

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*.

Medical policies

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

Changes effective March 1, 2023

Genetic Testing

- BRAF Genetic Testing to Select Melanoma or Glioma Patients for Targeted Therapy (#41)
 - Updated policy to allow BRAF testing for patients with advanced, metastatic or unresectable glioma

Laboratory

- Multimarker and Proteomics-based Serum Testing Related to Ovarian Cancer (#60)
 - Added new branded test names to policy criteria language with no change in implementation

Medicine

- Gender Affirming Interventions for Gender Dysphoria (#153)
 - Edited criteria to:
 - Require only one referral from a licensed mental health professional
 - Establish that the requested procedure must be specific to the primary and/or secondary sex characteristics of some alternative gender different from one's assigned gender and would not be pursued for other reasons

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 June 1, 2023

Administrative

- Physician Concierge Services (#130)
 - New reimbursement policy

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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