



Medical Coverage Policy and Prior Authorization Update Notice

Publication date: 10/01/2021

The following medical coverage policies are either new policies, or policies that have completed their annual review. The second column provides significant information regarding content change that might be of importance to you. **The effective date for Policy changes will be 11/01/2021 except as noted with*.**

SWHP Policy	Change
013 - Seizure Disorders - Invasive Rx	Annual review: no changes
028 - Durable Medical Equipment	Annual review: no changes
029 - Alzheimers Disease Biochemical Markers	Annual review: no changes
030 - Osteoporosis Bone Turnover Markers	Annual review: no changes
035 - Cold Therapy Devices	Annual review: no changes
074 - Occipital Nerve Stimulation	Annual review: no changes
084 - Vertebroplasty and Kyphoplasty	Annual review: no changes
276 - Medicaid Burosumab-twza (Crysvita)	Retired – Use TMPPM
277 -Medicaid Teprotumumab-trbw (Tepezza)	Retired – Use TMPPM
236 - Medications, Services, Supplies NOT Medically Necessary	<i>*Updated with revisions as needed</i>
	* Effective Date is 10/1/2021
FirstCare policies being retired	
MN-082 Omalizumab	Retired – Use Interqual®
MN-203 Ocrevus	Retired – Use Interqual®

Prior Authorization List changes (all plans except Medicaid) effective 10/01/2021

Code	Category: Description	Action	Plans
Q2041	Antineoplastic Agents: Yescarta	Add Medicare	All plans
Q2042	Antineoplastic Agents: Kymriah	Add Medicare	All plans
Q2053	Antineoplastic Agents: Tecartus	Add Medicare	All plans
C9075	Amondys 45	Add	All plans
C9076	Injection, lisocabtagene maraleucel	Add	All plans
C9077	Injection, cabotegravir/rilpivirine extended release	Add	All plans
C9078	Injection, trilacidib	Add	All plans
C9079	Injection, evinacumab-dgnb	Add	All plans
J0224	Injection, lumasiran, 0.5mg	Add	All plans
J1951	Injection, leuprolide acetate for depot, 0.25mg	Add	All plans
J9314	Injection, romidepsin, non-lyophilized (e.g. liquid), 0.1mg	Add	All plans

J9348	Injection, naxitamab-gqgk, 1mg	Add	All plans
J9353	Injection, margetuximab-cmkb, 5mg	Add	All plans
Q5123	Injection, rituximab-arrx, biosimilar, 10mg	Add	All plans
C9080	Injection, melphalan flufenamide	Add	All plans
61790	Oncology (Adult): CREATE LES STRTCTC PRQ NEUROLYTIC GASSERIAN	Add	BSWH Empl
61791	Oncology (Adult): CREATE LES STRTCTC PRQ NEUROLYTIC TRIGEMINAL TRC	Add	BSWH Empl
61796	Oncology (Adult): STEREOTACTIC RADIOSURGERY 1 SIMPLE CRANIAL LES	Add	BSWH Empl
61797	Oncology (Adult): STRTCTC RADIOSURGERY EA ADDL CRANIAL LES SIMPLE	Add	BSWH Empl
61798	Oncology (Adult): STEREOTACTIC RADIOSURGERY 1 COMPLEX CRANIAL LES	Add	BSWH Empl
61799	Oncology (Adult): STRTCTC RADIOSURGERY EA ADDL CRANIAL LES COMPLEX	Add	BSWH Empl
61800	Oncology (Adult): APPL STRTCTC HEADFRAME STEREOTACTIC RADIOSURGERY	Add	BSWH Empl
76873	Oncology (Adult): US TRANSRCT PRSTATE VOL BRACHYTX PLNNING SPX	Add	BSWH Empl
77014	Oncology (Adult): CT GUIDANCE RADIATION THERAPY FLDS PLACEMENT	Add	BSWH Empl
77021	Imaging – advanced: M R I Guidance For Needle Placement	Add	BSWH Empl
77261	Oncology (Adult): THERAPEUTIC RADIOLOGY TX PLANNING SIMPLE	Add	BSWH Empl
77262	Oncology (Adult): THERAPEUTIC RADIOLOGY TX PLANNING INTERMEDIATE	Add	BSWH Empl
77263	Oncology (Adult): THERAPEUTIC RADIOLOGY TX PLANNING COMPLEX	Add	BSWH Empl
77280	Oncology (Adult): THER RAD SIMULAJ-AIDED FIELD SETTING SIMPLE	Add	BSWH Empl
77285	Oncology (Adult): THER RAD SIMULAJ-AIDED FIELD SETTING INTERMED	Add	BSWH Empl
77290	Oncology (Adult): THER RAD SIMULAJ-AIDED FIELD SETTING COMPLEX	Add	BSWH Empl
77293	Oncology (Adult): RESPIRATORY MOTION MANAGEMENT SIMULATION	Add	BSWH Empl
77295	Oncology (Adult): THER RAD SIMULAJ-AIDED FLD SETTING 3-DIMENSIONAL	Add	BSWH Empl
77299	Oncology (Adult): UNLIS PX THER RADIOL CLINICAL TX PLANNING	Add	BSWH Empl
77300	Oncology (Adult): BASIC RADIATION DOSIMETRY CALCULATION	Add	BSWH Empl
77301	Oncology (Adult): NTSTY MODUL RADTHX PLN DOSE-VOL HISTOS	Add	BSWH Empl
77306	Oncology (Adult): TELETHX ISODOSE PLN SMPL W/DOSIMETRY CALCULATION	Add	BSWH Empl
77307	Oncology (Adult): TELETHX ISODOSE PLN CPLX W/BASIC DOSIMETRY	Add	BSWH Empl
77316	Oncology (Adult): BRACHYTX ISODOSE PLN SMPL W/DOSIMETRY CAL	Add	BSWH Empl
77317	Oncology (Adult): BRACHYTX ISODOSE PLN INTERMED W/DOSIMETRY CAL	Add	BSWH Empl

77318	Oncology (Adult): BRACHYTX ISODOSE PLN CPLX W/DOSIMETRY CAL	Add	BSWH Empl
77321	Oncology (Adult): SPEC TELETHX PORT PLN PARTS HEMIBDY TOT BDY	Add	BSWH Empl
77331	Oncology (Adult): SPEC DOSIM ONLY PRESCRIBED TREATING PHYS	Add	BSWH Empl
77332	Oncology (Adult): TX DEVICES DESIGN \& CONSTRUCTION SIMPLE	Add	BSWH Empl
77333	Oncology (Adult): TX DEVICES DESIGN \& CONSTRUCTION INTERMEDIATE	Add	BSWH Empl
77334	Oncology (Adult): TX DEVICES DESIGN \& CONSTRUCTION COMPLEX	Add	BSWH Empl
77336	Oncology (Adult): CONTINUING MEDICAL PHYSICS CONSLTJ PR WK	Add	BSWH Empl
77338	Oncology (Adult): MLC IMRT DESIGN \& CONSTRUCTION PER IMRT PLAN	Add	BSWH Empl
77370	Oncology (Adult): SPEC MEDICAL RADJ PHYSICS CONSLTJ	Add	BSWH Empl
77371	Oncology (Adult): RADIATION DELIVERY STEREOTACTIC CRANIAL COBALT	Add	BSWH Empl
77372	Oncology (Adult): RADIATION DELIVERY STEREOTACTIC CRANIAL LINEAR	Add	BSWH Empl
77373	Oncology (Adult): STEREOTACTIC BODY RADIATION DELIVERY	Add	BSWH Empl
77385	Oncology (Adult): INTENSITY MODULATED RADIATION TX DLVR SIMPLE	Add	BSWH Empl
77386	Oncology (Adult): INTENSITY MODULATED RADIATION TX DLVR COMPLEX	Add	BSWH Empl
77387	Oncology (Adult): GUIDANCE FOR LOC OF TARGET VOL RADIAJ TX DLVR	Add	BSWH Empl
77399	Oncology (Adult): UNLIS MEDICAL RADJ DOSIM TX DEV SPEC SVCS	Add	BSWH Empl
77401	Oncology (Adult): RADIATION TX DELIVERY SUPERFICIAL\&/ORTHO VOLTA	Add	BSWH Empl
77402	Oncology (Adult): RADJ DLVR 1 AREA 1/PRLL OPSD PORTS SMPL <5MEV	Add	BSWH Empl
77407	Oncology (Adult): RADJ DLVR 2 AREAS 3/>PORTS 1 MLT BLKS <5MEV	Add	BSWH Empl
77412	Oncology (Adult): RADJ DLVR 3/> AREAS CUSTOM BLKING <5MEV	Add	BSWH Empl
77417	Oncology (Adult): THERAPEUTIC RADIOLOGY PORT FILMS	Add	BSWH Empl
77423	Oncology (Adult): HIGH ENERGY NEUTRON RADJ TX DLVR 1/> ISOCENTER	Add	BSWH Empl
77424	Oncology (Adult): INTRAOP RADIAJ TX DELIVER XRAY SINGLE TX SESSION	Add	BSWH Empl
77425	Oncology (Adult): INTRAOP RADIAJ TX DELIVER ELECTRONS SNGL TX SESS	Add	BSWH Empl
77427	Oncology (Adult): RADIATION TREATMENT MANAGEMENT 5 TREATMENTS	Add	BSWH Empl
77431	Oncology (Adult): RADIATION THERAPY MGMT 1/2 FRACTIONS ONLY	Add	BSWH Empl
77432	Oncology (Adult): STERETCTC RADIATION TX MANAGEMENT CRANIAL LESION	Add	BSWH Empl
77435	Oncology (Adult): STEREOTACTIC BODY RADIATION MANAGEMENT	Add	BSWH Empl
77469	Oncology (Adult): INTRAOPERATIVE RADIATION TREATMENT MANAGEMENT	Add	BSWH Empl
77470	Oncology (Adult): SPECIAL TREATMENT PROCEDURE	Add	BSWH Empl

77499	Oncology (Adult): UNLISTED PROCEDURE THERAPEUTIC RADIOLOGY TX MGMT	Add	BSWH Empl
77600	Oncology (Adult): HYPERTHERMIA EXTERNAL GENERATED SUPERFICIAL	Add	BSWH Empl
77605	Oncology (Adult): HYPERTHERMIA EXTERNAL GENERATED DEEP	Add	BSWH Empl
77610	Oncology (Adult): HYPERTHERMIA INTERSTITIAL PROBE 5/< APPLICATORS	Add	BSWH Empl
77615	Oncology (Adult): HYPERTHERMIA INTERSTITIAL PROBE 5/> APPLICATORS	Add	BSWH Empl
77620	Oncology (Adult): HYPERTHERMIA INTRACAVITARY PROBES	Add	BSWH Empl
77750	Oncology (Adult): NFS/INSTLJ RADIOELMNT SLN 3 MO FOLLOW-UP CARE	Add	BSWH Empl
77761	Oncology (Adult): INTRACAVITARY RADIATION SOURCE APPLIC SIMPLE	Add	BSWH Empl
77762	Oncology (Adult): INTRACAVITARY RADIATION SOURCE APPLIC INTERMED	Add	BSWH Empl
77763	Oncology (Adult): INTRACAVITARY RADIATION SOURCE APPLIC COMPLEX	Add	BSWH Empl
77767	Oncology (Adult): HDR RDNCL SKN SURF BRACHYTX LES </2CM/1 CHAN	Add	BSWH Empl
77768	Oncology (Adult): HDR RDNCL SK SRF BRCHYTX LES >2CM&2CHAN/MLT LES	Add	BSWH Empl
77770	Oncology (Adult): HDR RDNCL NTRSTL/INTRCAV BRACHYTX 1 CHANNEL	Add	BSWH Empl
77771	Oncology (Adult): HDR RDNCL NTRSTL/INTRCAV BRACHYTX 2-12 CHANNEL	Add	BSWH Empl
77772	Oncology (Adult): HDR RDNCL NTRSTL/INTRCAV BRACHYTX >12 CHANNELS	Add	BSWH Empl
77778	Oncology (Adult): INTERSTITIAL RADIATION SOURCE APPLIC COMPLEX	Add	BSWH Empl
77789	Oncology (Adult): SURFACE APPLICATION RADIATION SOURCE	Add	BSWH Empl
77790	Oncology (Adult): SUPERVISION HANDLING LOADING RADIATION SOURCE	Add	BSWH Empl
77799	Oncology (Adult): UNLISTED PROCEDURE CLINICAL BRACHYTHERAPY	Add	BSWH Empl
81163	Oncology (Adult) genomic tests: BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	Add	BSWH Empl
81164	Oncology (Adult) genomic tests: BRCA1 BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS	Add	BSWH Empl
81165	Oncology (Adult) genomic tests: BRCA1 GENE ANALYSIS FULL SEQUENCE ANALYSIS	Add	BSWH Empl
81166	Oncology (Adult) genomic tests: BRCA1 GENE ANALYSIS FULL DUP/DEL ANALYSIS	Add	BSWH Empl
81167	Oncology (Adult) genomic tests: BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS	Add	BSWH Empl
81206	Oncology (Adult) genomic tests: BCR/ABL1 MAJOR BREAKPNT QUALITATIVE/QUANTITATIVE	Add	BSWH Empl
81207	Oncology (Adult) genomic tests: BCR/ABL1 MINOR BREAKPNT QUALITATIVE/QUANTITATIVE	Add	BSWH Empl
81208	Oncology (Adult) genomic tests: BCR/ABL1 OTHER BREAKPNT QUALITATIVE/QUANTITATIVE	Add	BSWH Empl
81218	Oncology (Adult) genomic tests: CEBPA GENE ANALYSIS FULL GENE SEQUENCE	Add	BSWH Empl

81219	Oncology (Adult) genomic tests: CALR GENE ANALYSIS COMMON VARIANTS IN EXON 9	Add	BSWH Empl
81233	Oncology (Adult) genomic tests: BTK GENE ANALYSIS COMMON VARIANTS	Add	BSWH Empl
81236	Oncology (Adult) genomic tests: EZH2 GENE ANALYSIS FULL GENE SEQUENCE	Add	BSWH Empl
81237	Oncology (Adult) genomic tests: EZH2 GENE ANALYSIS COMMON VARIANTS	Add	BSWH Empl
81245	Oncology (Adult) genomic tests: FLT3 GENE ANALYSIS INTERNAL TANDEM DUP VARIANTS	Add	BSWH Empl
81261	Oncology (Adult) genomic tests: IGH@ REARRANGE ABNORMAL CLONAL POP AMPLIFIED	Add	BSWH Empl
81262	Oncology (Adult) genomic tests: IGH@ REARRANGE ABNORMAL CLONAL POP DIRECT PROBE	Add	BSWH Empl
81263	Oncology (Adult) genomic tests: IGH@ VARIABLE REGION SOMATIC MUTATION ANALYSIS	Add	BSWH Empl
81264	Oncology (Adult) genomic tests: IGK@ GENE REARRANGE DETECT ABNORMAL CLONAL POP	Add	BSWH Empl
81270	Oncology (Adult) genomic tests: JAK2 GENE ANALYSIS P.VAL617PHE VARIANT	Add	BSWH Empl
81272	Oncology (Adult) genomic tests: KIT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	Add	BSWH Empl
81275	Oncology (Adult) genomic tests: KRAS GENE ANALYSIS VARIANTS IN CODONS 12 AND 13	Add	BSWH Empl
81276	Oncology (Adult) genomic tests: KRAS GENE ANALYSIS ADDITIONAL VARIANT(S)	Add	BSWH Empl
81287	Oncology (Adult) genomic tests: MGMT METHYLATION ANALYSIS	Add	BSWH Empl
81301	Oncology (Adult) genomic tests: MICROSATELLITE INSTAB ANAL MISMATCH REPAIR DEF	Add	BSWH Empl
81305	Oncology (Adult) genomic tests: MYD88 GENE ANALYSIS P.LEU265 (L265P) VARIANT	Add	BSWH Empl
81310	Oncology (Adult) genomic tests: NPM1 NUCLEOPHOSMIN GENE ANAL EXON 12 VARIANTS	Add	BSWH Empl
81311	Oncology (Adult) genomic tests: NRAS GENE ANALYSIS VARIANTS IN EXON 2&3	Add	BSWH Empl
81314	Oncology (Adult) genomic tests: PDGFRA GENE ANALYS TARGETED SEQUENCE ANALYS	Add	BSWH Empl
81315	Oncology (Adult) genomic tests: PML/RARALPHA COMMON BREAKPOINTS QUAL/QUANT	Add	BSWH Empl
81316	Oncology (Adult) genomic tests: PML/RARALPHA SINGLE BREAKPOINT QUAL/QUAN	Add	BSWH Empl
81402	Oncology (Adult) genomic tests: MOLECULAR PATHOLOGY PROCEDURE LEVEL 3	Add	BSWH Empl
81407	Oncology (Adult) genomic tests: MOLECULAR PATHOLOGY PROCEDURE LEVEL 8	Add	BSWH Empl
81408	Oncology (Adult) genomic tests: MOLECULAR PATHOLOGY PROCEDURE LEVEL 9	Add	BSWH Empl
81445	Oncology (Adult) genomic tests: TARGETED GENOMIC SEQ ANALYS DNA ANALYS 5-50 GENE	Add	BSWH Empl
81518	Oncology (Adult) genomic tests: ONCOLOGY BREAST MRNA GENE EXPRESSION 11 GENES	Add	BSWH Empl
81525	Oncology (Adult) genomic tests: ONCOLOGY COLON MRNA GENE EXPRESSION 12 GENES	Add	BSWH Empl

88184	Oncology (Adult) genomic tests: FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY 1ST	Add	BSWH Empl
88185	Oncology (Adult) genomic tests: FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY EA	Add	BSWH Empl
88187	Oncology (Adult) genomic tests: FLOW CYTOMETRY INTERPJ 2-8 MARKERS	Add	BSWH Empl
88188	Oncology (Adult) genomic tests: FLOW CYTOMETRY INTERPJ 9-15 MARKERS	Add	BSWH Empl
88189	Oncology (Adult) genomic tests: FLOW CYTOMETRY INTERPJ 16/> MARKERS	Add	BSWH Empl
88271	Oncology (Adult) genomic tests: MOLECULAR CYTOGENETICS DNA PROBE EACH	Add	BSWH Empl
88272	Oncology (Adult) genomic tests: MOLECULAR CYTOGENETICS CHRMOML ISH 3-5 CELLS	Add	BSWH Empl
88273	Oncology (Adult) genomic tests: MOLECULAR CYTOGENETICS CHRMOML ISH 10-30 CLL	Add	BSWH Empl
88274	Oncology (Adult) genomic tests: MOLECULAR CYTOGENETICS INTERPHASE ISH 25-99 CLL	Add	BSWH Empl
88275	Oncology (Adult) genomic tests: MOLEC CYTG INTERPHASE ISH ANALYZE 100-300 CLL	Add	BSWH Empl
88280	Oncology (Adult) genomic tests: CHRMSM ANALYSIS ADDL KARYOTYP EACH STUDY	Add	BSWH Empl
88283	Oncology (Adult) genomic tests: CHRMSM ANALYSIS ADDL SPECIALIZED BANDING	Add	BSWH Empl
88285	Oncology (Adult) genomic tests: CHRMSM ANALYSIS ADDL CELLS COUNTED EACH STUDY	Add	BSWH Empl
88289	Oncology (Adult) genomic tests: CHRMSM ANALYSIS ADDL HIGH RESOLUTION STUDY	Add	BSWH Empl
88291	Oncology (Adult) genomic tests: CYTOGENETICS\MOLEC CYTOGENETICS INTERP\&REP	Add	BSWH Empl
88367	Oncology (Adult) genomic tests: M/PHMTRC ALYS ISH EA PRB CPTR-ASST TECHNOLOGY	Add	BSWH Empl
88368	Oncology (Adult) genomic tests: M/PHMTRC ALYS IN SITU HYBRIDIZATION EA PROBE MNL	Add	BSWH Empl
88369	Oncology (Adult) genomic tests: M/PHMTRC ALYS ISH QUANT/SEMIQ MNL PER SPEC EACH	Add	BSWH Empl
88373	Oncology (Adult) genomic tests: M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR PER SPEC EACH	Add	BSWH Empl
88374	Oncology (Adult) genomic tests: M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR EACH MULTIPRB	Add	BSWH Empl
88377	Oncology (Adult) genomic tests: M/PHMTRC ALYS ISH QUANT/SEMIQ MNL EACH MULTIPRB	Add	BSWH Empl
J0896	Hematopoietic Agents: Luspatercept-aamt, 0.25mg	Add	BSWH Empl
J9198	Antineoplastic Agents: Gemcitabine hydrochloride, 100mg	Add	BSWH Empl
S2095	Oncology (Adult): TRNSCATH OCCL/EMBOLIZ TUMR DESTRUC PERQ METH USI	Add	BSWH Empl
	NOTE: All of the following additions are potentially "E&I, unproven"		
0064U	Services and devices deemed experimental/investigational/unproven: Antibody, Treponema pallidum, total and rapid plasma reagin (RPR)	Add	All plans

0065U	Services and devices deemed experimental/investigational/unproven: Syphilis test, non-treponemal antibody, immunoassay, qualitative (RPR)	Add	All plans
0242U	Services and devices deemed experimental/investigational/unproven: Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements	Add	All plans
0243U	Services and devices deemed experimental/investigational/unproven: Obstetrics (preeclampsia), biochemical assay of placental-growth factor, time-resolved fluorescence immunoassay, maternal serum, predictive algorithm reported as a risk score for preeclampsia	Add	All plans
0244U	Services and devices deemed experimental/investigational/unproven: Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin-embedded tumor tissue	Add	All plans
0245U	Services and devices deemed experimental/investigational/unproven: Oncology (thyroid), mutation analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage	Add	All plans
0246U	Services and devices deemed experimental/investigational/unproven: Red blood cell antigen typing, DNA, genotyping of at least 16 blood groups with phenotype prediction of at least 51 red blood cell antigens	Add	All plans
0247U	Services and devices deemed experimental/investigational/unproven: Obstetrics (preterm birth), insulin-like growth factor-binding protein 4 (IBP4), sex hormone-binding globulin (SHBG), quantitative measurement by LC-MS/MS, utilizing maternal serum, combined with clinical data, reported as predictive-risk stratification for spontaneous preterm birth	Add	All plans
0248U	Services and devices deemed experimental/investigational/unproven: Oncology (brain), spheroid cell culture in a 3D microenvironment, 12 drug panel, tumor-response prediction for each drug	Add	All plans
0249U	Services and devices deemed experimental/investigational/unproven: Oncology (breast), semiquantitative analysis of 32 phosphoproteins and protein analytes, includes laser capture microdissection, with algorithmic analysis and interpretative report	Add	All plans
0250U	Services and devices deemed experimental/investigational/unproven: Oncology (solid organ neoplasm), targeted genomic sequence DNA analysis of 505 genes, interrogation for somatic alterations (SNVs [single nucleotide variant], small insertions and deletions, one	Add	All plans

	amplification, and four translocations), microsatellite instability and tumor-mutation burden		
0251U	Services and devices deemed experimental/investigational/unproven: Hepcidin-25, enzyme-linked immunosorbent assay (ELISA), serum or plasma	Add	All plans
0252U	Services and devices deemed experimental/investigational/unproven: Fetal aneuploidy short tandem-repeat comparative analysis, fetal DNA from products of conception, reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplications, mosaicism, and segmental aneuploidy	Add	All plans
0253U	Services and devices deemed experimental/investigational/unproven: Reproductive medicine (endometrial receptivity analysis), RNA gene expression profile, 238 genes by next-generation sequencing, endometrial tissue, predictive algorithm reported as endometrial window of implantation (eg, pre-receptive, receptive, post-receptive)	Add	All plans
0254U	Services and devices deemed experimental/investigational/unproven: Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using embryonic DNA genomic sequence analysis for aneuploidy, and a mitochondrial DNA score in euploid embryos, results reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplications, mosaicism, and segmental aneuploidy, per embryo tested	Add	All plans
0640T	Services and devices deemed experimental/investigational/unproven: Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); image acquisition, interpretation and report, each flap or wound	Add	All plans
0641T	Services and devices deemed experimental/investigational/unproven: Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); image acquisition only, each flap or wound	Add	All plans
0642T	Services and devices deemed experimental/investigational/unproven: Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); interpretation and report only, each flap or wound	Add	All plans
0643T	Services and devices deemed experimental/investigational/unproven: Transcatheter left ventricular restoration device implantation including right and left heart catheterization and left ventriculography when performed, arterial approach	Add	All plans
0644T	Services and devices deemed experimental/investigational/unproven: Transcatheter removal or debulking of intracardiac mass (eg, vegetations, thrombus) via suction (eg, vacuum, aspiration) device, percutaneous approach, with intraoperative reinfusion of aspirated blood, including imaging guidance, when performed	Add	All plans

0645T	Services and devices deemed experimental/investigational/unproven: Transcatheter implantation of coronary sinus reduction device including vascular access and closure, right heart catheterization, venous angiography, coronary sinus angiography, imaging guidance, and supervision and interpretation, when performed	Add	All plans
0646T	Services and devices deemed experimental/investigational/unproven: Transcatheter tricuspid valve implantation/replacement (TTVI) with prosthetic valve, percutaneous approach, including right heart catheterization, temporary pacemaker insertion, and selective right ventricular or right atrial angiography, when performed	Add	All plans
0647T	Services and devices deemed experimental/investigational/unproven: Insertion of gastrostomy tube, percutaneous, with magnetic gastropexy, under ultrasound guidance, image documentation and report	Add	All plans
0648T	Services and devices deemed experimental/investigational/unproven: Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session	Add	All plans
0649T	Services and devices deemed experimental/investigational/unproven: Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)	Add	All plans
0650T	Services and devices deemed experimental/investigational/unproven: Programming device evaluation (remote) of subcutaneous cardiac rhythm monitor system, with iterative adjustment of the implantable device to test the function of the device and select optimal permanently programmed values with analysis, review and report by a physician or other qualified health care professional	Add	All plans
0651T	Services and devices deemed experimental/investigational/unproven: Magnetically controlled capsule endoscopy, esophagus through stomach, including intraprocedural positioning of capsule, with interpretation and report	Add	All plans
0652T	Services and devices deemed experimental/investigational/unproven: Esophagogastroduodenoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	Add	All plans
0653T	Services and devices deemed experimental/investigational/unproven: Esophagogastroduodenoscopy, flexible, transnasal; with biopsy, single or multiple	Add	All plans

0654T	Services and devices deemed experimental/investigational/unproven: Esophagogastroduodenoscopy, flexible, transnasal; with insertion of intraluminal tube or catheter	Add	All plans
0655T	Services and devices deemed experimental/investigational/unproven: Transperineal focal laser ablation of malignant prostate tissue, including transrectal imaging guidance, with MR-fused images or other enhanced ultrasound imaging	Add	All plans
0656T	Services and devices deemed experimental/investigational/unproven: Vertebral body tethering, anterior; up to 7 vertebral segments	Add	All plans
0657T	Services and devices deemed experimental/investigational/unproven: Vertebral body tethering, anterior; 8 or more vertebral segments	Add	All plans
0658T	Services and devices deemed experimental/investigational/unproven: Electrical impedance spectroscopy of 1 or more skin lesions for automated melanoma risk score	Add	All plans
0659T	Services and devices deemed experimental/investigational/unproven: Transcatheter intracoronary infusion of supersaturated oxygen in conjunction with percutaneous coronary revascularization during acute myocardial infarction, including catheter placement, imaging guidance (eg, fluoroscopy), angiography, and radiologic supervision and interpretation	Add	All plans
0660T	Services and devices deemed experimental/investigational/unproven: Implantation of anterior segment intraocular nonbiodegradable drug-eluting system, internal approach	Add	All plans
0661T	Services and devices deemed experimental/investigational/unproven: Removal and reimplantation of anterior segment intraocular nonbiodegradable drug-eluting implant	Add	All plans
0662T	Services and devices deemed experimental/investigational/unproven: Scalp cooling, mechanical; initial measurement and calibration of cap	Add	All plans
0663T	Services and devices deemed experimental/investigational/unproven: Scalp cooling, mechanical; placement of device, monitoring, and removal of device (List separately in addition to code for primary procedure)	Add	All plans
0664T	Services and devices deemed experimental/investigational/unproven: Donor hysterectomy (including cold preservation); open, from cadaver donor	Add	All plans
0665T	Services and devices deemed experimental/investigational/unproven: Donor hysterectomy (including cold preservation); open, from living donor	Add	All plans
0666T	Services and devices deemed experimental/investigational/unproven: Donor hysterectomy (including cold preservation); laparoscopic or robotic, from living donor	Add	All plans
0667T	Services and devices deemed experimental/investigational/unproven: Donor hysterectomy	Add	All plans

	(including cold preservation); recipient uterus allograft transplantation from cadaver or living donor		
0668T	Services and devices deemed experimental/investigational/unproven: Backbench standard preparation of cadaver or living donor uterine allograft prior to transplantation, including dissection and removal of surrounding soft tissues and preparation of uterine vein(s) and uterine artery(ies), as necessary	Add	All plans
0669T	Services and devices deemed experimental/investigational/unproven: Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; venous anastomosis, each	Add	All plans
0670T	Services and devices deemed experimental/investigational/unproven: Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; arterial anastomosis, each	Add	All plans
C1761	Catheter, transluminal intravascular lithotripsy, coronary	Add	All plans

FIRST NOTICE: Prior Authorization List changes (all plans except Medicaid)
effective 12/01/2021 (60-Day Notice)

Code	Category: Description	Action	Plans
C9081	Antineoplastic Agents: Idecabtagene vicleucef	Add	All plans
C9082	Antineoplastic Agents: Dostarlimab-gxly, 100mg	Add	All plans
C9083	Antineoplastic Agents: Amivantamab-vmjw, 10mg	Add	All plans
C9084	Antineoplastic Agents: loncastuximab tesirine-lpyl, 0.1mg	Add	All plans
C9257	Antineoplastic Agents: Avastin	Add	All plans
J0185	Gastrointestinal drugs: Cinvanti	Add	All plans
J0223	Other Miscellaneous Therapeutic Agents: Givlaari	Add	Cigna-linked plans
J0699	Anti-infective Agents: Cefiderocol, 10mg	Add	All plans
J0741	Anti-infective Agents: Cabotegravir and rilpivirin, 2mg/3mg	Add	All plans
J0791	Blood Formation, Coagulation, Thrombosis agents, Misc.: Adakveo	Add	Cigna-linked plans
J0896	Hematopoietic Agents: Reblozyl	Add	Cigna-linked plans
J0897	Bone Resorption Inhibitors: Prolia/Xgeva	Add	All plans
J1305	Cardiovascular Drugs: Evinacumab-dgnb, 5mg	Add	All plans
J1426	Autonomic Drugs: Casimersen, 10mg	Add	All plans
J1448	Blood Formation, Coagulation, and Thrombosis: Trilaciclib, 1mg	Add	All plans
J2406	Anti-infective Agents: Oritavancin, 10mg	Add	All plans
J2469	Gastrointestinal drugs: Palonosetron	Add	All plans
J2506	Blood Formation, Coagulation, and Thrombosis: Pegfilgrastim, 0.5mg	Add	All plans
J8655	Gastrointestinal drugs: Akynzeo oral	Add	All plans
J9035	Antineoplastic Agents: Avastin	Add	All plans
J9198	Antineoplastic Agents: Infugem	Add	All plans
J9247	Antineoplastic Agents: Melphalan flufenamide, 1mg	Add	All plans

J9318	Antineoplastic Agents: Romidepsin, non-lyophilized, 0.1mg	Add	All plans
J9319	Antineoplastic Agents: Romidepsin, lyophilized, 0.1mg	Add	All plans
Q2054	Antineoplastic Agents: Lisocabtagene maraleucel	Add	All plans
Q5107	Antineoplastic Agents: Mvasi	Add	All plans
Q5118	Antineoplastic Agents: Zirabev	Add	All plans
	NOTE: All of the following additions are potentially "E&I, unproven"		
49906	Free omental flap with microvascular anastomosis	Add	All plans
C9752	Destruction of intraosseous basivertebral nerve, first two vertebral bodies, ... lumbar/sacrum	Add	All plans

**SECOND NOTICE: Prior Authorization List changes (all plans except Medicaid)
effective 11/01/2021**

Code	Category: Description	Action	Plans
	NOTE: All of the following additions are potentially "E&I, unproven"		

**Other Prior Authorization List changes (all plans except Medicaid)
effective 11/01/2021**

Code	Category: Description	Action	Plans
J1628	Tremfya	Remove	MAPD
J1675	Supprelin LA	Remove	MAPD
J9213	Pegasys, Pegasys Proclick	Remove	MAPD
J9216	Actimmune	Remove	MAPD

Additional Information for Providers

The rendering provider must be the same on the preauthorization request and on the claim's submission. If there is a change, it is imperative that the utilization review team is notified to amend the preauthorization in a timely manner.

[Click here](#) to access a 12-month archive of the medical Coverage Policy and Prior Authorization Update Notices.

As always, we welcome your comments. You can reach us at: SWHPMedicalDirectors@BSWHealth.org
SWHP/FirstCare Medical Directors