



Anthem Blue Cross and Blue Shield GA Medical Policy and Clinical Guideline Updates 1/1/2021

The Medical Policy and Technology Assessment Committee adopted the following new and/or revised Medical Policies and Clinical Guidelines. Some may have expanded rationales, medical necessity indications or criteria and some may involve changes to policy position statements that might result in services that previously were covered being found to be either not medically necessary or investigational/not medically necessary. Clinical Guidelines adopted by Anthem Blue Cross and Blue Shield and all the Medical Policies are available at the Anthem Blue Cross and Blue Shield website (Choose Providers > Medical Policies). Please note our medical policies now include NOC (Not Otherwise Classified) codes to expedite the process of determining services that may require medical review. If you don't have access to the Internet, you may request a hard copy of a specific Medical or Behavioral Health Policy or Clinical UM Guideline by calling Provider Services at (800) 241-7475 Monday - Friday from 8 AM to 7 PM or send written requests (specifying medical policy or guideline of interest, your name and address to where information should be sent) to:

Anthem Blue Cross and Blue Shield

Attention: Prior Approval, Mail Code GAG009-0002
3350 Peachtree Road NE
Atlanta, GA 30326

NOTE: Any Clinical Guideline included in this standard MPTAC notification is only effective for GA if included on the GA Standard Adopted Clinical Guideline List unless there is a group-specific review requirement in which case it will be considered 'Adopted' for that group only and for the specific type of review required. Additionally, as part of the Pre-Payment Review Program for commercial or Federal Employee Health Benefits Program (FEHBP) plans, Clinical Guidelines approved by Medical Policy and Technology Assessment Committee (MPTAC) but not included in the GA Standard Adopted Clinical Guideline List may be used to review a provider's claims when a provider's billing practices are not consistent with other providers in terms of frequency or in some other manner or for provider education and are "Adopted" for those purposes.

Publish Date	Committee Action	Policy or Guideline Number	Policy or Guideline Title
4/1/2021	New	GENE.00055	Gene Expression Profiling for Risk Stratification of Inflammatory Bowel Disease (IBD) Severity
4/1/2021	New	LAB.00037	Serologic Testing for Biomarkers of Irritable Bowel Syndrome (IBS)
4/1/2021	New	SURG.00158	Implantable Peripheral Nerve Stimulation Devices as a Treatment for Pain
	REVISED		
12/16/2020	Revised	ADMIN.00001	Medical Policy Formation

11/12/2020	Revised	ANC.00009	Cosmetic and Reconstructive Services of the Trunk and Groin
TBD	Revised	CG-BEH-02	Adaptive Behavioral Treatment Previous title: Adaptive Behavioral Treatment for Autism Spectrum Disorder
12/16/2020	Revised	CG-DME-19	Therapeutic Shoes, Inserts or Modifications for Individuals with Diabetes
12/16/2020	Revised	CG-DME-21	External Infusion Pumps for the Administration of Drugs in the Home or Residential Care Settings
12/16/2020	Revised	CG-DME-30	Prothrombin Time Self-Monitoring Devices
11/12/2020	Revised	CG-DME-42	Non-implantable Insulin Infusion and Blood Glucose Monitoring Devices
12/16/2020	Revised	CG-GENE-04	Molecular Marker Evaluation of Thyroid Nodules
12/16/2020	Revised	CG-GENE-12	PIK3CA Mutation Testing for Malignant Conditions
12/16/2020	Revised	CG-GENE-18	Genetic Testing for TP53 Mutations
12/16/2020	Revised	CG-GENE-20	Epidermal Growth Factor Receptor (EGFR) Testing
12/16/2020	Revised	CG-LAB-14	Respiratory Viral Panel Testing in the Outpatient Setting
12/16/2020	Revised	CG-MED-23	Home Health
12/16/2020	Revised	CG-MED-26	Neonatal Levels of Care
12/16/2020	Revised	CG-MED-38	Inpatient Admission for Radiation Therapy for Cervical or Thyroid Cancer
12/16/2020	Revised	CG-MED-53	Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing
11/12/2020	Revised	CG-MED-59	Upper Gastrointestinal Endoscopy in Adults
11/12/2020	Revised	CG-MED-87	Single Photon Emission Computed Tomography Scans for Noncardiovascular Indications
12/16/2020	Revised	CG-SURG-10	Ambulatory or Outpatient Surgery Center Procedures
12/16/2020	Revised	CG-SURG-94	Keratoprosthesis

4/1/2021	Revised	DME.00011	Electrical Stimulation as a Treatment for Pain and Other Conditions: Surface and Percutaneous Devices
11/12/2020	Revised	GENE.00052	Whole Genome Sequencing, Whole Exome Sequencing, Gene Panels, and Molecular Profiling
12/16/2020	Revised	MED.00116	Near-Infrared Spectroscopy Brain Screening for Hematoma Detection
11/12/2020	Revised	MED.00129	Gene Therapy for Spinal Muscular Atrophy
12/16/2020	Revised	SURG.00011	Allogeneic, Xenographic, Synthetic and Composite Products for Wound Healing and Soft Tissue Grafting
4/1/2021	Revised	SURG.00062	Vein Embolization as a Treatment for Pelvic Congestion Syndrome and Varicocele Previous title: Ovarian and Internal Iliac Vein Embolization as a Treatment of Pelvic Congestion Syndrome
12/16/2020	Revised	SURG.00145	Mechanical Circulatory Assist Devices (Ventricular Assist Devices, Percutaneous Ventricular Assist Devices and Artificial Hearts)
	MCG		
			Optimal Recovery Guideline
4/1/2021	MCG - Customization	W0170	• Gastrointestinal Bleeding, Upper
			Observation Care Guideline
4/1/2021	MCG - Customization	W0171	• Gastrointestinal Bleeding, Upper: Observation Care
	REVIEWED		
12/16/2020	Reviewed	CG-ANC-04	Ambulance Services: Air and Water
12/16/2020	Reviewed	CG-ANC-05	Ambulance Services: Ground; Emergent
12/16/2020	Reviewed	CG-ANC-07	Inpatient Interfacility Transfers
12/16/2020	Reviewed	CG-BEH-01	Assessment of Autism Spectrum Disorders and Rett Syndrome

12/16/2020	Reviewed	CG-BEH-14	Intensive In-Home Behavioral Health Services
12/16/2020	Reviewed	CG-BEH-15	Activity Therapy for Autism Spectrum Disorders and Rett Syndrome
12/16/2020	Reviewed	CG-DME-13	Lower Limb Prosthesis
12/16/2020	Reviewed	CG-DME-20	Orthopedic Footwear
12/16/2020	Reviewed	CG-DME-24	Wheeled Mobility Devices: Manual Wheelchairs – Standard, Heavy Duty and Lightweight
12/16/2020	Reviewed	CG-DME-31	Wheeled Mobility Devices: Wheelchairs–Powered, Motorized, With or Without Power Seating Systems and Power Operated Vehicles (POVs)
12/16/2020	Reviewed	CG-DME-33	Wheeled Mobility Devices: Manual Wheelchairs–Ultra Lightweight
12/16/2020	Reviewed	CG-DME-34	Wheeled Mobility Devices: Wheelchair Accessories
12/16/2020	Reviewed	CG-DME-37	Air Conduction Hearing Aids
12/16/2020	Reviewed	CG-DME-40	Noninvasive Electrical Bone Growth Stimulation of the Appendicular Skeleton
12/16/2020	Reviewed	CG-DME-43	High Frequency Chest Compression Devices for Airway Clearance
12/16/2020	Reviewed	CG-GENE-05	Genetic Testing for DMD Mutations (Duchenne or Becker Muscular Dystrophy)
12/16/2020	Reviewed	CG-GENE-15	Genetic Testing for Lynch Syndrome, Familial Adenomatous Polyposis (FAP), Attenuated FAP and MYH-associated Polyposis
12/16/2020	Reviewed	CG-GENE-17	RET Proto-oncogene Testing for Endocrine Gland Cancer Susceptibility
12/16/2020	Reviewed	CG-GENE-19	Detection and Quantification of Tumor DNA Using Next Generation Sequencing in Lymphoid Cancers

12/16/2020	Reviewed	CG-LAB-03	Tropism Testing for HIV Management
12/16/2020	Reviewed	CG-LAB-09	Drug Testing or Screening in the Context of Substance Use Disorder and Chronic Pain
12/16/2020	Reviewed	CG-LAB-13	Skin Nerve Fiber Density Testing
12/16/2020	Reviewed	CG-MED-19	Custodial Care
12/16/2020	Reviewed	CG-MED-21	Anesthesia Services and Moderate (“Conscious”) Sedation
12/16/2020	Reviewed	CG-MED-28	Iontophoresis for Medical Indications
12/16/2020	Reviewed	CG-MED-32	Ancillary Services for Pregnancy Complications
12/16/2020	Reviewed	CG-MED-42	Maternity Ultrasound in the Outpatient Setting
12/16/2020	Reviewed	CG-MED-54	Strapping
12/16/2020	Reviewed	CG-MED-71	Chronic Wound Care in the Home or Outpatient Setting
12/16/2020	Reviewed	CG-MED-73	Hyperbaric Oxygen Therapy (Systemic/Topical)
12/16/2020	Reviewed	CG-MED-79	Diaphragmatic/Phrenic Nerve Stimulation and Diaphragm Pacing Systems
12/16/2020	Reviewed	CG-MED-81	High Intensity Focused Ultrasound (HIFU) for Oncologic Indications
12/16/2020	Reviewed	CG-MED-84	Non-Obstetric Gynecologic Duplex Ultrasonography of the Abdomen and Pelvis in the Outpatient Setting
12/16/2020	Reviewed	CG-MED-85	Posterior Segment Optical Coherence Tomography
12/16/2020	Reviewed	CG-MED-86	Enhanced External Counterpulsation in the Outpatient Setting
12/16/2020	Reviewed	CG-OR-PR-03	Custom-made Knee Braces

12/16/2020	Reviewed	CG-OR-PR-04	Cranial Remodeling Bands and Helmets (Cranial Orthotics)
12/16/2020	Reviewed	CG-OR-PR-05	Myoelectric Upper Extremity Prosthetic Devices
12/16/2020	Reviewed	CG-REHAB-02	Outpatient Cardiac Rehabilitation
12/16/2020	Reviewed	CG-SURG-03	Blepharoplasty, Blepharoptosis Repair, and Brow Lift
12/16/2020	Reviewed	CG-SURG-29	Lumbar Discography
12/16/2020	Reviewed	CG-SURG-41	Surgical Strabismus Correction
12/16/2020	Reviewed	CG-SURG-70	Gastric Electrical Stimulation
12/16/2020	Reviewed	CG-SURG-71	Reduction Mammoplasty
12/16/2020	Reviewed	CG-SURG-72	Endothelial Keratoplasty
12/16/2020	Reviewed	CG-SURG-75	Transanal Endoscopic Microsurgical (TEM) Excision of Rectal Lesions
12/16/2020	Reviewed	CG-SURG-77	Refractive Surgery
12/16/2020	Reviewed	CG-SURG-91	Minimally Invasive Ablative Procedures for Epilepsy
12/16/2020	Reviewed	CG-SURG-92	Paraesophageal Hernia Repair
4/1/2021	Reviewed	CG-SURG-95	Sacral Nerve Stimulation and Percutaneous Tibial Nerve Stimulation for Urinary and Fecal Incontinence; Urinary Retention
12/16/2020	Reviewed	CG-SURG-96	Intraocular Telescope
12/16/2020	Reviewed	CG-SURG-105	Corneal Collagen Cross-Linking
12/16/2020	Reviewed	CG-SURG-106	Venous Angioplasty with or without Stent Placement or Venous Stenting Alone

12/16/2020	Reviewed	CG-THER-RAD-07	Intravascular Brachytherapy (Coronary and Non-Coronary)
4/1/2021	Reviewed	GENE.00003	Genetic Testing and Biochemical Markers for the Diagnosis of Alzheimer's Disease
12/16/2020	Reviewed	GENE.00016	Gene Expression Profiling for Colorectal Cancer
12/16/2020	Reviewed	GENE.00025	Proteogenomic Testing for the Evaluation of Malignancies
12/16/2020	Reviewed	GENE.00036	Genetic Testing for Hereditary Pancreatitis
12/16/2020	Reviewed	GENE.00037	Genetic Testing for Macular Degeneration
12/16/2020	Reviewed	GENE.00039	Genetic Testing for Frontotemporal Dementia (FTD)
12/16/2020	Reviewed	GENE.00049	Circulating Tumor DNA Testing for Cancer (Liquid Biopsy)
12/16/2020	Reviewed	LAB.00024	Immune Cell Function Assay
12/16/2020	Reviewed	LAB.00026	Systems Pathology Testing for Predicting Risk of Prostate Cancer Progression and Recurrence
12/16/2020	Reviewed	LAB.00034	Serological Antibody Testing For Helicobacter Pylori
12/16/2020	Reviewed	MED.00002	Selected Sleep Testing Services
12/16/2020	Reviewed	MED.00065	Hepatic Activation Therapy
12/16/2020	Reviewed	MED.00091	Rhinophototherapy
12/16/2020	Reviewed	MED.00092	Automated Nerve Conduction Testing
12/16/2020	Reviewed	MED.00097	Neural Therapy
12/16/2020	Reviewed	MED.00115	Outpatient Cardiac Hemodynamic Monitoring Using a Wireless Sensor for Heart Failure Management

12/16/2020	Reviewed	MED.00117	Autologous Cell Therapy for the Treatment of Damaged Myocardium
12/16/2020	Reviewed	MED.00121	Implantable Interstitial Glucose Sensors
12/16/2020	Reviewed	MED.00122	Wilderness Programs
12/16/2020	Reviewed	MED.00126	Fractional Exhaled Nitric Oxide and Exhaled Breath Condensate Measurements for Respiratory Disorders
12/16/2020	Reviewed	MED.00128	Insulin Potentiation Therapy
12/16/2020	Reviewed	MED.00130	Surface Electromyography Devices for Seizure Monitoring
12/16/2020	Reviewed	RAD.00036	MRI of the Breast
12/16/2020	Reviewed	RAD.00053	Cervical and Thoracic Discography
12/16/2020	Reviewed	RAD.00065	Radiostereometric Analysis (RSA)
12/16/2020	Reviewed	REHAB.00003	Hippotherapy
12/16/2020	Reviewed	SURG.00019	Transmyocardial Revascularization
12/16/2020	Reviewed	SURG.00023	Breast Procedures; including Reconstructive Surgery, Implants and Other Breast Procedures
12/16/2020	Reviewed	SURG.00026	Deep Brain, Cortical, and Cerebellar Stimulation
12/16/2020	Reviewed	SURG.00036	Fetal Surgery for Prenatally Diagnosed Malformations
12/16/2020	Reviewed	SURG.00037	Treatment of Varicose Veins (Lower Extremities)
12/16/2020	Reviewed	SURG.00044	Breast Ductal Examination and Fluid Cytology Analysis
12/16/2020	Reviewed	SURG.00073	Epiduroscopy

12/16/2020	Reviewed	SURG.00079	Nasal Valve Suspension
12/16/2020	Reviewed	SURG.00097	Vertebral Body Stapling and Tethering for the Treatment of Scoliosis in Children and Adolescents
12/16/2020	Reviewed	SURG.00098	Mechanical Embolectomy for Treatment of Acute Stroke
12/16/2020	Reviewed	SURG.00099	Convection Enhanced Delivery of Therapeutic Agents to the Brain
12/16/2020	Reviewed	SURG.00100	Cryoablation for Plantar Fasciitis and Plantar Fibroma
12/16/2020	Reviewed	SURG.00102	Artificial Anal Sphincter for the Treatment of Severe Fecal Incontinence
2/1/2020	Reviewed	SURG.00112	Implantation of Occipital, Supraorbital or Trigeminal Nerve Stimulation Devices (and Related Procedures)
12/16/2020	Reviewed	SURG.00123	Transmyocardial/Periventricular Device Closure of Ventricular Septal Defects
12/16/2020	Reviewed	SURG.00130	Annulus Closure After Discectomy
12/16/2020	Reviewed	SURG.00138	Laser Treatment of Onychomycosis
12/16/2020	Reviewed	SURG.00142	Genicular Nerve Blocks and Ablation for Chronic Knee Pain
12/16/2020	Reviewed	SURG.00146	Extracorporeal Carbon Dioxide Removal
12/16/2020	Reviewed	THER-RAD.00008	Neutron Beam Radiotherapy
12/16/2020	Reviewed	TRANS.00008	Liver Transplantation
12/16/2020	Reviewed	TRANS.00009	Lung and Lobar Transplantation
12/16/2020	Reviewed	TRANS.00010	Autologous and Allogeneic Pancreatic Islet Cell Transplantation
12/16/2020	Reviewed	TRANS.00023	Hematopoietic Stem Cell Transplantation for Multiple Myeloma and Other Plasma Cell Dyscrasias

12/16/2020	Reviewed	TRANS.00024	Hematopoietic Stem Cell Transplantation for Select Leukemias and Myelodysplastic Syndrome
12/16/2020	Reviewed	TRANS.00026	Heart/Lung Transplantation
12/16/2020	Reviewed	TRANS.00027	Hematopoietic Stem Cell Transplantation for Pediatric Solid Tumors
12/16/2020	Reviewed	TRANS.00029	Hematopoietic Stem Cell Transplantation for Genetic Diseases and Aplastic Anemias
12/16/2020	Reviewed	TRANS.00030	Hematopoietic Stem Cell Transplantation for Germ Cell Tumors
12/16/2020	Reviewed	TRANS.00033	Heart Transplantation
12/16/2020	Reviewed	TRANS.00034	Hematopoietic Stem Cell Transplantation for Diabetes Mellitus
	MCG		
			BEHAVIORAL HEALTH CARE (BHG)
			Therapeutic Services
TBD	MCG - Customization	W0153	• Applied Behavioral Analysis
	CODING		
12/16/2020	Coding Updates of Existing Documents	CG-GENE-01	Janus Kinase 2, CALR and MPL Gene Mutation Assays
12/16/2020	Coding Updates of Existing Documents	CG-GENE-08	Genetic Testing for PTEN Hamartoma Tumor Syndrome
12/16/2020	Coding Updates of Existing Documents	CG-GENE-13	Genetic Testing for Inherited Diseases
12/16/2020	Coding Updates of Existing Documents	CG-MED-40	External Ambulatory Event Monitors to Detect Cardiac Arrhythmias

12/16/2020	Coding Updates of Existing Documents	CG-MED-49	Auditory Brainstem Responses (ABRs) and Evoked Otoacoustic Emissions (OAEs) for Hearing Disorders
12/16/2020	Coding Updates of Existing Documents	CG-MED-66	Cryopreservation of Oocytes or Ovarian Tissue
12/16/2020	Coding Updates of Existing Documents	CG-SURG-27	Gender Reassignment Surgery
12/16/2020	Coding Updates of Existing Documents	CG-SURG-49	Endovascular Techniques (Percutaneous or Open Exposure) for Arterial Revascularization of the Lower Extremities
12/16/2020	Coding Updates of Existing Documents	CG-SURG-87	Nasal Surgery for the Treatment of Obstructive Sleep Apnea and Snoring
12/16/2020	Coding Updates of Existing Documents	CG-SURG-100	Laser Trabeculoplasty and Laser Peripheral Iridotomy
12/16/2020	Coding Updates of Existing Documents	GENE.00023	Gene Expression Profiling of Melanomas
12/16/2020	Coding Updates of Existing Documents	GENE.00053	Metagenomic Sequencing for Infectious Disease in the Outpatient Setting
12/16/2020	Coding Updates of Existing Documents	SURG.00151	Balloon Dilation of Eustachian Tubes
12/16/2020	Coding Updates of Existing Documents	TRANS.00025	Laboratory Testing as an Aid in the Diagnosis of Heart Transplant Rejection
	Interim Upload		
10/9/2020	Interim Upload	CG-LAB-14	Respiratory Viral Panel Testing in the Outpatient Setting
10/15/2020	Interim Upload	SURG.00154	Microsurgical Procedures for the Treatment of Lymphedema

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