

# 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*.

## Medical policies

### Commercial

#### Changes effective April 1, 2023

##### Behavioral Health

- Eating Disorder Intensive Outpatient (#26)
  - Adjusted hour requirements for intensive outpatient (IOP)
- Eating Disorder Partial Hospitalization (#27)
  - Adjusted hour requirements for partial hospitalization (PHP)
- Psychiatric Intensive Outpatient (#30)
  - Adjusted hour requirements for IOP
- Psychiatric Partial Hospitalization (#31)
  - Adjusted hour requirements for PHP

##### Durable Medical Equipment

- Electrical Bone Growth Stimulators (Osteogenic Stimulation) (#83.11)
  - Reorganized the medically necessary criteria
  - Simplified the not medically necessary and investigational criteria
  - No change to policy intent

##### Genetic Testing

- ClonoSEQ® Testing for the Assessment of Measurable Residual Disease (MRD) (#88)
  - New medical policy addresses clonoSEQ testing for measurable residual disease (MRD)
- Serologic Genetic and Molecular Screening for Colorectal Cancer (#86)
  - Added ColoScape test to the medical policy

##### Laboratory

- Investigational Gene Expression, Biomarker, and Multianalyte Testing (#77)
  - Added four new investigational tests to the medical policy

## Medicine

- Digital Therapeutic Products for Chronic Low Back Pain (#175.03)
  - New medical policy considers digital therapeutic products for the treatment of chronic low back pain always investigational

## Surgery

- Surgeries for Snoring, Obstructive Sleep Apnea Syndrome, and Upper Airway Resistance Syndrome (#166)
  - Clarified policy criteria

## Transplant

- Hematopoietic Cell Transplantation for Miscellaneous Solid Tumors in Adults (#45.27)
  - Clarified that Ewing sarcoma diagnosed at any age should follow criteria in the *Hematopoietic Cell Transplantation for Solid Tumors of Childhood* (Transplant #45.37) medical policy

## Changes effective July 1, 2023

### Laboratory

- Investigational Gene Expression, Biomarker, and Multianalyte Testing (#77)
  - Adding two new tests to the policy:
    - Lyme ImmunoBlot IgG
    - IgM tests

[View our commercial  
Medical Policy Manual](#)

## Medicare Advantage

### Changes effective April 1, 2023

#### Durable Medical Equipment

- Bone Growth Stimulators (Osteogenic Stimulation) (#83.12)
  - Updated to state that relevant information continues to be required and will be accepted by the plan with or without a certificate of medical necessity (CMN); the Centers for Medicare & Medicaid Services (CMS) has removed the CMN requirement

#### Genetic Testing

- Genetic and Molecular Diagnostics – Next Generation Sequencing, Genetic Panels, and Biomarker Testing (#64)
  - Added 16 new tests with CMS guidance and new CPT codes to the medical policy

## Medicine

- Digital Therapeutic Products for Chronic Low Back Pain (#175.03)
  - New Medicare Advantage medical policy addresses digital therapeutic products for the treatment of chronic low back pain

[View our Medicare Advantage Medical Policy Manual](#)

## 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

## Commercial

**Changes effective April 1, 2023**

### Administrative

- Incident to Services (#148)
  - Clarified the intent for supervising providers and for associate staff who can render incident-to services

### Anesthesia

- Anesthesia Reimbursement and Services Reporting (#102)
  - Clarified modifiers that can be billed on anesthesia claims, depending on who is billing
  - Clarified pricing allowed for modifiers that can be billed on anesthesia claims

# Medicare Advantage

Changes effective April 1, 2023

## Administrative

- Incident to Services (#148)
  - Clarified the intent for supervising providers and for associate staff who can render incident-to services

## Anesthesia

- Anesthesia Reimbursement and Services Reporting (#102)
  - Clarified modifiers that can be billed on anesthesia claims, depending on who is billing

[View our Reimbursement Policy Manual](#)

## 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 [Reimbursement Policy Feedback 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 [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.