

Summer 2025 Policy Updates

Sentara Health Plans would like to notify you of the following authorization updates made since the last version of providerNEWS:

You can access all current Sentara Health Plans medical behavioral health, durable medical equipment (DME), imaging, medical, obstetrics, pharmacy, and surgical policies at sentarahealthplans.com

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Provider Alert Issued 4/30/2025 Go Live Was 7/1/2025		
POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS
Ambulatory Devices, DME 40	Criteria updated for Commercial and Medicaid. For Medicare continue to utilize LCD L33733, L33791 and NCD 280.3, 280.1. Codes: E0117, E0118, E0152, E1399, E3200.	<ul style="list-style-type: none"> • Ambulatory Devices Commercial - DME 40 • Ambulatory Devices Medicaid - DME 40
Apheresis, Medical 128	No changes for Commercial and Medicaid. For Medicare continue to utilize NCD 110.14. Codes: 36511, 36512, 36513, 36514, 36516.	<ul style="list-style-type: none"> • Apheresis Commercial - Medical 128 • Apheresis Medicaid -Medical 128
ASAM 3.7 Medically Monitored Intensive Inpatient Admission for Substance (Adult) Initial Medicaid, BH 06	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2036	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM 3.7 Medically Monitored Intensive Inpatient Admission for Substance (Adult) Concurrent Medicaid, BH 43	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2036	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM 4.0 Medically Managed Intensive Inpatient Admission for Substance Abuse (Adolescent) Concurrent Medicaid , BH 47	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0011	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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<p>ASAM Level 2.1 Intensive Outpatient Services for Substance Abuse (Adolescent) Concurrent Medicaid, BH 50</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0015</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.1 Intensive Outpatient Services for Substance Abuse (Adult) Initial Medicaid, BH 08</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0015</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.1 Intensive Outpatient Services for Substance Abuse (Adolescent) Initial Medicaid, BH 48</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0015</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.1 Intensive Outpatient Services for Substance Abuse (Adult) Concurrent Medicaid, BH 49</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0015</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.5 Partial Hospitalization Services for Substance Abuse (Adult) Initial Medicaid, BH 09</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code S0201</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.5 Partial Hospitalization Services for Substance Abuse (Adolescent) Initial Medicaid, BH 51</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code S0201</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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<p>ASAM Level 2.5 Partial Hospitalization Services for Substance Abuse (Adult) Concurrent Medicaid, BH 52</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code S0201</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 2.5 Partial Hospitalization Services for Substance Abuse (Adolescent) Concurrent Medicaid, BH 53</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code S0201</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.1 Clinically Managed Low Intensity Residential Treatment for Substance Abuse (Adult) Initial Medicaid, BH 10</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2034</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.1 Clinically Managed Low Intensity Residential Treatment for Substance Abuse (Adolescent) Initial Medicaid, BH 54</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2034</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.1 Clinically Managed Low Intensity Residential Treatment for Substance Abuse (Adult) Concurrent Medicaid, BH 55</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2034</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.1 Clinically Managed Low Intensity Residential Treatment for Substance Abuse (Adolescent) Concurrent Medicaid, BH 56</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2034</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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<p>ASAM Level 3.3 Clinically Managed Population Specific High-Intensity Residential Services for Substance Abuse (Adult) Initial Medicaid, BH 11</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.3 Clinically Managed Population Specific High-Intensity Residential Services for Substance Abuse (Adult) Concurrent, BH 57</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.5 Clinically Managed High-Intensity Residential Services for Substance Abuse (Adult) Initial Medicaid, BH 12</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.5 Clinically Managed High-Intensity Residential Services for Substance Abuse (Adult) Concurrent Medicaid, BH 58</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
<p>ASAM Level 3.5 Clinically Managed Medium-Intensity Residential Services for Substance Abuse (Adolescent) Initial Medicaid, BH 13</p>	<p>Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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ASAM Level 3.5 Clinically Managed Medium-Intensity Residential Services for Substance Abuse (Adolescent) Concurrent Medicaid, BH 59	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM Level 3.7 Medically Monitored High Intensity Inpatient Services (Adolescent) Initial Medicaid, BH 42	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2036	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM Level 3.7 Medically Monitored High Intensity Inpatient Services (Adolescent) Concurrent Medicaid , BH 44	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H2036	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM Level 4.0 Medically Managed Intensive Inpatient Admission for Substance Abuse Initial Medicaid, BH 07	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0010	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM Level 4.0 Medically Managed Intensive Inpatient Admission for Substance Abuse (Adolescent) Initial Medicaid, BH 45	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0011	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
ASAM Level 4.0 Medically Managed Intensive Inpatient Admission for Substance Abuse (Adult) Concurrent Medicaid, BH 46	Updating and simplifying criteria. Medicaid only policy. HCPCS Code H0011	<ul style="list-style-type: none"> See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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Assertive Community Treatment (ACT), Behavioral Health 28	Updated Medicaid criteria. No policy for Commercial and Medicare. Codes: 90791, 90792, H0040.	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Bariatric Services, Surgical 32	Archive policy for Commercial and Medicaid. For Medicare continue to utilize NCD 100.1 and LCD L34576. Codes: 43633, 43644, 43645, 43659, 43770, 43771, 43772, 43773, 43774, 43775, 43842, 43843, 43845, 43846, 43847, 43848, 43886, 43887, 43888, 47000, 47001, S2083, 0312T, 0313T, 0314T, 0315T, 0316T, 0317T.	Archiving on July 1, 2025 and use MCG.
Breast Procedures, Surgical 10	No changes to Commercial and Medicaid. For Medicare continue to utilize NCD 140.2 and LCD L33428. Codes: 11920, 11921, 11922, 15771, 15772, 19316, 19318, 19325, 19328, 19330, 19342, 19350, 19355, 19357, 19361, 19364, 19367, 19368, 19369, 19370, 19371, 19380, C9358, C9360, Q4100, Q4116, Q4122, Q4128, Q4130, 15877, 15777, 64912, 64913.	<ul style="list-style-type: none"> • Breast Procedures Commercial - Surgical 10 • Breast Procedures Medicaid - Surgical 10

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Category III Codes, Medical 336	No changes for Commercial and Medicaid. For Medicare continue to utilize LCD L35490. Codes: 0042T, 0054T, 0055T, 0075T, 0076T, 0208T,0209T, 0210T, 0211T, 0212T, 0234T,0235T, 0236T, 0237T, 0238T, 0263T,0264T, 0265T, 0266T, 0267T, 0268T,0269T, 0270T, 0271T, 0272T, 0273T,0333T, 0342T, 0345T, 0347T, 0348T,0349T, 0350T, 0351T, 0352T, 0353T,0354T, 0403T, 0422T, 0437T, 0439T,0443T, 0444T, 0445T, 0469T, 0481T,0485T, 0486T, 0488T, 0489T, 0490T,0494T, 0495T, 0496T, 0499T, 0505T,0506T, 0508T, 0509T, 0512T, 0513T,0515T, 0516T, 0517T, 0518T, 0519T,0520T, 0521T, 0522T, 0525T, 0526T,0527T, 0528T, 0529T, 0530T, 0531T,0532T, 0537T, 0538T, 0539T, 0540T,0543T, 0544T, 0545T, 0546T, 0547T,0553T, 0554T, 0555T, 0556T, 0557T, 0558T, 0559T, 0560T, 0561T, 0562T,0564T, 0565T, 0566T, 0567T, 0568T,0569T, 0570T, 0582T, 0583T, 0587T,0588T, 0589T, 0590T, 0591T, 0592T,0593T, 0594T, 0596T, 0597T, 0602T,0603T, 0604T, 0605T, 0606T, 0607T,0608T, 0609T, 0610T, 0611T, 0612T,0613T, 0615T, 0619T, 0620T, 0623T,0624T, 0625T, 0626T, 0627T, 0628T,0629T, 0630T, 0631T, 0632T, 0633T,0634T, 0635T, 0636T, 0637T, 0638T,0639T, 0643T, 0644T, 0645T, 0646T,0647T, 0650T, 0652T, 0653T, 0654T,0655T, 0658T, 0659T, 0660T, 0661T,0672T, 0673T, 0674T, 0675T, 0676T,0677T, 0678T, 0679T, 0680T, 0681T,0682T, 0683T, 0684T, 0685T, 0686T,0687T,	<ul style="list-style-type: none">• Category III Codes Commercial - Medical 336• Category III Codes Medicaid - Medical 336
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	<p>0688T, 0689T, 0690T, 0691T,0692T, 0693T, 0694T, 0695T, 0696T,0699T, 0700T, 0701T, 0704T, 0705T,0706T, 0708T, 0709T, 0710T, 0711T,0712T, 0713T, 0714T, 0717T, 0718T,0723T, 0724T, 0731T, 0732T, 0733T,0734T, 0735T, 0737T, 0738T, 0739T,0740T, 0741T, 0742T, 0743T, 0744T,0745T, 0746T, 0747T, 0748T, 0749T,0750T, 0751T, 0752T, 0753T, 0754T,0755T, 0756T, 0757T, 0758T, 0759T,0760T, 0761T, 0762T, 0763T, 0764T,0765T, 0766T, 0767T, 0768T, 0769T,0770T, 0771T, 0772T, 0773T, 0774T,0775T, 0776T, 0777T, 0778T, 0779T,0780T, 0781T, 0782T, 0783T, 0791T,0792T, 0793T, 0794T, 0795T, 0796T,0797T, 0798T, 0799T, 0800T, 0801T, 0802T, 0803T, 0804T, 0805T, 0806T,0807T, 0808T, 0809T, 0810T</p>	
<p>Dry Needling, Medical 173</p>	<p>No changes to Commercial and Medicaid. For Medicare continue to utilize NCD 30.3.3 and LCD L33622 and LCD Reference Article Billing and Coding Article A52863. Codes: 20560, 20561.</p>	<ul style="list-style-type: none"> • Dry Needling Commercial - Medical 173 • Dry Needling Medicaid - Medical 173
<p>Evolent will be adding CPT code 76391, Magnetic resonance (e.g. vibration) elastography to management</p>	<p>Evolent will be adding Magnetic Resonance Elastography (MRE) to scope effective 7.1.2025 for all lines of business. CPT Code 76391</p>	
<p>Extracorporeal Photopheresis, Medical 237</p>	<p>Archive Commerical and Medicaid and pay upon request. For Medicare continue to utilize NCD 110.4.</p> <p>Codes: 36522.</p>	<p>Archiving on July 1, 2025.</p>

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Functional Family Therapy, Behavioral Health 36	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: 90791, 90792, H0036.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
High Frequency Chest Wall Compression, DME 14	<p>No changes for Commercial and Medicaid. For Medicare continue to utilize LCD L33785 and NCD 280.1. Codes: A7025, A7026, E0483, E0481, E1399, E0606, E0480.</p>	<ul style="list-style-type: none"> • High Frequency Chest Wall Compression Commercial - DME 14 • High Frequency Chest Wall Compression Medicaid - DME 14
Intensive in-Home Service for Youth, Behavioral Health 18	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: H2012, H0031.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Intra-Oral Appliances and Splints for Temporomandibular Joint (TMJ) Syndrome, DME 222	<p>Archive policy for all lines of business. Codes: 21085, D7880.</p>	<p>Archiving on July 1, 2025.</p>
Jaw Motion Rehabilitation Systems, DME 43	<p>Archive policy for all lines of business. Codes: E1700, E1701, E1702.</p>	<p>Archiving July 1, 2025.</p>
Long-Term Care Hospital Services (LTACH), Medical 337	<p>No change to Medicaid and Medicare there is no Commercial policy. Codes: None</p>	<ul style="list-style-type: none"> • Long-Term Care Hospital Services (LTACH) Medicaid - Medical 337 • Long-Term Care Hospital Services (LTACH) Medicare - Medical 337
Mastectomy Garments, DME 240	<p>Archive policy for Commercial and Medicaid. For Medicare continue to utilize LCD L33317. Codes: L8000, L8001, L8002, L8010, L8015, L8020, L8030, L8031, L8032, L8033, L8035, L8039.</p>	<p>Archiving on July 1, 2025.</p>

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Mental Health Case Management, Behavioral Health 22	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: H0023.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Mental Health Family Support Partners, Behavioral Health 23	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: H0024.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Mental Health Intensive Outpatient Services (MH-IOP), Behavioral Health 29	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: 90791, 90792, 90839, 90840, H0024, S9480.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Mental Health Peer Support Services, Behavioral Health 19	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: H0032, H2017.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Mental Health Skill-Building (MHSS), Behavioral Health 10	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: H0032, H0046.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy
Mobile Cardiac Telemetry, Medical 112	<p>No changes for Commercial and Medicaid. For Medicare continue to utilize LCD L34573 and NCD 20.15. Codes: 93228, 93229.</p>	<ul style="list-style-type: none"> • Mobile Cardiac Telemetry Commercial - Medical 112 • Mobile Cardiac Telemetry Medicaid - Medical 112
Multisystemic Therapy, Behavioral Health 35	<p>Updated Medicaid criteria. No policy for Commercial and Medicare.</p> <p>Codes: 90791, 90792, H2033.</p>	<ul style="list-style-type: none"> • See https://www.sentarahealthplans.com/en/providers/clinical-reference/medical-policies/behavioral-health for current policy

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<p>Negative Pressure Wound Vac, DME 241</p>	<p>No changes for Commercial and Medicaid. For Medicare continue to utilize LCD L33821. Codes: 97607, 97608, A9272, 97605, 97606, A6550, E2402.</p>	<ul style="list-style-type: none"> • Negative Pressure Wound Vac Commercial - Durable Medical Equipment 241 PDF, 259 KB Last Updated: 08/05/2024 (sitecorecontenthub.cloud) • Negative Pressure Wound Vac Medicaid - Durable Medical Equipment 241 PDF, 309 KB Last Updated: 08/05/2024 (sitecorecontenthub.cloud)
<p>New Tech Review – PRELUD DCIS TEST- DCISIONRT</p>	<p>Add panel to Medical 34 Genetic and Molecular Testing for Commercial and Medicaid. For Medicare continue to utilize LCD L35025. Codes: 0295U</p>	
<p>New Tech Review – Syn One Test</p>	<p>For Commercial and Medicaid add to Surgical 09 Skin Lesions/Keloids/Warts/Dermoscopy and Biopsies and Medical 34 Molecular and Genetic Testing. For Medicare continue to utilize LCD L33445 and NCD 250.4. Codes: 88305, 88314, 88346, 88350, 88356.</p>	
<p>Non-invasive Assessment of the Vasculature for Cardiovascular Risk, Medical 334</p>	<p>Archive policy for all lines of business. Codes: 0716T, 93050, 93799, 93895, 93998.</p>	<p>Archiving on July 1, 2025.</p>
<p>Paranasal Sinus Ultrasound, Imaging 26</p>	<p>Archive policy for all lines of business. Codes: 76536, S9024.</p>	<p>Archiving on July 1, 2025.</p>
<p>Spinal Arthroplasty, Surgical 35</p>	<p>Criteria updated for Commercial and Medicaid. For Medicare continue to utilize LCD L38033, L37826. NCD150.10. Codes: 0095T, 0098T, 22856, 22857, 22858, 22861, 22862, 22864, 22865, 0163T, 0164T, 0165T, 0202T, 0219T, 0220T, 0221T, 0222T, 0719T.</p>	<ul style="list-style-type: none"> • Spinal Arthroplasty (Formerly: Artificial Disc Replacement and Treatment) Commercial - Surgical 35 • Spinal Arthroplasty (Formerly: Artificial Disc Replacement and Treatment) Medicaid - Surgical 35

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<p>Spinal Braces, Orthotics and Garments, DME 244</p>	<p>No changes to Commercial and Medicaid. For Medicare continue to utilize NCD 280.1 and LCD L33790. Codes: L0450, L0452, L0454, L0462, L0470, L0472, L0480, L0482, L0484, L0486, L0488, L0490, L0491, L0492, L0621, L0622, L0623, L0624, L0625, L0626, L0627, L0628, L0629, L0630, L0631, L0632, L0633, L0634, L0635, L0636, L0637, L0639, L0640, L0641, L0642, L0643, L0648, L0649, L0650, L0651, L1499, L2999</p>	<ul style="list-style-type: none"> • Spinal Braces, Orthotics and Garments Commercial - DME 244 • Spinal Braces, Orthotics and Garments Medicaid - DME 244
<p>Treatment for Varicose Veins, Surgical 04</p>	<p>Rename policy to “Treatment for Varicose Veins of the Legs” and criteria updated for Commercial and Medicaid. For Medicare continue to utilize LCD L39121. Codes: 36465, 36466, 36470, 36471, 36475, 36476, 36478, 36479, 36482, 36483, 37500, 37718, 37722, 37735, 37760, 37761, 37765, 37766, 37780, 37785, 37799, 36468, 36473, 36474, 36741, 37700, 0524T.</p>	<ul style="list-style-type: none"> • Treatment for Varicose Veins Commercial - Surgical 04 PDF, 282 KB Last Updated: 07/01/2024 (sitecorecontenthub.cloud) • Treatment for Varicose Veins Medicaid - Surgical 04 PDF, 334 KB Last Updated: 07/01/2024 (sitecorecontenthub.cloud)

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Provider Alert Issued 5/30/2025 Go Live 8/1/2025		
POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS
23-Hour Crisis Stabilization, BH 33	Updated Medicaid policy per DMAS manual update, no Commercial and Medicare policy. Codes: 90791, 90792, S9485.	<ul style="list-style-type: none"> • 23-Hour Crisis Stabilization Medicaid - BH 33
Accelerated Partial Breast Irradiation, Medical 207	Archiving Commercial and Medicaid policies. Codes: 19296, 19297.	Archive on August 1, 2025
Applied Behavioral Analysis, BH 37	No changes to Medicaid policy, no Commercial and Medicare policy. Codes: 97151, 97152, 97153, 97154, 97155, 97156, 97157, 97158, 0362T, 0373T.	<ul style="list-style-type: none"> • Applied Behavioral Analysis Medicaid - BH 37
Brachytherapy, Medical 71	Archiving Commercial and Medicaid policies. Codes: 19298, 20555, 41019, 55875, 55920, 57156, 77316, 77317, 77318, 77750, 77761, 77762, 77763, 77767, 77768, 77770, 77771, 77772, 77778, 77790, 77799, 77799, 0395T.	Archive on August 1, 2025
Cell Enumeration, Medical 310	Archiving policy for Commercial and Medicaid. For Medicare continue to utilize LCD L38566. Codes: Removing prior authorization for 0091U, 86152, 86153 for Commercial, Medicaid and Medicare.	Archiving on August 1, 2025.
Chemotherapy and Supportive Care, Medical 316	No changes for Commercial, Medicaid and Medicare. Codes: 96401, 96402, 96405, 96406, 96409, 96411, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96542, 96549.	<ul style="list-style-type: none"> • Chemotherapy Administration Commercial - Medical 316 • Chemotherapy Administration Medicaid - Medical 316

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<p>Chiropractic Services, Medical 182</p>	<p>No changes to Commercial policy, no Medicaid or Medicare policy. Codes: 97010, 97012, 97014, 97022, 97024, 97026, 97032, 97035, 97039, 97110, 97113, 97124, 97140, 97161, 97530, 97533, 97750, 97760, 98940, 98941, 98942, 98943, E0730, E0855, G0283, L0626, L0627, L0631, L0637, L0650, 20561, 97016, 97150, 97802, 97803, 97810, 97811, 97813, 97814, E0190.</p>	<ul style="list-style-type: none"> • Chiropractic Services Commercial - Medical 182
<p>Cochlear Implants, Bone Attached Hearing Aid Implants, Auditory Brain Stem Implant, Surgical 20</p>	<p>Criteria updated for Commercial and Medicaid. For Medicare continue to utilize NCD 50.3 and LCA A53708. Remove codes 69930, 69710, 69711, 69714, 69716, 69717, 69719, 69726, 69727, 69728, 69729, 69730, 92640, L8614, L8615, L8616, L8617, L8618, L8619, L8621, L8622, L8623, L8624, L8625, L8627, L8628, L8629, S2235, 92622, 92623, L8625, L8690, L8691, L8693, L8694, V5040 from policy and use MCG. Codes remaining in policy 69799, 69949, L8692, S2230.</p>	<ul style="list-style-type: none"> • Cochlear Implants, Bone Attached Hearing Aid Implants and Auditory Brain Stem Implants Commercial - Surgical 20 • Cochlear Implants, Bone Attached Hearing Aid Implants and Auditory Brain Stem Implants Medicaid - Surgical 20
<p>Community Stabilization, BH 32</p>	<p>Updated Medicaid policy per DMAS manual update, no Commercial and Medicare policy. Codes: 90791, 90792, S9482.</p>	<ul style="list-style-type: none"> • Community Stabilization Medicaid - BH 32
<p>Dermatologic Conditions (Formerly Skin Lesions-Keloids- Warts- Dermoscopy) Surgical 09</p>	<p>Expanded criteria for Commercial and Medicaid. For Medicare continue to utilize NCD 250.4, 140.5, 250.1. Codes: 0479T, 0480T, 11102, 11103, 11104, 11105, 17106, 17107, 17108, 77401, 77402, 77407, 77427, 77431, 88356, 96920, 96921, 96922, 96999, 97039, 0419T, 0420T, S8948, 96904, 96931, 96932, 96933, 96934, 96935, 96936.</p>	<ul style="list-style-type: none"> • Dermatologic goes live 6/1 so there are no updated links to put here

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<p>Doula Services: DMAS Criteria Document, OB 13</p>	<p>No changes to Medicaid policy, no Commercial or Medicare policy. Codes: 59409HD, 59425HD, 59430HD, 59514HD, 99600HD, 99199HD.</p>	<ul style="list-style-type: none"> • Doula Services Medicaid - Obstetrics 13
<p>Elective Termination of Pregnancy, OB 01</p>	<p>No changes to Commercial and Medicaid. For Medicare continue to utilize NDC 140.1. Codes: 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857, 59866, S0199.</p>	<ul style="list-style-type: none"> • Elective Termination of Pregnancy Commercial - Obstetrics 01 • Elective Termination of Pregnancy Medicaid - Obstetrics 01
<p>Foot Orthotics, DME 64 - (Formerly Foot Orthotics, Diabetic Shoes, and Braces)</p>	<p>Archiving policy for Commercial and Medicaid, and use MCG. For Medicare continue to utilize LCD L33641. Codes: A9283, L3000, L3001, L3002, L3003, L3010, L3020, L3030, L3031, L3040, L3050, L3060, L3070, L3080, L3090, L3170, L3201, L3202, L3203, L3204, L3206, L3207, L3208, L3209, L3211, L3212, L3213, L3214, L3215, L3216, L3217, L3219, L3221, L3222, L3224, L3225, L3230, L3250, L3251, L3252, L3253, L3254, L3255, L3257, L3265, L3300, L3310, L3320, L3330, L3332, L3334, L3340, L3350, L3360, L3370, L3380, L3390, L3400, L3410, L3420, L3430, L3440, L3450, L3455, L3460, L3465, L3470, L3480, L3485, L3500, L3510, L3520, L3530, L3540, L3550, L3560, L3570, L3580, L3590, L3595, L3600, L3610, L3620, L3630, L3640, L3649</p>	<ul style="list-style-type: none"> • Foot Orthotics Commercial - DME 64 • Foot Orthotics Medicaid - DME 64
<p>Home Music Therapy, BH 38</p>	<p>Archiving policy for Commercial, Medicaid and Medicare. Codes: G0176.</p>	<p>Archiving on August 1, 2025.</p>
<p>Mental Health Partial Hospitalization Program (MH- PHP), BH 30</p>	<p>No changes to Medicaid policy, no Commercial and Medicare policy. Codes: 90791, 90792, 90839, 90840, H0024, H0025, H0035.</p>	<ul style="list-style-type: none"> • Mental Health Partial Hospitalization Program (MH-PHP) Medicaid - BH 30

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<p>Mobile Crisis Response, BH 31</p>	<p>No changes to Medicaid policy, no Commercial and Medicare policy. Codes: H2011.</p>	<ul style="list-style-type: none"> • Mobile Crisis Response Medicaid - BH 31
<p>Open Treatment of Rib Fracture with Internal Fixation, Surgical 217</p>	<p>Archiving policy for Commercial and Medicaid and utilize MCG GRG(SG- TS). For Medicare continue to utilize LCA A53931Codes: 21811, 21812, 21813.</p>	<p>Archiving on August 1, 2025</p>
<p>OSA oral devices (i.e. eXciteOSA), DME 250 New Name: OSA Devices, DME 250</p>	<p>Expanded criteria and added codes for Commercial, Medicaid and Medicare. Policy name changed to OSA Devices. Codes: E0490, E4091, E0492, E0493, E0530, Adding codes E0492, E0493, and E0530.</p>	<ul style="list-style-type: none"> • Obstructive Sleep Apnea Oral Devices Commercial - DME 250 • Obstructive Sleep Apnea Oral Devices Medicaid - DME 250 • Obstructive Sleep Apnea Oral Devices Medicare - DME 250

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Prosthetics, DME 21	<p>No changes for Commercial and Medicaid. For Medicare continue to utilize NCD 280.10, 80.5 and LCD L33737, L33738, L33787. Codes: 92499, L2006, L5000, L5010, L5020, L5050, L5060, L5100, L5105, L5150, L5160, L5200, L5210, L5220, L5230, L5250, L5270, L5280, L5301, L5312, L5321, L5331, L5341, L5400, L5410, L5420, L5430, L5450, L5460, L5500, L5505, L5510, L5520, L5530, L5535, L5540, L5560, L5570, L5580, L5585, L5590, L5595, L5600, L5610, L5611, L5613, L5614, L5616, L5617, L5618, L5620, L5622, L5624, L5626, L5628, L5629, L5630, L5631, L5632, L5634, L5636, L5637, L5638, L5639, L5640, L5642, L5643, L5644, L5645, L5646, L5647, L5648, L5649, L5650, L5651, L5652, L5653, L5654, L5655, L5656, L5658, L5661, L5665, L5666, L5668, L5670, L5671, L5672, L5673, L5676, L5677, L5678, L5679, L5680, L5681, L5682, L5683, L5684, L5685, L5686, L5688, L5690, L5692, L5694, L5695, L5696, L5697, L5698, L5699, L5700, L5701, L5702, L5703, L5704, L5705, L5706, L5707, L5710, L5711, L5712, L5714, L5716, L5718, L5722, L5724, L5726, L5728, L5780, L5781, L5782, L5785, L5790, L5795, L5810, L5811, L5812, L5814, L5816, L5818, L5822, L5824, L5826, L5828, L5830, L5840, L5845, L5848, L5850, L5855, L5856, L5857, L5858, L5859, L5910, L5920, L5925, L5930, L5940, L5950, L5960, L5961, L5962, L5964, L5966, L5968, L5969, L5970, L5971, L5972, L5973, L5974, L5975, L5976, L5978, L5979, L5980, L5981, L5982, L5984, L5985, L5986, L5987, L5988, L5990, L5999, L6000, L6010, L6020, L6026, L6880, L6881, L6882, L6920, L6925, L6930, L6935, L6940, L6945, L6950, L6955, L6960, L6965, L6970, L6975, L7007, L7008, L7009, L7045, L7170,</p>	<ul style="list-style-type: none">• Prosthetic Devices Commercial - DME 21• Prosthetic Devices Medicaid - DME 21
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	L7180, L7181, L7185, L7186, L7190, L7191, L7510, L7520, L8041, L8042, L8043, L8044, L8045, L8046, L8499, L8701, L8702, S0515.	
Proton Beam Radiation Therapy (PBRT), Medical 101	Archiving Commercial and Medicaid policies. Codes: 77520, 77522, 77523, 77525.	Archive on August 1, 2025
Psychosocial Rehabilitation, BH 21	No changes to Medicaid policy, no Commercial and Medicare policy. Codes: H0032, H2017.	<ul style="list-style-type: none"> • Psychosocial Rehabilitation Medicaid - BH 21
Residential Crisis Stabilization Unit (RCSU), BH 34	Updated Medicaid policy per DMAS manual update, no Commercial and Medicare policy. Codes: 90791, 90792, H2018.	<ul style="list-style-type: none"> • Residential Crisis Stabilization Unit (RCSU) Medicaid - BH 34
Sensory-Weighted Vest, BH 27	No changes for Commercial, Medicaid and Medicare. Codes: A9900.	<ul style="list-style-type: none"> • Sensory - Weighted Vest Commercial - Behavioral Health 27 PDF, 221 KBLast Updated: 09/03/2024 (sitecorecontenthub.cloud) • Sensory - Weighted Vest Medicaid - Behavioral Health 27 PDF, 228 KBLast Updated: 09/03/2024 (sitecorecontenthub.cloud) • Sensory - Weighted Vest Medicare - Behavioral Health 27 PDF, 277 KBLast Updated: 07/26/2024 (sitecorecontenthub.cloud)

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<p>Stereotactic Radiosurgery (SRS) and Stereotactic Body Radio Therapy (SBRT), Surgical 88</p>	<p>Archive Commercial and Medicaid, and continue to utilize LCD L39553, and A59350 for Medicare. Codes: 32701, 61720, 61735, 61760, 61770, 61781, 61782, 61790, 61791, 61796, 61797, 61798, 61799, 61800, 63620, 63621, 77371, 77372, 77373, 77432, 77435, G0339, G0340. Removing prior authorization on 61781, 61782, 61783 for Commercial and Medicaid.</p>	<p>Archiving on August 1, 2025.</p>
<p>Surgical Treatment for Obstructive Sleep Apnea (OSA), Surgical 18</p>	<p>Expanding for Commercial and Medicaid. For Medicare continue to utilize LCD L34526, L38276. Codes: 21031, 21198, 21199, 21206, 21685, 41512, 42140, 41530, 42299, 42975, 61886, 61888, 64568, 64569, 64570, 64582, 64583, 64584, S2080, L8679, L8680, L8681, L8682, L8683, L8685, L8686, L8688</p>	<ul style="list-style-type: none"> • Surgical Treatments for Obstructive Sleep Apnea (OSA) Commercial - Surgical 18 • Surgical Treatments for Obstructive Sleep Apnea (OSA) Medicaid - Surgical 18
<p>Telemonitoring Services, Medical 160</p>	<p>Archive Medicaid policy. Remove Prior Authorization from 98975, 98976, 98977, 98978, 98980, and 98981 for Commercial, Medicaid and Medicare. Remove Prior Authorization from 99473 and 99474 for Medicare. Remove Prior Authorization for S9110 for Medicaid.</p>	<p>Archive on August 1, 2025</p>
<p>Testing of Premature Rupture of Membrane in Pregnancy, OB 12</p>	<p>Archiving policy for Commercial, Medicaid and Medicare and use MCG. Removing prior authorization for code: 84112</p>	<p>Archiving on August 1, 2025.</p>
<p>Therapeutic Day Treatment (TDT) for Youth, BH 20</p>	<p>No changes to Medicaid policy, no Commercial and Medicare policy. Codes: H0032, H2016.</p>	<ul style="list-style-type: none"> • Therapeutic Day Treatment (TDT) for Youth Medicaid - BH 20
<p>Titanium Rib Implant Device, Surgical 75</p>	<p>Archive policy for Commercial, Medicaid and Medicare. Codes: 21899.</p>	<p>Archiving on August 1, 2025.</p>

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Transabdominal Cerclage, OB 11	Archiving policy for Commercial, Medicaid and Medicare and use MCG. Codes: 59325, 59898.	Archiving on August 1, 2025.
Ultraviolet Light Therapy System for Home Use, DME 60	Expanded criteria for Commercial and Medicaid. For Medicare continue to utilize NCD 280.1 and 250.1. Codes: E0691, E0692, E0693, E0694.	<ul style="list-style-type: none"> • Ultraviolet Light Therapy System for Home Use Commercial - DME 60 • Ultraviolet Light Therapy System for Home Use Medicaid - DME 60
Vision Therapy for Convergence Insufficiency, Medical 324	Criteria updated for Commercial, Medicaid and Medicare. Codes: 92065, 92066, 92499.	<ul style="list-style-type: none"> • Vision Therapy for Convergence Insufficiency Commercial - Medical 324 • Vision Therapy for Convergence Insufficiency Medicaid - Medical 324
Wearable Monitoring and Treatment Devices for Home Use, Medical 259	Criteria updated for Commercial and Medicaid. For Medicare continue to utilize NCD 150.5. Codes: E1399, K1004, K1036. Add E0270 to policy.	<ul style="list-style-type: none"> • Actigraphy Commercial - Medical 259 • Actigraphy Medicaid - Medical 259
Wound Treatments, Medical 343	No changes to criteria for Commercial and Medicaid. No policy for Medicare. Codes: J7353, 97610, A9156.	<ul style="list-style-type: none"> • Wound Treatment and Care Supplies (i.e. dressings, barriers and fillers) Commercial - Medical 343 • Wound Treatment and Care Supplies (i.e. dressings, barriers and fillers) Medicaid - Medical 343

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**Provider Alert Issued 7/21/2025 (June Notice)
Go Live 10.1.2025**

POLICY	DETERMINATION/COVERAGE	CURRENT POLICY URLS
Addiction and Recovery Treatment Services (ARTS) Family Support Partners, BH 41	DMAS manual has not updated. No changes to Medicaid policy. No Commercial or Medicare policies. Codes: S9445	<ul style="list-style-type: none"> • ARTS Family Support Partners Medicaid - BH 41
Addiction and Recovery Treatment Services (ARTS) Peer Support Service, BH 40	DMAS manual has not updated. No changes to Medicaid policy. No Commercial or Medicare policies. Codes: T2012	<ul style="list-style-type: none"> • ARTS Peer Support Services Medicaid - BH 40
Computer Assisted Navigation for surgical procedures, Surgical 233	No changes for all lines of business. Codes: 61781, 61782, 61783, 0054T, 0055T, 20985	<ul style="list-style-type: none"> • Computer Assisted Navigation Commercial - Surgical 233 • Computer Assisted Navigation Medicaid - Surgical 233 • Computer Assisted Navigation Medicare - Surgical 233
Continuous Glucose Monitoring System, DME 10	Added codes no changes to criteria for both Commercial and Medicaid. For Medicare continue to utilize NCD 190.20 and 40.3 and LCD L38743. Codes: 0446T, 0447T, 0448T, A4238, A9276, A9277, A9278, A9279, E2102, K0553, K0554, 0446T, 0447T, 0448T, A4238, A4239, A9276, A9277, A9278, A9279, E2102, E2103, K0553, K0554, S1030	

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Deep Brain Stimulation, Surgical 74	Archiving policy for Commercial and Medicaid and adding it to the new Electrical Stimulation, Medical 349 policy. For Medicare continue to utilize NCD 160.24. Codes: C1767, C1778, C1787, C1820, C1826, C1827, C1883, L8679, L8680, L8681, L8685, L8686, L8687, L8688, L8689, L8695, 61863, 61864, 61867, 61868, 61880, 61885, 61886, 61888, 95961, 95962, 95970, 95983, 95984, C1767, C1778, C1820, C1826, C1827, L8679, L8680, L8685, L8686, L8687, L8688, 61885, 61888, 64553, 64568, 64569, 64570, 95970, 95976, 95977	Policy will archive on 10.1.2025
Electric, Electromagnetic and Ultrasonic Bone Growth Stimulation, DME 09	Archiving policy for Commercial and Medicaid and adding it to the new Electrical Stimulation, Medical 349 policy. For Medicare continue to utilize NCD 150.2 and LCD L33796. Codes: 20974, 20975, 20979, E0747, E0748, E0749, E0760	Policy will archive on 10.1.2025
External Insulin Infusion Pump, DME 11	Added codes and added artificial pancreas/ AID/ loop system with definitions to existing criteria for Commercial and Medicaid. For Medicare continue to utilize NCD 280.14 and LCD L33794. Codes: A4224, A4225, A4226, A4230, A4231, A9274, E0784, K0552, A4222, A4224, A4225, A4226, A4230, A4231, A4232, A9274, E0784, K0552, S1034, S1035, S1036, S1037.	
Fetal Magnetic Cardiac Signal, Medical 297	No changes to all lines of business. Codes: 93799	<ul style="list-style-type: none"> • Fetal Magnetic Cardiac Signal Commercial - Medical 297 • Fetal Magnetic Cardiac Signal Medicaid - Medical 297 • Fetal Magnetic Cardiac Signal Medicare - Medical 297
Galectin 3 (LGALS3), Medical 304	Archiving all lines of business and removing auths. Codes: 82777	Policy will archive on 10.1.2025
Home Spirometry, DME 23	Archiving policy for all lines of business and removing auth. Codes: 94015, 94016, E0487, A9284, 94014	Policy will archive on 10.1.2025

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Home Visual Field Monitoring Device, DME 62	Archiving policy for both Commercial and Medicaid adding codes to Category III, Medical 336. For Medicare continue to utilize NCD 280.1. Codes: 0378T, 0379T	Policy will archive on 10.1.2025
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<p>Miscellaneous Orthotics and Braces, DME 251 (New Policy Name: Orthotics and Braces, DME 251)</p>	<p>Creating a new policy that combines all remaining orthotics policies into one for both Commercial and Medicaid. Renaming policy to Orthotics and Braces, DME 251. Archiving Spinal Braces, Orthotics and Garments, DME 244 and adding criteria to new policy. Stop using MCG A-0894, A-0332. For Medicare continue to utilize NCD 280.1 and LCD L33688 and L33318. Codes: L1681, L1685, L1686, L1907, L2034, L2106, L2108, L2112, L2116, L2126, L2128, L2132, L2134, L2136, L2387, L3760, L3763, L3764, L3765, L3905, L3961, L3967, L3971, L3973, L3975, L3976, L3977, L3978, L8701, L870, K0672, K1007, L0140, L0150, L0160, L0170, L0180, L0190, L0200, L0220, L0450, L0452, L0454, L0455, L0456, L0457, L0458, L0460, L0462, L0466, L0467, L0468, L0469, L0470, L0472, L0480, L0482, L0484, L0486, L0488, L0490, L0491, L0492, L0621, L0622, L0623, L0624, L0625, L0626, L0627, L0628, L0629, L0630, L0631, L0632, L0633, L0634, L0635, L0636, L0637, L0638, L0639, L0640, L0641, L0642, L0643, L0648, L0649, L0650, L0651, L0700, L0710, L0810, L0820, L0830, L0861, L0970, L0974, L0976, L0980, L0982, L0984, L0999, L1000, L1001, L1005, L1006, L1010, L1020, L1025, L1030, L1040, L1050, L1060, L1070, L1080, L1085, L1090, L1100, L1110, L1120, L1200, L1210, L1220, L1230, L1240, L1250, L1260, L1270, L1280, L1290, L1300, L1310, L1499, L1600, L1610, L1620, L1630, L1640, L1650, L1653, L1660, L1680, L1681, L1685, L1686, L1690, L1700, L1710, L1720, L1730, L1755, L1821, L1831, L2040, L2050, L2060, L2070, L2080, L2090, L2106, L2108, L2112, L2116, L2126, L2128, L2132, L2134, L2136, L2180, L2182, L2184, L2186, L2188, L2190, L2192, L2405, L2415, L2492, L2500, L2510, L2520, L2525, L2526, L2530, L2540, L2550, L2999, L3660, L3671, L3677, L3710, L3720, L3730, L3740, L3760, L3761, L3763, L3764, L3765, L3806, L3891, L3900, L3901, L3904, L3905, L3912, L3915, L3916, L3925, L3929,</p>	
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	<p>L3930, L3931, L3956, L3960, L3961, L3962, L3967, L3971, L3973, L3975, L3976, L3977, L3978, L8701, L8702, L1080, L1085, L1090, L1100, L1110, L1120, L1200, L1210, L1220, L1230, L1240, L1250, L1260, L1270, L1280, L1290, L1300, L1310, L1499, L1600, L1610, L1620, L1630, L1640, L1650, L1653, L1660, L1680, L1681, L1685, L1686, L1690, L1700, L1710, L1720, L1730, L1755, L1821, L1831, L2040, L2050, L2060, L2070, L2080, L2090, L2106, L2108, L2112, L2116, L2126, L2128, L2132, L2134, L2136, L2180, L2182, L2184, L2186, L2188, L2190, L2192, L2405, L2415, L2492, L2500, L2510, L2520, L2525, L2526, L2530, L2540, L2550, L2999, L3660, L3671, L3677, L3710, L3720, L3730, L3740, L3760, L3761, L3763, L3764, L3765, L3806, L3891, L3900, L3901, L3904, L3905, L3912, L3915, L3916, L3925, L3929, L3930, L3931, L3956, L3960, L3961, L3962, L3967, L3971, L3973, L3975, L3976, L3977, L3978, L8701, L8702</p>	
<p>Near-infrared Spectroscopy, Medical 330</p>	<p>Archiving policy for both Commercial and Medicaid and adding to Category III, Medical 336. For Medicare continue to utilize NCD 270.6 and LCD L39385. Codes: 0859T, 0640T, 0860T, 76499, 0493T, 0641T, 0642T</p>	<p>Policy will archive on 10.1.2025</p>
<p>Neurolysis and Nerve Re-Implantation for Pelvic Pain, Surgical 221</p>	<p>Archiving policy for all lines of business and adding it to Spinal and Other Pain Management Procedures, Surgical 119. Codes: 64722, 64999</p>	<p>Policies will archive on 10.1.2025</p>

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<p>Neuromuscular Electrical Stimulator and Functional Electrical Stimulators, DME 17</p>	<p>Archiving this policy for Commercial and Medicaid and added to new policy Electrical Stimulation, Medical 349. Policies also archiving and added to the new policy will be:</p> <ul style="list-style-type: none"> • Electrical Stimulation, DME 07 • Electrical Stimulation and Electromagnetic Therapy for Wounds, DME 01 • Electric, Electromagnetic, Ultrasonic Bone Growth Stimulation, DME 09 • Deep Brain Stimulation, Surgical 74 • Spinal Cord Electrical Stimulator - Spinal cord stimulator (SPS) and Dorsal Motor Ganglion Stimulator (DMG), Surgical 69 <p>For Medicare continue to utilize NCD 160.12. Codes: 20974, 20975, 20979, 61850, 61863, 61864, 61867, 61868, 61880, 61885, 61886, 61888, 63650, 63655, 63685, 64555, 64575, 64580, 64585, 64590, 64595, 64596, 64597, 64598, 64999, A4541, A4542, A4545, A4558, A4595, E0720, E0730, E0731, E0733, E0734, E0736, E0737, E0745, E0747, E0748, E0749, E0760, E0764, E0769, E0770, G0281, G0282, G0295, G0329, L8680, L8682, L8683, L8685, L8686, L8687, L8688, 0278T, 0720T, 0766T, 0767T, 0768T, 0769T, 0783T, A4543, A4544, A4596, E0721, E0732, E0743, E0744, E0755, E0761, E0762, E0765, S8130, S8131, S8930, A4560, L8679, A4557, L8678, L8680, 6459, 64598, L8679, E0744, A4560</p>	<p>Policies will archive on 10.1.2025</p>
<p>Total Ankle Replacement, Surgical 96</p>	<p>No changes to all lines of business. Codes: 27702, 27703, 27704</p>	<ul style="list-style-type: none"> • Total Ankle Replacement Commercial - Surgical 96 • Total Ankle Replacement Medicaid - Surgical 96 • Total Ankle Replacement Medicare - Surgical 96

Summer 2025 Policy Updates

Wound Treatments, Medical 343 and - New Tech Review: A4575 - Topical hyperbaric oxygen chamber, disposable	Adding codes A4575, E0446 for Topical Hyperbaric Oxygen to Wound Treatments, Medical 343 for both Commercial and Medicaid. For Medicare continue to utilize LCD L33797, L33831. Also adding Codes: A6010, A6011, A6021, A6022, A6023, A6024 and criteria for collagen dressings. Current policy codes J7353, 97610, A9156.	
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