

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 policy updates are published in *The Connection*. Dental policy updates are published in the News section of asurisdental.com/providers.

Medical policies

Commercial

Changes effective December 1, 2023

Durable Medical Equipment

- Negative Pressure Wound Therapy in the Outpatient Setting (#42)
 - Clarified criteria for associated clinical care and supplies for effective use of a negative pressure wound therapy (NPWT) system (e.g., wound care services)

Medicine

- Extracorporeal Membrane Oxygenation (ECMO) for the Treatment of Cardiac and Respiratory Failure in Adults (#152)
 - Simplified the criteria for end-stage lung failure
 - Added language for patients unable to wean from extracorporeal membrane oxygenation (ECMO)

Surgery

- Leadless Cardiac Pacemakers (#217)
 - Expanded criteria to include U.S. Food and Drug Administration- (FDA-) approved devices

Transplant

- Heart Transplant (#02)
 - Clarified criteria related to ventricular assist devices (VADs) prior to heart transplant
- Hematopoietic Cell Transplantation for Central Nervous System Embryonal Tumors and Ependymoma (#45.33)
 - Updated criteria to address stem cell collection

- Hematopoietic Cell Transplantation for Multiple Myeloma and POEMS Syndrome (#45.22)
 - Clarified criteria without change to intent

Utilization Management

- Air Ambulance Transport (#13)
 - Clarified not medically necessary criteria

[View our commercial
Medical Policy Manual](#)

Medicare Advantage

Changes effective December 1, 2023

Medicine

- Digital Therapeutic Products for Chronic Low Back Pain (#175.03)
 - Medicare coverage guidance is not available for virtual reality cognitive behavioral therapy devices that deliver multimodal pain self-management programs; therefore, our commercial *Digital Therapeutic Products for Chronic Low Back Pain* (#175.03) medical policy applies to these devices

Surgery

- Percutaneous Transluminal Angioplasty (PTA) and Stenting (#207)
 - Added guidance from national coverage analysis (NCA) decision memo, effective October 11, 2023

[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 December 1, 2023

Medicine

- Cellular and Gene Therapy Products (#112)
 - Added fidanacogene elaparvovec (effective upon FDA approval, estimated in the first half of 2024) to the gene therapy products listed in Appendix 1

Modifiers

- Modifier 73 & 74; Discontinued Procedural Services (#116)
 - Clarified that only the primary intended procedure should be submitted with modifier 73

Changes effective March 1, 2024

Administrative

- Chiropractic and Osteopathic Treatment (#138)
 - Minor formatting changes in the definitions section
 - Added MDs and DOs within the definition of osteopathic manipulative treatment (OMT)
 - Clarified that chiropractic manipulation codes are only reimbursable to chiropractors and osteopathic manipulation codes are only reimbursable to MDs and DOs
 - Clarified that chiropractic and osteopathic treatment claims must include at least one of the codes specific to that provider type
 - Added the Alternative Care section of our *Administrative Manual* under References, including a link to the *Administrative Manual* on our provider website
- Intermittent Catheter Supplies (#149)
 - New reimbursement policy follows guidelines from the Centers for Medicare & Medicaid Services (CMS)

Medicare Advantage

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- Intermittent Catheter Supplies (#149)
 - New reimbursement policy follows CMS guidelines

[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.

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