

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

The *Medical Policies, Clinical Utilization Management (UM) Guidelines* and *Third Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed. **Please note:** The *Medical Policies* and *Clinical UM Guidelines* below are followed in the absence of Medicare guidance.

Please share this notice with other members of your practice and office staff.

To view a guideline, visit <https://medpol.providers.amerigroup.com/green-provider/medical-policies-and-clinical-guidelines>.

### **Notes/updates:**

Updates marked with an asterisk (\*) notate that the criteria may be perceived as more restrictive.

- **\*CG-LAB-17 - Molecular Gastrointestinal Pathogen Panel (GIPP) Testing for Infectious Diarrhea in the Outpatient Setting**
  - Outlines the medical necessity and not medically necessary criteria for multiplex PCR-based panel testing of gastrointestinal pathogens for infectious diarrhea in the outpatient setting
- **\*ANC.00008 - Cosmetic and Reconstructive Services of the Head and Neck**
  - Added otoplasty using a custom-fabricated device, including but not limited to a custom fabricated alloplastic implant, as cosmetic and not medically necessary
- **\*CG-OR-PR-04 - Cranial Remodeling Bands and Helmets (Cranial Orthotics)**
  - Removed condition requirement from reconstructive criteria and replaced current diagnostic reconstructive criteria with criteria based on one of the following cephalometric measurements: the cephalic index, the cephalic vault asymmetry index, the oblique diameter difference index, or the cranioproportional index of plagioccephelometry
- **\*CG-SURG-78 - Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies**
  - Added TACE using immunoembolization (for example, using granulocyte-macrophage colony-stimulating factor GM-CSF) as not medically necessary for all liver-related indications
- **\*CG-SURG-82 - Bone-Anchored and Bone Conduction Hearing Aids**
  - Revised audiologic pure tone average bone conduction threshold criteria for unilateral implant for bilateral hearing loss

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- Added not medically necessary statement for when medical necessity criteria have not been met and clarified not medically necessary statement regarding replacement parts or upgrades
- Added bone conduction hearing aids using an adhesive adapter behind the ear as not medically necessary for all indications
- **CG-GENE-22 - Gene Expression Profiling for Managing Breast Cancer Treatment**
  - A **new Clinical Guideline** was created from the content contained in GENE.00011. There are no changes to the guideline content and the publish date is April 7, 2021.
- **CG-GENE-23 - Genetic Testing for Heritable Cardiac Conditions**
  - A **new Clinical Guideline** was created from the content contained in GENE.00007 and GENE.00017. There are no changes to the guideline content and the publish date is April 7, 2021
- **CG-SURG-110 - Lung Volume Reduction Surgery**
  - A **new Clinical Guideline** was created from the content contained in SURG.00022. There are no changes to the guideline content and the publish date is June 25, 2021

**AIM Specialty Health®\* Clinical Appropriateness Guideline updates.** To view AIM guidelines, visit the [AIM Specialty Health page](#).

- The Small Joint Surgery Guideline has been revised and will be effective on March 14, 2021.
- The following Guidelines have been revised and will be effective on June 4, 2021:
  - \* Imaging of the Spine
  - \* Imaging of the Extremities
  - \* Vascular Imaging
  - \* Joint Surgery
  - \* Spine Surgery

### **Medical Policies**

On February 11, 2021, the Medical Policy and Technology Assessment Committee (MPTAC) approved the following *Medical Policies* applicable to Amerigroup. These guidelines take effect June 4, 2021.

<b>Publish date</b>	<b>Medical Policy number</b>	<b>Medical Policy title</b>	<b>New or revised</b>
4/7/2021	*ANC.00008	Cosmetic and Reconstructive Services of the Head and Neck	Revised
2/18/2021	SURG.00121	Transcatheter Heart Valve Procedures	Revised
2/18/2021	SURG.00145	Mechanical Circulatory Assist Devices (Ventricular Assist Devices, Percutaneous Ventricular Assist Devices and Artificial Hearts)	Revised

### **Clinical UM Guidelines**

On February 11, 2021, the MPTAC approved the following *Clinical UM Guidelines* applicable to Amerigroup. These guidelines were adopted by the medical operations committee for Amerigroup members on February 25, 2021. These guidelines take effect June 4, 2021.

<b>Publish date</b>	<b>Clinical UM Guideline number</b>	<b>Clinical UM Guideline title</b>	<b>New or revised</b>
4/7/2021	*CG-LAB-17	Molecular Gastrointestinal Pathogen Panel (GI-PP) Testing for Infectious Diarrhea in the Outpatient Setting	New
2/18/2021	CG-GENE-21	Cell-Free Fetal DNA-Based Prenatal Testing	Revised
4/7/2021	CG-MED-26	Neonatal Levels of Care	Revised
2/18/2021	CG-MED-87	Single Photon Emission Computed Tomography Scans for Noncardiovascular Indications	Revised
4/7/2021	*CG-OR-PR-04	Cranial Remodeling Bands and Helmets (Cranial Orthotics)	Revised
2/18/2021	CG-SURG-55	Intracardiac Electrophysiological Studies (EPS) and Catheter Ablation	Revised
4/7/2021	CG-SURG-71	Reduction Mammoplasty	Revised
4/7/2021	*CG-SURG-78	Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies	Revised
4/7/2021	*CG-SURG-82	Bone-Anchored and Bone Conduction Hearing Aids	Revised
4/7/2021	CG-SURG-97	Cardioverter Defibrillators	Revised