

Provider Update

Medical policies update

Summary: On November 5, 2015, the Amerigroup* Medical Policy and Technology Assessment Committee (MPTAC) approved the following medical policies. These medical policies were developed or revised to support clinical coding edits. Several policies were revised to provide clarification only and are not included in the below listing. The medical policies were made publicly available on the Amerigroup provider website on the effective date listed below. Visit medicalpolicies.amerigroup.com/search to search for specific policies. Existing precertification requirements have not changed.

Medical policy effective date	Medical policy number	Medical policy	Medical policy (new/revised)
November 23, 2015	DRUG.00079	Bendamustine Hydrochloride (TREANDA®)	New
November 9, 2015	DRUG.00080	Mepolizumab (Nucala®)	New
January 5, 2016	THER-RAD.00011	Image-guided Radiation Therapy (IGRT) with External Beam Radiation Therapy (EBRT)	New
November 23, 2015	DRUG.00039	Trastuzumab (Herceptin®)	Revised
November 9, 2015	GENE.00029	Genetic Testing for Breast and/or Ovarian Cancer Syndrome	Revised
January 5, 2016	LAB.0031	Advanced Lipoprotein Testing	Revised
January 5, 2016	MED.0103	Automated Evacuation of Meibomian Gland	Revised
January 5, 2016	MED.00113	Therapeutic Apheresis	Revised
January 5, 2016	SURG.00024	Bariatric Surgery and Other Treatments for Clinically Severe Obesity	Revised
January 5, 2016	THER-RAD.00008	Neutron Beam Radiotherapy	Revised
January 5, 2016	DME.00035	Electric Tumor Treatment Field (TTF)	Revised
January 5, 2016	MED.00080	Cryopreservation of Oocytes or Ovarian Tissue	Revised

Category changes

Summary: The following three medical policies have changed category placement. They were not reviewed at the November 5, 2015, MPTAC meeting. The new category is listed below.

Previous category and number	New category and number
RAD.00014	THER-RAD.00001 Brachytherapy for Oncologic Indications
RAD.00016	THER-RAD.00003 Intravascular Brachytherapy (Coronary and Non-Coronary)
RAD.00056	THER-RAD.00009 Intraocular Epiretinal Brachytherapy

Clinical Utilization Management Guidelines update

Summary: On November 5, 2015, the Amerigroup MPTAC approved the following Clinical Utilization Management (UM) Guidelines. These clinical guidelines were developed or revised to support clinical coding edits. Several guidelines were revised to provide clarification only and are not included in the below listing. This list represents the Clinical UM Guidelines adopted by the Medical Operations Committee for the Government Business Division on November 18, 2015.

On November 5, 2015, the clinical guidelines were made publicly available on the Amerigroup Medical Policies and Clinical UM Guidelines subsidiary website. Visit medicalpolicies.amerigroup.com/search to search for specific policies. Existing precertification requirements have not changed.

Effective date	Clinical UM Guideline number	Clinical UM Guideline title	Revised or new
January 1, 2016	CG-DME-37	Air Conduction Hearing Aids	New
January 5, 2016	CG-MED-53	Cervical Cancer Screening for Women Under 21 Years of Age	New
January 5, 2016	CG-MED-54	Strapping	New
January 5, 2016	CG-SURG-52	Level of Care: Hospital-Based Ambulatory Surgical Procedures, including Endoscopic Procedures	New
January 5, 2016	CG-THER-RAD-01	Fractionation and Radiation Therapy: Bone Metastases and Whole-Breast Irradiation Following Breast-Conserving Surgery	New
January 5, 2016	CG-THER-RAD-02	Special Radiation Physics Consult and Treatment Procedure	New
January 5, 2016	CG-DRUG-45	Octreotide acetate (Sandostatin®; Sandostatin® LAR Depot)	Revised
January 5, 2016	CG-SURG-43	Knee Arthroscopy	Revised
January 5, 2016	CG-SURG-46	Myringotomy and Tympanostomy Tube Insertion	Revised
January 5, 2016	CG-SURG-49	Endovascular Techniques (Percutaneous or Open Exposure) for Arterial Revascularization of the Lower Extremities	Revised

What if I need assistance?

Please share this notice with other members of your practice and office staff. If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.

**In Texas, Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members are served by Amerigroup Texas, Inc.*