

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 March 1, 2025

Medicine

- Extracorporeal Membrane Oxygenation (ECMO) for the Treatment of Cardiac and Respiratory Failure in Adults (#152)
 - Updated policy to address continuation of ECMO

Changes effective April 1, 2025

Durable Medical Equipment

- Mechanical Residual Limb Volume Management System for Upper Extremity Protheses (#98)
 - New policy for mechanical residual limb volume management systems (e.g., RevoFit) for upper extremity protheses

Genetic Testing

- Evaluating the Utility of Genetic Panels (#64)
 - Added 13 investigational panel tests from the policy
 - Removed 101 tests from the policy

Laboratory

- Investigational Gene Expression, Biomarker, and Multianalyte Testing (#77)
 - Added the myOLARIS™-KTdx to the policy
 - Changed the DetermaRx test to the new name, RiskReveal

Surgery

- Orthognathic Surgery (#137)
 - Clarified policy criteria for functional impairments and documentation of orthodontic treatment

Changes effective July 1, 2025

Durable Medical Equipment

- Negative Pressure Wound Therapy in the Outpatient Setting (#42)
 - Adding indications for coverage
 - Clarifying criteria addressing nutritional status
 - Adding criteria and required documentation for evaluation of arterial status for neuropathic ulcers

Surgery

- Electromagnetic Navigation Bronchoscopy (#179)
 - New policy to address electromagnetic navigation bronchoscopy
- Knee Surgeries (#229)
 - Clarifying criteria for soft tissue and bony procedures

Utilization Management

- Air Ambulance Transport (#13)
 - Expanding post-service review of rotary air ambulance

[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 July 1, 2025

Facility

- Sepsis (#120)
 - New reimbursement policy replacing our *Treatment for Adult Sepsis* (Medicine #172) medical policy:
 - Based on the Journal of the American Medical Association's (JAMA's) 2016 sepsis 3 criteria
 - Will apply to inpatient facilities
 - Defines an adult as 18 or older
 - **Note:** Acute care hospitalizations for sepsis require accurate coding supported by clear documentation from a qualified health care professional and in accordance with ICD-10-CM.

[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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