# PROVIDER BULLETIN PROVIDER INFORMATION



August 1, 2022

## Medical Policy Updates: Coupe Health and Self-Funded Benefit Plans managed by Blue Cross and Blue Shield of Alabama

Participating providers are invited to submit for consideration scientific, evidence-based information, professional consensus opinions, and other information supported by medical literature relevant to our draft policies for Coupe Health and Self-Funded benefit plans managed by Blue Cross and Blue Shield of Alabama.

The draft policies are available for physician comment for 45 days from the posting date found on the document. At the conclusion of the 45 days, policies will go into effect. Make sure your voice is heard by providing feedback directly to us.

### How to Submit Comments on Draft Medical Policies

Complete our medical policy feedback form online at https://mn-policies.exploremyplan.com/portal/web/mnpolicies/feedback or send comments and supporting documentation to us by mail or fax:

Birmingham Service Center

Attn: Health Management - Medical Policy

P.O. Box 10527

Birmingham, AL 35202 Fax: 205-220-0878

#### **Draft Medical Policies**

Draft medical policies can be found at Policies & Guidelines (exploremyplan.com)

Policy #	Policy Title
MP-411	Peripheral Nerve Stimulation of the Head or Neck for Treatment of Pain
MP-517	Lumbar Spinal Fusion
MP-703	Leadless Cardiac Pacemakers
MP-749	Dry Hydrotherapy for Chronic Pain Conditions
MP-082	Electrical Bone Growth Stimulation of the Appendicular Skeleton
MP-331	Low Intensity Pulsed Ultrasound Fracture Healing Device
MP-750	Digital Health Technologies: Diagnostic Applications
MP-243	Anesthesia Services for Dental Procedures

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Distribution: bluecrossmn.com/providers/forms-and-publications

**Draft Provider-Administered Drug Policies**Draft provider-administered drug policies can be found at <u>Policies & Guidelines (exploremyplan.com)</u> and <u>Policies & Guidelines (exploremyplan.com)</u>

Policy #	Policy Title
PH-90114	Soliris® (eculizumab)
PH-90017	Stelara® (ustekinumab)
PH-90427	Ultomiris® (ravulizumab-cwvz)
PH-90406	Rituxan, Truxima, Ruxience, Riabni (rituximab)