

Medicare Advantage plans

Medical policy and criteria

MEDICAL POLICY UPDATE

Premera Blue Cross Medicare Advantage reviews all medical policies and criteria annually. The Premera Medicare Advantage [Policies and Prior Authorization Resources page](#) has been updated. You can access this page from the Medicare Advantage provider website at premera.com/wa/provider/medicare-advantage/. Simply click on *View medical and pharmacy policy updates* located on the right side of the [Medicare Advantage provider landing page](#).

UPDATES TO AIM CLINICAL GUIDELINES EFFECTIVE MARCH 14, 2021.

AIM has updated some of their clinical guidelines, which will be effective March 14, 2021. The content of the new guidelines can be found on the AIM Clinical Guidelines and Pathways website: <https://aimspecialtyhealth.com/resources/clinical-guidelines/>

Below are the clinical guidelines with updates:

- [Radiology](#)
 - Chest Imaging
 - Head and Neck Imaging
 - Brain Imaging
 - Oncologic Imaging
- [Cardiology](#)
 - Cardiac Imaging- Echocardiography criteria changes only
- [Radiation Therapy](#)
 - Radiation Oncology
 - Proton Beam Therapy

UPDATES TO LOCAL RULES EFFECTIVE APRIL 1, 2021.

We've updated the local rules we use for our Medicare Advantage plans. The updated local rules will take effect April 1, 2021. You can find them by following the instructions listed above and clicking on *Premera Local Rules* at the top.

THE FOLLOWING CODES WILL BE REMOVED FROM THE PRIOR AUTHORIZATION LIST JANUARY 17, 2021.

After careful review, we've decided to remove the following codes from the prior authorization list due to low utilization, low denial rates, or other factors.

Intraoperative Neurophysiologic Monitoring	
92585	Auditory evoked potentials comprehensive
92586	Auditory evoked potentials limited
95829	Electrocorticogram surgery spx
95867	Needle electromyography cranial nrv muscle uni
95868	Needle electromyography cranial nrv muscle bi
95907	Nerve conduction studies 1-2 studies
95908	Nerve conduction studies 3-4 studies
95909	Nerve conduction studies 5-6 studies
95910	Nerve conduction studies 7-8 studies
95911	Nerve conduction studies 9-10 studies
95912	Nerve conduction studies 11-12 studies
95913	Nerve conduction studies 13> studies
95925	Short-latency somatosens ep std upr limbs
95926	Short-latency somatosens ep std lwr limbs
95927	Short-latency somatosens ep std trnk/head
95928	Ctr motor ep std transcrnl motor stimj upr limbs
95929	Ctr motor ep std transcrnl motor stimj lwr limbs
95930	Visual ep testing cns except glaucoma w/i&r
95938	Short-latency somatosens ep std upr & low limb
95939	Ctr motr ep std transcrnl motr stim upr&low li
95940	Ionm 1 on 1 in or w/attendance each 15 minutes
95941	Ionm remote/nearby>1 patient in or per hour
95955	Eeg nonintracranial surgery
G0453	Cont io neurophysiol mon outsd or-pt ea 15 min

Durable Medical Equipment Prosthetics, Orthotics, and Supplies (DMEPOS)	
E1390	O2 conc 1 del port 85%>O2 conc at prsc flw rate
E0470	Resp asst devc bi-level prss capability w/o backu
E0471	Resp asst devc bi-level prss capability w/back-up
E0601	Continuous positive airway pressure device
S1040	Cranial remolding orthotic ped rigid custom fab

Cataract Surgery	
66984	Xcapsl ctrc rmvl insj io lens prosth w/o ecp

Discography	
62290	Injection procedure for discography, each level; lumbar
62291	Injection procedure for discography, each level; cervical or thoracic
72285	Diskography Cervical Rad S&l
72295	Diskography Lumbar Rad S&l

Other Codes	
15003	Prep site trunk/arm/leg addl 100 sq cm/1pct
15005	Prep site f/s/n/h/f/g/m/d gt addl 100 sq cm/1pct
15274	App skn sub grft t/a/l area/100scm adl 100scm
15276	Sub grft f/s/n/h/f/g/m/d <100scm ea addl 25 scm
15278	Sub grft f/s/n/h/f/g/m/d >= 100scm adl 100scm
20930	Allograft for spine surgery only morselized
20937	Autograft spine surgery morselized sep incision
22552	Arthrd ant interdy cervcl belw c2 ea addl ntrspc
22614	Arthrodesis posterior/posterolateral ea addl
22859	Insj biomchn dev ntrvrt disc space w/o arthrd
36217	Slctv cathj 3rd+ ord slctv thrc/brch/cphlc brnch
36218	Slctv cathj ea 2nd+ ord thrc/brch/cphlc brnch
36470	Injection sclerosant single incmptnt vein
36471	Injection sclerosant multiple incmptnt veins
61517	Impltj brain intracavitary chemotherapy agent
63180	Lam&sctj dentate lig w/wo dural grf crv 1/2 seg
63182	Lam&sctj dentate lig w/wo dural grf crv >2 seg
83020	Hemoglobin fractj/quantj electrophoresis
83021	Hemoglobin fractj/quantj chromatography
96105	Assessment aphasia w/interp & report per hour
0439T	Myocardial perfusion echo ischm/viability assmt
0443T	R-t spctrl alys prst8 tiss fluorescenc spctrscopy
C1767	Generator neurostimulator nonrechargeable
C1778	Lead neurostimulator
C1816	Receiver and/or transmitter neurostimulator
C1883	Adaptor/ext pacing lead/neurostimulator lead
C2614	Probe percutaneous lumbar discectomy
C2616	Brachytherapy nonstranded yttrium-90 per source
C2698	Brachytherapy source stranded nos per source
C2699	Brachytherapy source nonstranded nos per source
G0248	Demo home inr mon pt w/mech ht valve caf/vte
G0249	Prvs test matl & equip home inr mon; once a week
G0250	Phys rev intepr & pt mgmt home inr mon; 1 a week
M0300	IV chelation therapy
S0317	Disease management program; per diem

Notice of Nondiscrimination

Premera Blue Cross (Premera) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. Premera does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, gender identity, or sexual orientation.

Premera:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that Premera has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation, you can file a grievance with:

Civil Rights Coordinator – Complaints and Appeals
Premera Blue Cross Medicare Advantage Plans
PO Box 21481, Eagan, MN 55121
Phone: 888-850-8526, Fax: 800-889-1076, TTY: 711
Email: AppealsDepartmentInquiries@Premera.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Ave SW, Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Premera Blue Cross is an HMO plan with a Medicare contract.
Enrollment in Premera Blue Cross depends on contract renewal.

Multi-Language Insert

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-888-850-8526 (TTY/TDD: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-888-850-8526 (TTY/TDD: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-888-850-8526 (TTY/TDD: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-888-850-8526 (TTY/TDD: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-888-850-8526 (TTY/TDD: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-888-850-8526 (TTY/TDD: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-888-850-8526 (TTY/TDD: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-888-850-8526 (TTY/TDD: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-888-850-8526 (TTY/TDD: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-888-850-8526 (TTY/TDD: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على (1-888-850-8526 (TTY/TDD: 711)). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-888-850-8526 (TTY/TDD: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-888-850-8526 (TTY/TDD: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-888-850-8526 (TTY/TDD: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-888-850-8526 (TTY/TDD: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-888-850-8526 (TTY/TDD: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-888-850-8526 (TTY/TDD: 711) にお電話ください。日本語を話す人 者が支援いたします。これは無料のサービスです。