

# The Bulletin

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

Our provider website includes [monthly summaries of changes](#) to our reimbursement and medication policies, pre-authorization requirements, *Administrative Manual* and programs or incentives that may impact your office.

## Medical policies

**Disclaimer:** View the [terms and conditions](#) of using our *Medical Policy Manual*.

### 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)
  - 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)
  - Revised criteria regarding provider types and family therapy for adults

### Join our medical policy discussion

We welcome your input and feedback as we draft our medical policies. [Join our email reviewer list](#). 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 [terms and conditions](#) of using our *Reimbursement Policy Manual*.

### 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 eladocogene 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

## 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).

## Validating provider directory content

Please [follow these steps](#) 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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