider types, family therapy for adults, and staff overseeing programming

- Psychiatric Inpatient Hospitalization (#29)
  - o Revised criteria regarding provider types and family therapy for adults
- Psychiatric Intensive Outpatient (#30)
  - Revised criteria regarding provider types, family therapy for adults, and psychiatric evaluation for intensive outpatient programs
- Psychiatric Partial Hospitalization (#31)
  - Revised criteria regarding provider types and family therapy for adults
- Psychiatric Residential Treatment (#32)
  - o Revised criteria regarding provider types and family therapy for adults

## **Medicare Advantage**

### **Changes effective October 1, 2022 Surgery**

- Ventricular Assist Devices and Total Artificial Hearts (#M52)
  - Updated policy with respect to retired national coverage determination (NCD) 20.9 for Artificial Hearts and Related Devices; policy will now redirect indications previously addressed by NCD 20.9 to the Ventricular Assist Devices and Total Artificial Hearts (#52) commercial medical policy

# **Changes effective November 1, 2022 Surgery**

- Transcatheter Heart Valve Procedures (#M221)
  - Updated policy to note the Centers for Medicare & Medicaid Services-(CMS-) approved investigational device exemption (IDE) study for the Tendyne transcatheter mitral valve system
  - Updated policy to reflect the revised terminology and coverage criteria in accordance with the updated NCD for transcatheter mitral valve repair (TMVR), now termed mitral valve transcatheter edge-to-edge repair (TEER)

### Join our medical policy discussion

We welcome your input and feedback as we draft our medical policies. <u>Join our email reviewer list</u>. While we prefer to receive input as policies are developed, we also have a formal process that allows you to submit additional information, such as clinical trial results, that may warrant a policy review.

### Recent updates and archived medical policies

Recent updates and archived medical policies may include revisions that will be published in the next issue of *The Bulletin*.

## Reimbursement policies

**Disclaimer**: View the <u>terms and conditions</u> of using our *Reimbursement Policy Manual*.

### Commercial

# **Changes effective February 1, 2023 Administrative**

- Timely Receipt of Records (#145)
  - New reimbursement policy stating the following about requested records:
    - Must be received for a claim to be processed
    - Should be returned by the requested date or within 10 days
    - Should be submitted using the method in which the request was sent (e.g., Availity Essentials, fax, etc.)
    - Failure to provide within 45 days will result in member notification for the sake of transparency
    - Failure to provide within 90 days will result in claims denial

#### Medicine

- Cellular and Gene Therapy Products (#112)
  - Updating the brand name to Skysona for elivaldogene autotemcel, which has been approved by the U.S. Food and Drug Administration (FDA)
  - Revising or adding estimated FDA-approval dates for eladocagene exuparvovec, etranacogene dezaparvovec and omidubicel
  - Adding the following drugs to the Gene Therapies section of Appendix 1 pending FDA approval:
    - beremagene geperpavec (Vyjuvek)
    - exagamglogene autotemcel
    - lovotibeglogene autotemcel
    - lifileucel

## **Medicare Advantage**

### Changes effective November 1, 2022 Administrative

- Chiropractic and Osteopathic Treatments (#138)
  - New Medicare Advantage reimbursement policy will largely follow commercial medical policy with the following exceptions:
    - Clarified that CPT 98943 and 97140 may be billed for chiropractic treatment "when benefits apply"
    - Stated that HCPCS S8990 for osteopathic treatment is a Medicare exclusion

### Join our reimbursement policy discussion

Comments from physicians and other health care professionals regarding reimbursement policies are welcome. If you have a comment regarding a reimbursement policy, please complete the <u>Reimbursement Policy Feedback</u> Form.

### 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 a compliance requirement for the Affordable Care Act (ACA) and Medicare Advantage plans.

### Validating provider directory content

Please <u>follow these steps</u> to review the information about your practice every 90 days. Please respond timely to any requests from us for verification of your directory data.

If your clinic or facility submits provider rosters to us, please submit changes, corrections, additions or terminations immediately so we can update our directories as soon as possible. Your roster must be validated and reviewed in its entirety at least once per quarter.

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

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