

# PROVIDER BULLETIN

## PROVIDER INFORMATION



April 1, 2024

### 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. 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](https://mn-policies.exploremyplan.com/portal/web/mn-policies/feedback) online at <https://mn-policies.exploremyplan.com/portal/web/mn-policies/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 \(exploremyplan.com\)](https://mn-policies.exploremyplan.com)

Policy #	Policy Title
MP-070	Locoregional Therapies for Hepatocellular Carcinoma and Metastatic Liver Carcinoma and Metastatic Carcinoid Tumors of the Liver
MP-081	Allergy Immunotherapy
MP-483	Transcatheter Aortic-Valve Implantation for Aortic Stenosis
MP-513	Genetic Testing for Hereditary Breast and/or Ovarian Cancer
MP-527	Bio-Engineered Skin and Soft Tissue Substitutes
MP-597	Amniotic Membrane and Amniotic Fluid
MP-758	Multitarget Polymerase Chain Reaction Testing for Diagnosis of Bacterial Vaginosis

#### Draft Provider-Administered Drug Policies

Draft provider-administered drug policies can be found at [Policies & Guidelines \(exploremyplan.com\)](https://mn-policies.exploremyplan.com) and [Policies & Guidelines \(exploremyplan.com\)](https://mn-policies.exploremyplan.com)

<b>Policy #</b>	<b>Policy Title</b>
PH-90229	Cosentyx (secukinumab)
PH-90006	Aldurazyme (laronidase)
PH-90299	Brineura (cerliponase alfa)
PH-90034	Elaprase (idursulfase)
PH-90708	Elfabrio® (pegunigalsidase alfa-iwxj)
PH-90042	Fabrazyme® (agalsidase beta)
PH-90277	Kanuma® (sebelipase alfa)
PH-90079	Lumizyme® (alglucosidase alfa)
PH-90346	Mepsevii® (vestronidase alfa-bk)
PH-90084	Naglazyme® (galsulfase)
PH-90615	Nexviazyme®™ (avalglucosidase alfa-ngpt)
PH-90089	Nplate® (romiplostim)
PH-90731	Pombiliti™ (cipaglucosidase alfa-atga)
PH-90714	Rystiggo® (rozanolixizumab-noli)
PH-90677	Skysona® (elivaldogene autotemcel)
PH-90190	Vimizim (elosulfase alfa)
PH-90709	Vyjuvek™ (beremagene geperpavec-svdt)
PH-90649	Vyvgart® (efgartigimod alfa-fcab)
PH-90712	Vyvgart® Hytrulo (efgartigimod alfa-fcab and hyaluronidase-qvfc)
PH-90673	Xenpozyme® (olipudase alfa)