

PROVIDER BULLETIN

PROVIDER INFORMATION



August 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-161	Serologic Diagnosis of Celiac Disease
MP-221	Extracranial Carotid Angioplasty/Stenting
MP-301	Phototherapy for the Treatment of Skin Disorders
MP-501	Implantable Sinus Stents and Drug-Eluting Implants for Postoperative Use Following Endoscopic Sinus Surgery and for Recurrent Sinus Disease (New Title: Steroid-Eluting Sinus Stents and Implants)
MP-561	Transcatheter Mitral Valve Repair or Replacement
MP-607	Speech Generating Devices
MP-621	Surgical Treatment of Snoring and Obstructive Sleep Apnea
MP-685	Gender Affirming Procedures
MP-761	Urethral Drug-Coated Balloons for the Treatment of Urethral Strictures
MP-762	Upper Limb Prostheses

Draft Provider-Administered Drug Policies

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

Policy #	Policy Title
PH-90755	Beqvez™ (fidanacogene elaparvovec-dzkt)
PH-90694	Leqembi™ (lecanemab-irmb)
PH-90598	Abecma® (idecabtagene vicleucel)
PH-90026	Aflibercept: Eylea®, Eylea® HD; Opuviz™; Yesafili™
PH-90349	Hemophilia Products – Anti-Inhibitor Antibody: Hemlibra® (emicizumab-kxwh)
PH90337	Hemophilia Products – Anti-Inhibitor Coagulant Complex: Feiba
PH-90590	Breyanzi® (lisocabtagene maraleucel)
PH-90635	Dextenza® (dexamethasone insert)
PH-90114	Eculizumab: Soliris®; Bkembv™
PH-90339	Hemophilia Products – Factor IX: AlphaNine® SD, Alprolix®, BeneFIX®, Idelvion®, Ixinity®, Mononine®, Profilnine®, Rebinyn®, and Rixubis®
PH-90343	Hemophilia Products – Factor VIIa: NovoSeven RT®; Sevenfact®
PH-90340	Hemophilia Products – Factor VIII: Advate®, Adynovate®, Afstyla®, Eloctate®, Hemofil MTM, Koate®/Koate DVI, Kogenate FS®, Kovaltry®, Novoeight®, Nuwiq®, Obizur®, Recombinate®, Xyntha®/Xyntha® Solofuse®, Jivi®, Esperoct®, Altuviiiio™
PH-90345	Factor VIII/VWF Complex: Alphanate®, Humate-P®, Wilate®
PH-90341	Hemophilia Products – Factor X: Coagadex®
PH-90342	Hemophilia Products – Factor XIII: Corifact®
PH-90338	Hemophilia Products – Coagulation Factor XIII A-subunit: Tretten®
PH-90688	Hemgenix® (etranacogene dezaparvovec-drlb)
PH-90244	Mircera® (methoxy polyethylene glycol-epoetin beta)
PH-90734	Omvoh™ (mirikizumab-mrkz)
PH-90718	Roctavian™ (valoctocogene roxaparvovec-rvox)
PH-90117	Ustekinumab: Stelara®; Wezlana™; Selarsdi™
PH-90344	Hemophilia Products – von Willebrand Factor: Vonvendi®
PH-90633	Xipere® (triamcinolone acetate injectable suspension)