

## ***Medical Policies and Clinical Utilization Management Guidelines***

Attached is a list of the *Clinical UM Guidelines* and/or *Medical Policies* the health plan has adopted.

The full list of *Medical Policies* and *Clinical Utilization Management (UM) Guidelines* are publicly available on the [Amerigroup Medical Policy and Clinical UM Guideline subsidiary website](#). Their purpose is to help you provide quality care by reducing inappropriate use of medical resources.

InterQual® Criteria or MCG® care guidelines are used only for:

- Medical necessity review for medical inpatient concurrent review.
- Inpatient site of service appropriateness.
- Home health and outpatient rehabilitation.

Medicaid state contracts, regulatory guidance and CMS requirements supersede InterQual Criteria, MCG care guidelines and our *Medical Policy* criteria.

Note: We make determinations of medical necessity on a case-by-case basis in accordance with the definition of medical necessity. Please see *Medical Necessity Criteria Policy ADMIN.0004* for the definition.

If the request doesn't meet established criteria guidelines, it will be referred to the licensed physician reviewer with the appropriate clinical expertise.

## ***Clinical Utilization Management Guidelines***

The new *Clinical Utilization Management (UM) Guidelines* below were adopted by the medical operations committee for Amerigroup members on May 7, 2019. These guidelines take effect 30 days from posting. Note, not all of the services and codes referenced within these guidelines are reimbursed under Medicaid or CHIP. Please refer to Medicaid or CHIP guidelines for coverage and reimbursement information.

To view a guideline, visit [https://medicalpolicies.amerigroup.com/am\\_search.html](https://medicalpolicies.amerigroup.com/am_search.html).

### **Notes/updates:**

- CG-DME-44 — Electric Tumor Treatment Field (TTF) was revised to add the use of enhanced computer treatment planning software (such as NovoTal) as not medically necessary (NMN) in all cases
- CG-MED-72 — Hyperthermia for Cancer Therapy was revised to clarify medically necessary (MN) and NMN statements addressing frequency of treatment
- CG-SURG-09 — Temporomandibular Disorders was revised to clarify MN and NMN criteria and removed requirement for FDA approval of prosthetic implants
- CG-SURG-30 — Tonsillectomy for Children with or without Adenoidectomy was revised to:
  - Spell out number of episodes of throat infections in MN criteria (A1, A2, A3)
  - Clarify criterion addressing parapharyngeal abscess (B4) to say *two or more*
  - Add “asthma” as potential condition improved by tonsillectomy in MN criteria (C1b)

<b>Medical Policy or Clinical UM Guidelines number</b>	<b>Medical Policy or Clinical UM Guidelines title</b>	<b>New item</b>
CG-ADMIN-01	Clinical UM Guideline for Prepayment Review Medical Necessity Determinations When No Other Clinical UM Guideline Exists	
CG-ANC-03	Acupuncture	
CG-ANC-04	Ambulance Services: Air and Water	
CG-ANC-05	Ambulance Services: Ground; Emergent	
CG-ANC-06	Ambulance Services: Ground; Nonemergent	
CG-ANC-07	Inpatient Interfacility Transfers	
CG-BEH-01	Assessment for Autism Spectrum Disorders and Rett Syndrome	
CG-BEH-02	Adaptive Behavioral Treatment for Autism Spectrum Disorder	
CG-BEH-14	Intensive In-Home Behavioral Health Services	
CG-BEH-15	Activity Therapy for Autism Spectrum Disorders and Rett Syndrome	
CG-DME-03	Neuromuscular Stimulation in the Treatment of Muscle Atrophy	
CG-DME-04	Electrical Nerve Stimulation, Transcutaneous, Percutaneous	

<b>Medical Policy or Clinical UM Guidelines number</b>	<b>Medical Policy or Clinical UM Guidelines title</b>	<b>New item</b>
CG-DME-05	Cervical Traction Devices for Home Use	
CG-DME-06	Pneumatic Compression Devices for Lymphedema	
CG-DME-07	Augmentative and Alternative Communication Devices/Speech-Generating Devices	
CG-DME-08	Infant Home Apnea Monitors	
CG-DME-09	Continuous Local Delivery of Analgesia to Operative Sites using an Elastomeric Infusion Pump During the Postoperative Period	
CG-DME-10	Durable Medical Equipment	
CG-DME-12	Home Phototherapy Devices for Neonatal Hyperbilirubinemia	
CG-DME-13	Lower Limb Prosthesis	
CG-DME-15	Hospital Beds and Accessories	
CG-DME-16	Pressure Reducing Support Systems Groups 1, 2 and 3	
CG-DME-18	Home Oxygen Therapy	
CG-DME-19	Therapeutic Shoes, Inserts or Modifications for Individuals with Diabetes	
CG-DME-20	Orthopedic Footwear	
CG-DME-21	External Infusion Pumps for the Administration of Drugs in the Home or Residential Care Settings	
CG-DME-22	Ankle-Foot and Knee-Ankle-Foot Orthotics (Braces)	
CG-DME-23	Lifting Devices for Use in the Home	
CG-DME-24	Wheeled Mobility Devices: Manual Wheelchairs — Standard, Heavy Duty and Lightweight	
CG-DME-25	Seat Lift Mechanisms	
CG-DME-26	Back-Up Ventilators in the Home Setting	
CG-DME-30	Prothrombin Time Self-Monitoring Devices	
CG-DME-31	Wheeled Mobility Devices: Wheelchairs — Powered, Motorized, With or Without Power Seating Systems, and Power Operated Vehicles	
CG-DME-33	Wheeled Mobility Devices: Manual Wheelchairs — Ultra Lightweight	
CG-DME-34	Wheeled Mobility Devices: Wheelchair Accessories	
CG-DME-35	Breastfeeding Pumps	
CG-DME-36	Pediatric Gait Trainers	
CG-DME-37	Air Conduction Hearing Aids	
CG-DME-39	Dynamic Low-Load Prolonged-Duration Stretch	
CG-DME-41	Ultraviolet Light Therapy Delivery Devices for Home Use	
CG-DME-42	Nonimplantable Insulin Infusion and Blood Glucose Monitoring Devices	
CG-DME-43	High Frequency Chest Compression Devices for Airway Clearance	
CG-DME-44	Electric Tumor Treatment Field (TTF)	
CG-DME-45	Ultrasound Bone Growth Stimulation	
CG-DME-46	Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Lower Limbs	

<b>Medical Policy or Clinical UM Guidelines number</b>	<b>Medical Policy or Clinical UM Guidelines title</b>	<b>New item</b>
CG-DRUG-01	Off-Label Drug and Approved Orphan Drug Use	
CG-DRUG-34	Docetaxel (Docefrez™, Taxotere®)	
CG-DRUG-38	Pemetrexed Disodium (Alimta®)	
CG-DRUG-40	Bortezomib (Velcade®)	
CG-DRUG-42	Asparagine Specific Enzymes (Asparaginase)	
CG-DRUG-48	Azacitidine (Vidaza®)	
CG-DRUG-49	Doxorubicin Hydrochloride Liposome Injection	
CG-DRUG-50	Paclitaxel, protein-bound (Abraxane®)	
CG-DRUG-51	Romidepsin (Istodax®)	
CG-DRUG-52	Temsirolimus (Torisel®)	
CG-DRUG-53	Drug Dosage, Frequency, and Route of Administration	
CG-DRUG-60	Gonadotropin Releasing Hormone Analogs for the Treatment of Oncologic Indications	
CG-DRUG-62	Fulvestrant (FASLODEX®)	
CG-DRUG-63	Levoleucovorin Products	
CG-DRUG-66	Panitumumab (Vectibix®)	
CG-DRUG-67	Cetuximab (Erbix®)	
CG-DRUG-68	Bevacizumab (Avastin®) for Non-Ophthalmologic Indications	
CG-DRUG-70	Eribulin mesylate (Halaven®)	
CG-DRUG-71	Ziv-aflibercept (Zaltrap®)	
CG-DRUG-72	Pertuzumab (Perjeta®)	
CG-DRUG-75	Romiplostim (Nplate®)	
CG-DRUG-76	Plerixafor Injection (Mozobil™)	
CG-DRUG-77	Radium Ra 223 Dichloride (Xofigo®)	
CG-DRUG-79	Siltuximab (Sylvant®)	
CG-DRUG-80	Cabazitaxel (Jevtana®)	
CG-DRUG-96	Ado-trastuzumab emtansine (Kadcyla®)	
CG-DRUG-98	Bendamustine Hydrochloride	
CG-DRUG-99	Elotuzumab (Empliciti™)	
CG-DRUG-100	Interferon gamma-1b (Actimmune®)	
CG-DRUG-101	Ixabepilone (Ixempra®)	
CG-DRUG-102	Olaratumab (Lartruvo™)	
CG-DRUG-106	Brentuximab Vedotin (Adcetris®)	
<b>CG-DRUG-113</b>	<b>Inotuzumab ozogamicin (Besponsa®)</b>	<b>NEW</b>
CG-GENE-01	Janus Kinase 2 (JAK2)V617F and JAK2 exon 12 Gene Mutation Assays	
CG-GENE-02	Analysis of KRAS Status	
CG-GENE-03	BRAF Mutation Analysis	
CG-GENE-04	Molecular Marker Evaluation of Thyroid Nodules	
CG-GENE-05	Genetic Testing for DMD Mutations (Duchenne or Becker Muscular Dystrophy)	
<b>CG-GENE-06</b>	<b>Preimplantation Genetic Diagnosis Testing</b>	<b>NEW</b>

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CG-GENE-07	BCR-ABL Mutation Analysis	NEW
CG-GENE-08	Genetic Testing for PTEN Hamartoma Tumor Syndrome	NEW
CG-GENE-09	Genetic Testing for CHARGE Syndrome	NEW
CG-LAB-03	Tropism Testing for HIV Management	
CG-LAB-09	Drug Testing or Screening in the Context of Substance Use Disorder and Chronic Pain	
CG-LAB-10	Zika Virus Testing	
CG-LAB-11	Screening for Vitamin D Deficiency in Average Risk Individuals	
CG-LAB-12	Testing for Oral and Esophageal Cancer	
CG-LAB-13	Skin Nerve Fiber Density Testing	
CG-LAB-14	Respiratory Viral Panel Testing in the Outpatient Setting	
CG-MED-02	Esophageal pH Monitoring	
CG-MED-05	Ketogenic Diet for Treatment of Intractable Seizures	
CG-MED-08	Home Enteral Nutrition	
CG-MED-19	Custodial Care	
CG-MED-21	Anesthesia Services and Moderate ("Conscious") Sedation	
CG-MED-23	Home Health	
CG-MED-24	Electromyography and Nerve Conduction Studies	
CG-MED-26	Neonatal Levels of Care	
CG-MED-28	Iontophoresis for Medical Indications	
CG-MED-32	Ancillary Services for Pregnancy Complications	
CG-MED-34	Monitored Anesthesia Care for Gastrointestinal Endoscopic Procedures	
CG-MED-35	Retinal Telescreening Systems	
CG-MED-37	Intensive Programs for Pediatric Feeding Disorders	
CG-MED-38	Inpatient admission for Radiation Therapy for Cervical or Thyroid Cancer	
CG-MED-39	Central (Hip or Spine) Bone Density Measurement and Screening for Vertebral Fractures Using Dual Energy X-Ray Absorptiometry	
CG-MED-40	External Ambulatory Event Monitors to Detect Cardiac Arrhythmias	
CG-MED-41	Moderate to Deep Anesthesia Services for Dental Surgery in the Facility Setting	
CG-MED-42	Maternity Ultrasound in the Outpatient Setting	
CG-MED-44	Holter Monitors	
CG-MED-45	Transrectal Ultrasonography	
CG-MED-46	Electroencephalography and Video Electroencephalographic Monitoring	
CG-MED-47	Fundus Photography	
CG-MED-48	Scrotal Ultrasound	
CG-MED-49	Auditory Brainstem Responses and Evoked Otoacoustic Emissions for Hearing Disorders	
CG-MED-50	Visual, Somatosensory and Motor Evoked Potentials	

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CG-MED-51	Three-Dimensional Rendering of Imaging Studies	
CG-MED-52	Allergy Immunotherapy (Subcutaneous)	
CG-MED-53	Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing	
CG-MED-54	Strapping	
CG-MED-55	Level of Care: Advanced Radiologic Imaging	
CG-MED-56	Non-Obstetrical Transvaginal Ultrasonography	
CG-MED-57	Cardiac Stress Testing with Electrocardiogram	
CG-MED-59	Upper Gastrointestinal Endoscopy	
CG-MED-61	Preoperative Testing for Low Risk Invasive Procedures and Surgeries	
CG-MED-62	Resting Electrocardiogram Screening in Adults	
CG-MED-63	Treatment of Hyperhidrosis	
CG-MED-64	Transcatheter Ablation of Arrhythmogenic Foci in the Pulmonary Veins as a Treatment of Atrial Fibrillation or Atrial Flutter (Radiofrequency and Cryoablation)	
CG-MED-66	Cryopreservation of Oocytes or Ovarian Tissue	
CG-MED-67	Melanoma Vaccines	
CG-MED-68	Therapeutic Apheresis	
CG-MED-69	Inhaled Nitric Oxide	
CG-MED-70	Wireless Capsule Endoscopy for Gastrointestinal Imagine and the Patency Capsule	
CG-MED-71	Wound Care in the Home Setting	
CG-MED-72	Hyperthermia for Cancer Therapy	
CG-MED-73	Hyperbaric Oxygen Therapy (Systemic/Topical)	
CG-MED-74	Implantable Ambulatory Event Monitors and Mobile Cardiac Telemetry	
CG-MED-75	Medical and Other Non-Behavioral Health Related Treatments for Autism Spectrum Disorders and Rett Syndrome	
CG-MED-76	Magnetic Source Imaging and Magnetoencephalography	
CG-MED-77	SPECT/CT Fusion Imaging	
CG-MED-78	Anesthesia Services for Interventional Pain Management Procedures	
CG-MED-79	Diaphragmatic/Phrenic Nerve Stimulation and Diaphragm Pacing Systems	
CG-MED-80	Positron Emission Tomography (PET) and PET/CT Fusion	
CG-MED-81	High Intensity Focused Ultrasound (HIFU) for Oncologic Indications	NEW
CG-MED-82	Intravenous versus Oral Drug Administration in the Outpatient and Home Setting	NEW
CG-MED-83	Level of Care: Specialty Pharmaceuticals	NEW
CG-OR-PR-02	Prefabricated and Prophylactic Knee Braces	
CG-OR-PR-03	Custom-made Knee Braces	

<b>Medical Policy or Clinical UM Guidelines number</b>	<b>Medical Policy or Clinical UM Guidelines title</b>	<b>New item</b>
CG-OR-PR-04	Cranial Remodeling Bands and Helmets (Cranial Orthotics)	
CG-OR-PR-05	Myoelectric Upper Extremity Prosthesis Devices	
CG-OR-PR-06	Spinal Orthoses: Thoracic-Lumber-Sacral (TLSO), Lumbar-Sacral (LSO), and Lumber	
CG-REHAB-02	Outpatient Cardiac Rehabilitation	
CG-REHAB-03	Pulmonary Rehabilitation	
CG-REHAB-04	Physical Therapy	
CG-REHAB-05	Occupational Therapy	
CG-REHAB-06	Speech-Language Pathology Services	
CG-REHAB-07	Skilled Nursing and Skilled Rehabilitation Services (Outpatient)	
CG-REHAB-08	Private Duty Nursing in the Home Setting	
CG-REHAB-10	Level of Care: Outpatient Physical Therapy, Occupational Therapy and	
CG-REHAB-11	Cognitive Rehabilitation	
CG-SURG-01	Colonoscopy	
CG-SURG-03	Blepharoplasty, Blepharoptosis Repair and Brow Lift	
CG-SURG-05	Maze Procedure	
CG-SURG-07	Vertical Expandable Prosthetic Titanium Rib	
CG-SURG-08	Sacral Nerve Stimulation as a Treatment of Neurogenic Bladder Secondary to Spinal Cord Injury	
CG-SURG-09	Temporomandibular Disorders	
CG-SURG-10	Ambulatory or Outpatient Surgery Center Procedures	
CG-SURG-11	Surgical Treatment for Dupuytren's Contracture	
CG-SURG-12	Penile Prosthesis Implantation	
CG-SURG-15	Endometrial Ablation	
CG-SURG-17	Trigger Point Injections	
CG-SURG-18	Septoplasty	
CG-SURG-24	Functional Endoscopic Sinus Surgery	
CG-SURG-25	Injection Treatment for Morton's Neuroma	
CG-SURG-27	Sex Reassignment Surgery	
CG-SURG-28	Transcatheter Uterine Artery Embolization	
CG-SURG-29	Lumbar Discography	
CG-SURG-30	Tonsillectomy with or without Adenoidectomy for Children	
CG-SURG-31	Treatment of Keloids and Scar Revision	
CG-SURG-34	Diagnostic Infertility Surgery	
CG-SURG-35	Intracytoplasmic Sperm Injection (ICSI)	
CG-SURG-36	Adenoidectomy	
CG-SURG-37	Destruction of Pre-Malignant Skin Lesions	
CG-SURG-40	Cataract Removal Surgery for Adults	
CG-SURG-41	Surgical Strabismus Correction	
CG-SURG-46	Myringotomy and Tympanostomy Tube Insertion	

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CG-SURG-49	Endovascular Techniques (Percutaneous or Open Exposure) for Arterial Revascularization of the Lower Extremities	
CG-SURG-50	Assistant Surgeons	
CG-SURG-51	Outpatient Cystourethroscopy	
CG-SURG-52	Level of Care: Hospital-Based Ambulatory Surgical Procedures, including Endoscopic Procedures	
CG-SURG-55	Intracardiac Electrophysiological Studies and Catheter Ablation	
CG-SURG-56	Diagnostic Fiberoptic Flexible Laryngoscopy	
CG-SURG-57	Diagnostic Nasal Endoscopy	
CG-SURG-58	Radioactive Seed Localization of Nonpalpable Breast Lesions	
CG-SURG-59	Vena Cava Filters	
CG-SURG-61	Cryosurgical Ablation of Solid Tumors Outside the Liver	
CG-SURG-62	Radiofrequency Ablation to Treat Tumors Outside the Liver	
CG-SURG-63	Cardiac Resynchronization Therapy (CRT) with or without an Implantable Cardioverter Defibrillator (CRT/ICD) for the Treatment of Heart Failure	
CG-SURG-70	Gastric Electrical Stimulation	
CG-SURG-71	Reduction Mammoplasty	
CG-SURG-72	Endothelial Keratoplasty	
CG-SURG-73	Balloon Sinus Ostial Dilation	
CG-SURG-74	Total Ankle Replacement	
CG-SURG-75	Transanal Endoscopic Microsurgical (TEM) Excision of Rectal Lesions	
CG-SURG-76	Carotid, Vertebral and Intracranial Artery Stent Placement with or without Angioplasty	
CG-SURG-77	Refractive Surgery	
CG-SURG-78	Locally Ablative Techniques for Treating Primary and Metastatic Liver Malignancies	
CG-SURG-79	Implantable Infusion Pumps	
CG-SURG-80	Transcatheter Arterial Chemoembolization (TACE) and Transcatheter Arterial Embolization (TAE) for Treating Primary or Metastatic Liver Tumore	
CG-SURG-81	Cochlear Implants and Auditory Brainstem Implants	
CG-SURG-82	Bone-Anchored and Bone Conduction Hearing Aids	
CG-SURG-83	Bariatric Surgery and Other Treatments for Clinically Severe Obesity	
CG-SURG-84	Mandibular/Maxillary (Orthognathic) Surgery	
CG-SURG-85	Hip Resurfacing	
CG-SURG-86	Endovascular/Endoluminal Repair of Aortic Aneurysms, Aortoiliac Disease, Aortic Dissection and Aortic Transection	
CG-SURG-87	Nasal Surgery for the Treatment of Obstructive Sleep Apnea and Snoring	
CG-SURG-88	Mastectomy for Gynecomastia	



<b>Medical Policy or Clinical UM Guidelines number</b>	<b>Medical Policy or Clinical UM Guidelines title</b>	<b>New item</b>
CG-SURG-89	Radiofrequency Neurolysis and Pulsed Radiofrequency Therapy for Trigeminal Neuralgia	
CG-SURG-90	Mohs Micrographic Surgery	
CG-SURG-91	Minimally Invasive Ablative Procedures for Epilepsy	
CG-SURG-92	Paraesophageal Hernia Repair	
CG-SURG-93	Angiographic Evaluation and Endovascular Intervention for Dialysis Access Circuit Dysfunction	
CG-SURG-94	Keratoprosthesis	
CG-SURG-95	Sacral Nerve Stimulation and Percutaneous Tibial Nerve Stimulation for Urinary and Fecal Incontinence; Urinary Retention	
CG-SURG-96	Intraocular Telescope	
CG-SURG-97	Cardioverter Defibrillators	NEW
CG-SURG-98	Prostate Multiparametric Magnetic Resonance Imaging	NEW
CG-SURG-99	Panniculectomy and Abdominoplasty	NEW
CG-THER-RAD-03	Radioimmunotherapy and Somatostatin Receptor Targeted Radiotherapy	
CG-THER-RAD-04	Selective Internal Radiation Therapy of Primary or Metastatic Liver Tumors	
CG-THER-RAD-07	Intravascular Brachytherapy (Coronary and Non-Coronary)	
CG-TRANS-02	Kidney Transplantation	
CG-TRANS-03	Donor Lymphocyte Infusion for Hematologic Malignancies after Allogeneic Hematopoietic Progenitor Cell Transplantation	