

# 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 [monthly summaries of changes](#) 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 December 1, 2022

#### Genetic Testing

- Reproductive Carrier Screening for Genetic Diseases (#81)
  - Clarified the policy's criteria by replacing the term "targeted" with "risk-based"; added an explanation of the terms in the policy guidelines
  - Added language to criteria regarding X-linked disorder risk threshold

#### Medicine

- Digital Therapeutic Products (#175)
  - Changed policy title to reflect policy's narrow scope; policy was previously titled *Digital Health Products*
- Digital Therapeutic Products for Attention Deficit Hyperactivity Disorder (#175.01)
  - Changed policy title to reflect policy's narrow scope; policy was previously titled *Digital Health Products for Attention Deficit Hyperactivity Disorder*
- Digital Therapeutic Products for Substance Use Disorders (#175.02)
  - Changed policy title to reflect policy's narrow scope; policy was previously titled *Digital Health Products for Substance Use Disorders*

## Changes effective March 1, 2023

### Durable Medical Equipment

- Electrical Bone Growth Stimulators (Osteogenic Stimulation) (#83.11)
  - Updating criteria to reflect either at least three months since fracture or most recent open reduction for treatment of fracture nonunion
  - Changing electrical stimulation for the treatment of osteotomy, stress reaction and bone marrow edema from investigational to not medically necessary

## Medicare Advantage

### Changes effective December 1, 2022

#### Genetic Testing

- Genetic and Molecular Diagnostics – Next Generation Sequencing and Genetic Panel Testing (#64)
  - Updated the policy with respect to local coverage determinations (LCDs) and articles (LCAs) as they are phased out and replaced with new LCDs and LCAs
  - Added several new tests with Centers for Medicare & Medicaid Services (CMS) guidance

### 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*.

## Commercial

### Changes effective December 1, 2022

#### Medicine

- Cellular and Gene Therapy Products (#112)
  - Changing drug name from EtranaDez to Hemgenix
  - Updating Roctavian's estimated U.S. Food and Drug Administration- (FDA-) approval date to March 31, 2023

## Changes effective March 1, 2023 Facility

- Inpatient Medications Reimbursed Under Medical Coverage (#116)
  - Setting a deadline of 15 days from our request for a National Drug Code (NDC) or invoice to be provided; if neither is provided in that time, we will price at 100% of the most applicable average wholesale price

### 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.

[Subscribe](#) | [Unsubscribe](#) | [Update preferences](#) | [Online privacy and security](#)

© 2022 Asuris P.O. Box 91130 Seattle, WA, 98111-9230, USA