

September 2019

Medical Policies and Clinical Utilization Management Guidelines update

The *Medical Policies* and *Clinical Utilization Management (UM) Guidelines* 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. For markets with carved-out pharmacy services, the applicable listings below are informational only.

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

To view a guideline, visit https://medicalpolicy.clearhealthalliance.com/shp_search.html and https://medicalpolicy.clearhealthalliance.com.

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:
 - o 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).
- The following AIM Specialty Health
 updates took effect on March 31, 2019:
 - Advanced Imaging
 - Imaging of the Brain
 - Imaging of the Extremities
 - Imaging of the Spine

Medical Policies

On March 21, 2019, the medical policy and technology assessment committee (MPTAC) approved the following *Medical Policies* applicable to Simply Healthcare Plans, Inc. and Clear Health Alliance (Simply).

Publish date	Medical Policy number	Medical Policy title	New or revised
4/24/2019	MED.00127	Chelation Therapy	New
4/24/2019	GENE.00050	Gene Expression Profiling for Coronary Artery Disease	New
4/24/2019	MED.00128	Insulin Potentiation Therapy	New
4/24/2019	SURG.00152	Wireless Cardiac Resynchronization Therapy for Left Ventricular Pacing	New
3/28/2019	DRUG.00088	Atezolizumab (Tecentriq®)	Revised
3/28/2019	DRUG.00053	Carfilzomib (Kyprolis®)	Revised
4/24/2019	GENE.00045	Detection and Quantification of Tumor DNA Using Next Generation Sequencing in Lymphoid Cancers	Revised
4/24/2019	GENE.00010	Genotype Testing for Genetic Polymorphisms to Determine Drug- Metabolizer Status	Revised
4/24/2019	SURG.00139	Intraoperative Assessment of Surgical Margins During Breast- Conserving Surgery with Radiofrequency Spectroscopy or Optical Coherence Tomography	Revised
4/24/2019	GENE.00012	Preconception or Prenatal Genetic Testing of a Parent or Prospective Parent	Revised
4/24/2019	SURG.00121	Transcatheter Heart Valve Procedures	Revised

Clinical UM Guidelines

On March 21, 2019, the MPTAC approved the following *Clinical UM Guidelines* applicable to Simply. These guidelines were adopted by the medical operations committee for members on May 7, 2019.

Publish date	Clinical UM Guideline number	Clinical UM Guideline title	New or revised
3/28/2019	CG-ANC-07	Inpatient Interfacility	Revised
		Transfers	
3/28/2019	CG-DRUG-50	Paclitaxel, protein-bound	Revised
		(Abraxane®)	neviseu

Publish date	Clinical UM Guideline number	Clinical UM Guideline title	New or revised
Tublish date	Chinear Own Guidenne Huiliber	Ado-trastuzumab	ivew of Teviseu
3/28/2019	CG-DRUG-96	emtansine (Kadcyla®)	Revised
		Molecular Marker	
3/28/2019	CG-GENE-04	Evaluation of Thyroid	Revised
, ,,,,,,,,,,		Nodules	
4/24/2040	CC DNAF 44	Electric Tumor Treatment	Doviced
4/24/2019	CG-DME-44	Field (TTF)	Revised
		Bevacizumab (Avastin®) for	
4/24/2019	CG-DRUG-68	Non-Ophthalmologic	Revised
		Indications	
		Janus Kinase 2, CALR, and	
		MPL Gene Mutation Assays	
4/24/2019	CG-GENE-01	Previous title: Janus Kinase	Revised
		2 (JAK2)V617F and JAK2	
		exon 12 Gene Mutation	
		Assays	
		Genetic Testing for DMD	
4/24/2019	CG-GENE-05	Mutations (Duchenne or	Revised
		Becker Muscular Dystrophy)	
		Intravenous versus Oral	
4/24/2019	CG-MED-82	Drug Administration in the	New
7, 24, 2013	CO WILD OZ	Outpatient and Home	1404
		Setting	
4/24/2019	CG-MED-83	Level of Care: Specialty	New
, , ====	-	Pharmaceuticals Taxasilla dans for Children	
4/24/2040	CC SUBC 30	Tonsillectomy for Children	Davisad
4/24/2019	CG-SURG-30	with or without	Revised
		Adenoidectomy Inotuzumab ozogamicin	
5/9/2019	CG-DRUG-113	(Besponsa®)	New
		Preimplantation Genetic	
5/9/2019	CG-GENE-06	Diagnosis Testing	New
5/9/2019	CG-GENE-07	BCR-ABL Mutation Analysis	New
		Genetic Testing for PTEN	
5/9/2019	CG-GENE-08	Hamartoma Tumor	New
		Syndrome	
5/9/2019	CG-GENE-09	Genetic Testing for CHARGE	New
3/3/2019	CG-GLINE-03	Syndrome	INCAA

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Publish date	Clinical UM Guideline number	Clinical UM Guideline title	New or revised
		High Intensity Focused	
5/9/2019	CG-MED-81	Ultrasound (HIFU) for	New
		Oncologic Indications	
		Prostate Multiparametric	
5/9/2019	CG-SURG-98	Magnetic Resonance	New
		Imaging	
5/9/2019	CG-SURG-99	Panniculectomy and	New
		Abdominoplasty	
6/24/2019	CG-SURG-97	Cardioverter Defibrillators	New