



BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan of South Carolina

August 2020 Medical Policy Updates

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan frequently revise the medical policies we use to make clinical determinations for a member’s coverage. Here are medical policies that have been updated or newly added. A revision history for each policy is included. Please visit the Medical Policies and Clinical Guidelines pages of www.SouthCarolinaBlues.com and www.BlueChoiceSC.com regularly to stay informed of these changes and to read any policy in its entirety.

Policy Number	Policy Name	Recent Changes
CAM 244	COVID-19 Testing	Interim review, updating verbiage regarding PCR testing, adding verbiage regarding antigen testing, adding verbiage regarding specimen acquisition and removing G2023 and G2024 from coding
CAM 044	Genetic Testing for Cystic Fibrosis	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 077	Oral Screening, Lesion Identification Systems and Genetic Screening	Annual review, updating policy to include a medical necessity statement for individuals with oropharyngeal squamous cell carcinoma, high-risk HPV testing. Updating background, guidelines, references and coding.
CAM 154	DNA Ploidy Cell Cycle Analysis	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 200	Folate Testing	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 201	Extended Release Injectable (Sublocade)	Annual review, no change to policy intent. Adding policy language to indicate member must be 18 years old or older.
CAM 223	Tagraxofusp-erzs (Elzonris)	Annual review, updating policy language extensively for clarity. No other changes.
CAM 224	Emapalumab-lzsg (Gamifant)	Annual review. Updating policy language to provide examples of conventional therapy, prescriber requirement and continuation of therapy requirement.
CAM 20125	Erectile Dysfunction	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 20413	Genetic Testing for Alzheimer's Disease	Major policy revision that includes medical necessity criteria for this testing.
CAM 20418	HIV Genotyping and Phenotyping	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 20443	Genetic Testing for Inherited Cardiomyopathies and Channelopathies	Annual review, no change to policy intent. Updating coding.

CAM 20454	Molecular Profiling for Cancers of Unknown Primary Origin	Annual review, updating policy criteria for specificity. Also updating description, rationale, references and title.
CAM 20461	Multigene Expression Assay for Predicting Recurrence in Colon Cancer	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 20485	BCR-ABL1 Testing	Annual review, major revision for clarity, no change to policy intent.
CAM 20488	Genetic Testing for PTEN Hamartoma Tumor Syndrome	Annual review, updating policy to include genetic counseling, and medical necessity criteria for additional testing. Also updating background, rationale and references.
CAM 20489	Genetic Testing for the Diagnosis of Inherited Peripheral Neuropathies	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 20499	Genetic Testing for Hereditary Pancreatitis	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 204101	Genetic Testing for Li-Fraumeni Syndrome	Annual review, no change to policy intent. Updating background, guidelines and references.
CAM 204103	Genetic Testing for Ophthalmologic Conditions	Annual review, updating title, description, background, rationale and references. Updating policy to allow for testing of RPE65 prior to treatment with Luxturna.
CAM 204110	Genetic Testing for Mental Health Conditions	Annual review, combining the two policy statements into one statement; this does not change the intent of the policy. Also updating coding.
CAM 204124	Genetic Testing for Acute Myeloid Leukemia	Annual review, updating policy for clarity; also updating background, rationale and references.
CAM 204137	Genetic Testing for Neurofibromatosis and Related Disorders	Annual review, updating policy for clarity; also updating background, rationale and references.
CAM 60155	Beta Amyloid Imaging with Positron Emission Tomography (PET) for Alzheimer's Disease	Annual review, no change to policy intent. Updating description, regulatory status, guidelines, coding, rationale and references.
CAM 80124	Hematopoietic Cell Transplantation for Miscellaneous Solid Tumors in Adults	Annual review, no change to policy intent. Updating rationale and references.
CAM 80127	Hematopoietic Cell Transplantation for Breast Cancer	Annual review, no change to policy intent.
CAM 80128	Hematopoietic Cell Transplantation for Central Nervous System Embryonal Tumors and Ependymoma	Annual review, no change to policy intent. Updating background and guidelines.
CAM 80131	Autologous Hematopoietic Stem-Cell Transplantation for Malignant Astrocytomas and Gliomas	Annual review, no change to policy intent.
CAM 80141	Interleukin 2 as a Treatment for HIV Infection	Annual review, no change to policy intent.
CAM 90311	Photocoagulation of Macular Drusen	Annual review, no change to policy intent.

CAM 50134	Esketamine Nasal Spray for Treatment-Resistant Depression	Interim review to add coding G2082 and G2083
CAM 701101	Surgical Treatment of Snoring and Obstructive Sleep Apnea Syndrome	Annual review, updating criteria for hypoglossal nerve stimulation in adults to an AHI> 15, policy otherwise unchanged. Updating rationale and references.
CAM 701140	Handheld Radiofrequency Spectroscopy for Intraoperative Assessment of Surgical Margins During Breast-Conserving Surgery	Annual review, no change to policy intent. Updating guidelines, coding, rationale and references.
CAM 70167	Endovascular Stent Grafts for Abdominal Aortic Aneurysms	Annual review, no change to policy intent. Updating regulatory status, guidelines, coding, rationale and references.
CAM 70171	Lung Volume Reduction Surgery for Severe Emphysema	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 70178	Autografts and Allografts in the Treatment of Focal Articular Cartilage Lesions	Annual review, no change to policy intent. Updating background, rationale and references.
CAM 70183	Auditory Brainstem Implant	Annual review, no change to policy intent. Updating guidelines, coding, rationale and references.
CAM 70195	Radiofrequency Ablation of Miscellaneous Solid Tumors Excluding Liver Tumors	Annual review, no change to policy intent. Updating background, guidelines, CPT coding, rationale and references.
CAM 80102	Chelation Therapy for Off-Label Uses	Annual review, no change to policy intent. Updating rationale and references.
CAM 80113	Accelerated Breast Irradiation and Brachytherapy Boost After Breast-Conserving Surgery	Annual review, no change to policy intent. Updating background, description, rationale and references.
CAM 80120	Hematopoietic Stem-Cell Transplantation for Non-Hodgkin Lymphomas	Annual review, no change to policy intent. Updating background, rationale and references.
CAM 80121	Allogeneic Hematopoietic Cell Transplantation for Myelodysplastic Syndromes and Myeloproliferative Neoplasms	Annual review, no change to policy intent. Policy updated for clarity. Updating guidelines, rationale and references.
CAM 80129	Hematopoietic Cell Transplantation for Hodgkin Lymphoma	Annual review, no change to policy intent. Updating rationale and references.
CAM 70105	Cochlear Implant	Annual review, no change to policy intent. Updating description, regulatory status, guidelines, coding, rationale and references.
CAM 80126	Hematopoietic Stem Cell Transplantation for Acute Myeloid Leukemia	Annual review, no change to policy intent. Updating background, guidelines, coding, rationale and references.
CAM 80136	Surgical and Minimally Invasive Treatments for Urinary Outlet Obstruction due to Benign Prostatic Hyperplasia (BPH)	Annual review, no change to policy intent. Updating background, rationale and references.

CAM 80310	Cognitive Rehabilitation	Annual review, no change to policy intent. Updating guidelines, rationale, references and coding.
CAM 80312	Hippotherapy	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 171	Radium Ra 223 (Xofigo®) Injection	Annual review, no change to policy intent.
CAM 115	Durable Medical Equipment (DME)	Annual review, no change to policy intent.
CAM 80122	Allogeneic Hematopoietic Stem-Cell Transplantation for Genetic Diseases and Acquired Anemias	Annual review, no change to policy intent. Updating background.
CAM 80125	Hematopoietic Stem Cell Transplantation for Autoimmune Diseases	Annual review, no change to policy intent. Updating background, guidelines, coding, rationale and references.
CAM 139	Surgical and Minimally Invasive Treatments for Urinary Outlet Obstruction due to Benign Prostatic Hyperplasia (BPH)	Interim review to change language regarding the medical necessity statement related to specific prostate lobes that are enlarged. No other changes made.
CAM 060	Rituximab	Interim review to add Truxima, Q5115 to the coding section. No other changes made.
CAM 161	Lumbar Spinal Procedures	Updating coding. Adding codes 63030 and 63047. No change to intent of policy.
CAM 230	Genicular Nerve Blocks and Ablation for Chronic Knee Pain	Annual review, no change to policy intent.
CAM 10128	Postsurgical Home Use of Limb Compression Devices for Venous Thromboembolism Prophylaxis	Annual review, no change to policy intent. Updating regulatory status, rationale and references.
CAM 20134	Cutaneous Electrogastrography (EGG)	Annual review. No change in policy intent.
CAM 20214	Transcoronary Ablation of Septal Hypertrophy (TASH)	Annual review. No change in policy intent.
CAM 20225	Computerized 2-lead Resting Electrocardiogram Analysis for the Diagnosis of Coronary Artery Disease	Annual review. No change in policy intent.
CAM 20490	Multianalyte Assays with Algorithmic Analyses for Predicting Risk of Type 2 Diabetes	Annual review. No change in policy intent.
CAM 60115	Videofluoroscopic Evaluation of Velopharyngeal Dysfunction	Annual review. No change in policy intent.
CAM 60127	FDG Using Camera-Based Imaging (FDG-SPECT)	Annual review. No change in policy intent.
CAM 60154	Dopamine Transporter Imaging with Single Photon Emission Computed Tomography (DAT-SPECT)	Annual review, no change to policy intent. Updating rationale and references.
CAM 70113	Surgical Treatment of Bilateral Gynecomastia	Annual review, no change to policy intent. Updating references.
CAM 70129	Percutaneous Electrical Nerve Stimulation (PENS) and Percutaneous Neuromodulation Therapy (PNT)	Annual review, no change to policy intent. Updating rationale and references.

CAM 70160	Dynamic Cardiomyoplasty	Annual review. No change to policy intent.
CAM 701139	Peripheral Subcutaneous Field Stimulation	Annual review, no change to policy intent. Updating guidelines, rationale, references and coding.
CAM 701159	Sphenopalatine Ganglion Block for Headache	Annual review, no change to policy intent. Updating guidelines, coding and references.
CAM 70313	Composite Tissue Allotransplantation of the Hand and Face	Annual review, no change to policy intent. Updating background, guidelines, coding, benefit application, rationale and references.
CAM 80137	Inhaled Nitric Oxide	Annual review, no change to policy intent. Updating regulatory status, rationale and references.
CAM 80147	Intensity-Modulated Radiotherapy of the Prostate	Annual review, no change to policy intent. Updating rationale and references.
CAM 80150	Radioimmunotherapy in the Treatment of Non-Hodgkin Lymphoma	Annual review, no change to policy intent.
CAM 80307	Back School	Annual review, no change to policy intent.
CAM 80308	Cardiac Rehabilitation in the Outpatient Setting	Annual review, no change to policy intent. Updating background, rationale and references.
CAM 047	Amniotic Membrane and Limbal Stem Cell Transplantation for the Treatment of Ocular Conditions	Annual review, no change to policy intent.
CAM 10405	Microprocessor-Controlled Prosthetic for the Lower Limb	Annual review, no change to policy intent. Updating rationale and references.
CAM 20129	Biofeedback as a Treatment of Headache	Annual review, no change to policy intent. Updating rationale and references.
CAM 20199	Polysomnography for Non-Respiratory Sleep Disorders	Annual review, no change to policy intent.
CAM 204136	Nutrient/Nutritional Panel Testing	Annual review, no change to policy intent. Updating rationale and references.
CAM 60129	MRI Breast	Updating annual review date to coincide with NIA review.
CAM 60156	Myocardial Sympathetic Innervation Imaging in Patients with Heart Failure	Annual review, no change to policy intent. Updating rationale and references.
CAM 701128	Bronchial Valves	Annual review, no change to policy intent. Updating background, regulatory status, guidelines, coding ,rationale and references.
CAM 70121	Reduction Mammoplasty for Breast-Related Symptoms	Annual review, no change to policy intent. Updating references.
CAM 70186	Endovascular Stent Grafts for Disorders of the Thoracic Aorta	Annual review, no change to policy intent. Updating rationale, references, guidelines and coding.
CAM 701134	Steroid-Eluting Sinus Stents	Annual review, no change to policy intent. Updating guidelines and coding.
CAM 701153	Adipose-Derived Stem Cells in Autologous Fat Grafting to the Breast	Annual review, no change to policy intent. Updating regulatory status, guidelines, coding, rationale and references.

CAM 70312	Islet Cell Transplantation	Annual review, no change to policy intent. Updating background, guidelines, coding, rationale and references.
CAM 80111	Transcatheter Arterial Chemoembolization to Treat Primary or Metastatic Liver Malignancies	Annual review, no change to policy intent. Updating description, background, rationale and references.
CAM 80146	Intensity-Modulated Radiography of the Breast and Lung	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 80148	Intensity-Modulated Radiography: Cancer of the Head and Neck or Thyroid	Annual review, no change to policy intent. Updating rationale and references.
CAM 90329	Eyelid Therma Pulsation for the Treatment of Dry Eye Syndrome	Annual review, no change to policy intent. updating guidelines and coding.