

PROVIDER BULLETIN

PROVIDER INFORMATION



September 3, 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-053	Bariatric Surgery
MP-058	Panniculectomy/Excision of Redundant Skin or Tissue
MP-118	Dermabrasion
MP-123	Compression Devices in the Outpatient or Home Setting
MP-191	Bone Mineral Density Testing
MP-221	Extracranial Carotid Angioplasty/Stenting
MP-301	Phototherapy for the Treatment of Skin Disorders
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

P55-24
Distribution: bluecrossmn.com/providers/forms-and-publications

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Policy #	Policy Title
MP-763	High Intensity Laser Therapy for Chronic Musculoskeletal Pain Conditions and Bell's Palsy

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-90670	Amvuttra (vutrisiran)
PH-90590	Breyanzi® (lisocabtagene maraleucel)
PH-90362	Crysvita® (burosumab-twza)
PH-90158	Krystexxa® (pegloticase)
PH-90735	Loqtorzi™ (toripalimab-tpzi)
PH-90379	Onpattro® (patisiran lipid complex)
PH-90305	Radicava® (edaravone)
PH-90671	Skyrizi® (risankizumab-rzaa)
PH-90712	Vyvgart Hytrulo® (efgartigimod alfa-fcab and hyaluronidase-gvfc)
PH-90343	Hemophilia Products - Factor VIIa: NovoSeven RT®; Sevenfact®