

## BENEFIT COVERAGE GUIDELINE – 10.01.520

# Review for Coverage in the Absence of a Medical Policy, Pharmacy Policy, or Utilization Management Guideline

Effective Date: Aug. 1, 2024

Last Revised: July 8, 2024

Replaces: N/A

### RELATED MEDICAL POLICIES/GUIDELINES:

2.04.520 Laboratory Testing Investigational Services

10.01.504 Technology Review

10.01.511 Medical Policy and Clinical Guidelines: Definitions and Procedures

10.01.517 Non-covered Services and Procedures

10.01.518 Clinical Trials

10.01.533 Non-covered Experimental/Investigational Services

Select a hyperlink below to be directed to that section.

[COVERAGE GUIDELINES](#) | [DOCUMENTATION REQUIREMENTS](#)

[RELATED INFORMATION](#) | [ADMINISTRATIVE REVIEW](#) | [REFERENCES](#) | [HISTORY](#)



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## Introduction

When a procedure or service is requested for a member and there is no medical policy, pharmacy policy, or coverage guideline that applies, the Plan will use other sources to decide if it will be covered. These other sources include professional guidelines and online medical research sites. When a service is billed with a code that is not specific to that service, the Plan needs to know what was done in order for the claim to be reimbursed. This guideline explains how decisions are made for services when there is not a Plan medical policy, pharmacy policy, or coverage guideline.

**Note:** The Introduction section is for your general knowledge and is not to be taken as policy coverage criteria. The rest of the policy uses specific words and concepts familiar to medical professionals. It is intended for providers. A provider can be a person, such as a doctor, nurse, psychologist, or dentist. A provider also can be a place where medical care is given, like a hospital, clinic, or lab. This policy informs them about when a service may be covered.

## Coverage Guidelines

| Topic   | Coverage Guidelines   |
|---|---|
| <b>Review for coverage process</b>                    | <p>When no Medical Policy, Pharmacy Policy or Utilization Management Guideline exists for a service, the clinical reviewer will use recognized authoritative resources and specialty society guidelines when applicable to inform decision making (see <a href="#">Chart</a> below).</p> <p>When a Medical Policy, Pharmacy Policy or Utilization Management Guideline is available, it will be used for clinical decision making and this Benefit Coverage Guideline will not be used.</p> <p>When a specific code exists for the service submitted for benefit coverage determination the associated code must be used.</p> <p>Benefit determinations for services received with an unlisted, unspecified or miscellaneous code will be reviewed based on the description of the service and supported in the submitted medical records or other documentation (see <a href="#">Documentation Requirement</a>). State or Federal mandates may also dictate coverage decisions. Benefit determinations in all cases will be consistent with State and Federal guidelines, to meet relevant timeframes and notification requirements for urgent and non-urgent requests.</p> <p>For all other services, when determining if there is an applicable Medical Policy, Pharmacy Policy or Utilization Management Guideline, the reviewer will consider more than the procedure code alone. In the case of an unlisted code, the detailed description of the service will be the determining factor.</p> |
| <b>Resources used for review for coverage process</b> | <p>Resources for review may include but are not limited to the following:</p> <ul style="list-style-type: none"> <li>• Agency for Healthcare Research and Quality (AHRQ)</li> <li>• Centers for Disease Control and Prevention (CDC)</li> </ul>   |



| Topic | Coverage Guidelines  |
|-------|--|
|       | <ul style="list-style-type: none"> <li>• Clinical Practice Guidelines published by consortiums of medical organizations and generally accepted as industry standard</li> <li>• Evidence based clinical guidelines published in peer reviewed medical journals and publications</li> <li>• Hayes Inc., a commercial external review organization</li> <li>• Institute for Clinical and Economic Review (ICER)</li> <li>• National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology</li> <li>• National Comprehensive Cancer Network (NCCN) Drugs and Biologics Compendium</li> <li>• National panels and consortiums such as National Institutes of Health (NIH)</li> <li>• Other commercial external review organizations</li> <li>• Prescribing information (package insert/FDA-approved drug label)</li> <li>• Specialty and sub-specialty society guidelines, where appropriate, some of which are listed in the reference section</li> </ul> |

## Documentation Requirements

**Non-specific codes do not describe in detail what was performed or rendered as part of the procedure or service. Therefore, if a non-specific code (i.e., unlisted or miscellaneous code, etc.) is billed, the Plan requires supporting detailed documentation to be submitted in conjunction with the claim submission, to describe the service(s) rendered; identifying what was performed as part of the service.**

**Critical supportive clinical information should include, but is not limited to, the following:**

- A clear description and detailed narrative of the service performed
- Whether the procedure was performed independent from other services performed at the same time or performed at the same surgical site or through the same surgical opening
- Any extenuating circumstances that may have complicated the service or procedure
- Time, effort, and essential equipment used to provide the service (e.g., an estimation of the Relative Value Units [RVUs] for the procedure)
- Number of times the service was provided



## Documentation Requirements

The required documentation information may be contained in operative or procedure reports, imaging reports, laboratory or pathology reports, office notes or a specific narrative on the claim, depending on the procedure category for the non-specific unlisted or miscellaneous code(s).

Failure to provide supporting documentation that describes the specifics of the unlisted or miscellaneous code will result in the service being denied reimbursement. However, the provider of the service may resubmit the request with the necessary medical records to start a new review.

**Note:** The use of medical policies is always secondary to member contract provisions, restrictions, and exclusions. The member contract always supersedes clinical review criteria the Company adopts

## Related Information

### Definition of Terms

#### Medically Necessary:

Those covered services and supplies that a physician, exercising prudent clinical judgment, would provide to a patient for the purpose of preventing, evaluating, diagnosing, or treating an illness, injury, disease or its symptoms, and that are:

1. In accordance with generally accepted standards of medical practice; and
2. Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for the patient's illness, injury or disease; and
3. Not primarily for the convenience of the patient, physician, or other health care provider; and
4. Not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of that patient's illness, injury, or disease.

For these purposes, "generally accepted standards of medical practice" means standards that are based on reliable scientific evidence published in peer-reviewed medical literature generally



recognized by the relevant medical community, physician specialty society recommendations, and the views of physicians practicing in relevant clinical areas and any other relevant factors.

### **Experimental/Investigational Services:**

Experimental or investigational services include a treatment, procedure, equipment, drug, drug usage, medical device, or supply that meets one or more of the following criteria:

- A drug or device that cannot be lawfully marketed without the approval of the US Food and Drug Administration and has not been granted such approval on the date the service is provided.
- The service is subject to oversight by an Institutional Review Board.
- No reliable evidence demonstrates that the service is effective in clinical diagnosis, evaluation, management, or treatment of the condition.
- The service is the subject of ongoing clinical trials to determine its maximum tolerated dose, toxicity, safety, or efficacy.
- Evaluation of reliable evidence indicates that additional research is necessary before the service can be classified as equally or more effective than conventional therapies.

Reliable evidence includes but is not limited to reports and articles published in authoritative peer-reviewed medical and scientific literature and assessments and coverage recommendations published by the Blue Cross and Blue Shield Center for Clinical Effectiveness.

### **Cosmetic Services:**

Plans do not cover drugs, services, or supplies for cosmetic services. This includes services performed to reshape normal structures of the body in order to improve or alter an individual's appearance and not primarily to restore an impaired function of the body.

## **Administrative Review**

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The Plan reviews services to members that are provided or proposed with the purpose of determining benefits based on whether these services are medically necessary, not medically necessary, investigational, or not covered based on the member's contract.

In making benefit decisions the Plan determines whether such services are in accordance with generally accepted standards of medical practice. The Plan takes into account credible scientific evidence published in peer-reviewed medical literature generally recognized by the relevant medical community, physician specialty society recommendations, and the views of physicians practicing in relevant clinical areas, and other associated factors as they apply to the member's clinical circumstances.

This document provides a list of resources available to Plan Medical Reviewers to use when the Plan does not have a Medical Policy, Pharmacy Policy or Utilization Management Guideline that addresses the specific service or product for which benefits are requested.

The list of references included in this policy is not meant to be exhaustive. The clinical reviewer will use the references(s) that may be applicable to the specific procedure or service under review. Reviewers may use more than one reference when relevant to their decision. Reviewers will use professional judgment in selecting appropriate references and in interpreting evidence-based medicine for their determination of benefits.

**Table 1. Provider Specialty Societies**

| <b>Subspecialty</b>                | <b>Specialty Society Guidelines – Some are not Publicly Available</b>   |
|------------------------------------|---|
| Allergy and Immunology             | American Academy of Asthma, Allergy, and Immunology (AAAAI) <a href="http://www.aaaai.org">http://www.aaaai.org</a> |
| Anesthesiology                     | American Society of Anesthesiologists (ASA) <a href="http://www.asahq.org">http://www.asahq.org</a>                 |
| Cardiology                         | American College of Cardiology <a href="http://www.acc.org">http://www.acc.org</a>                                  |
| Chiropractic                       | American Chiropractic Association <a href="http://www.acatoday.org/">http://www.acatoday.org/</a>                   |
| Clinical Cardiac Electrophysiology | Heart Rhythm Society <a href="http://www.HRSONline.org">http://www.HRSONline.org</a>                                |
| Colon and Rectal Surgery           | American Society of Colon & Rectal Surgeons (ASCRS) <a href="http://www.fascrs.org">http://www.fascrs.org</a>       |
| Critical Care Medicine             | Society of Critical Care Medicine <a href="http://www.sccm.org/Home">http://www.sccm.org/Home</a>                   |
| Dermatology                        | American Academy of Dermatology (AAD) Association <a href="http://www.aad.org">http://www.aad.org</a>               |
| Emergency Medicine                 | American College of Emergency Physicians (ACEP) <a href="http://www.acep.org">http://www.acep.org</a>               |



| Subspecialty                           | Specialty Society Guidelines – Some are not Publicly Available  |
|--|---|
| Endocrinology, Diabetes and Metabolism | American Association of Clinical Endocrinologists <a href="http://www.aace.com">http://www.aace.com</a><br>Endocrine Society <a href="https://www.endocrine.org/">https://www.endocrine.org/</a>  |
| Family Medicine                        | American Academy of Family Physicians (AAFP) <a href="http://www.aafp.org">http://www.aafp.org</a>  |
| Gastroenterology                       | American Gastroenterological Association <a href="http://www.gastro.org">http://www.gastro.org</a><br>American College of Gastroenterology <a href="https://www.gi.org">https://www.gi.org</a><br>American Society for Gastrointestinal Endoscopy <a href="https://www.asge.org/">https://www.asge.org/</a> |
| Genetics–Medical                       | American College of Medical Genetics and Genomics (ACMG) <a href="http://www.acmg.net">http://www.acmg.net</a>  |
| Geriatric Medicine                     | American Geriatrics Society <a href="http://www.americangeriatrics.org">http://www.americangeriatrics.org</a>   |
| Gynecologic Oncology                   | The Society of Gynecologic Oncology <a href="http://www.sgo.org">http://www.sgo.org</a>   |
| Gynecology                             | The American College of Obstetricians and Gynecologists (ACOG) <a href="http://www.acog.org">http://www.acog.org</a>  |
| Hematology                             | American Society of Hematology <a href="http://www.hematology.org">http://www.hematology.org</a>  |
| Hospice and Palliative Medicine        | American Academy of Hospice and Palliative Medicine <a href="http://www.aahpm.org">http://www.aahpm.org</a>   |
| Infectious Disease                     | Infectious Diseases Society of America <a href="http://www.idsociety.org">http://www.idsociety.org</a>  |
| Internal Medicine                      | American College of Physicians (ACP) <a href="http://www.acponline.org">http://www.acponline.org</a>  |
| Medical Toxicology                     | American College of Medical Toxicology <a href="http://www.acmt.net">http://www.acmt.net</a>  |
| Nephrology                             | American Society of Nephrology <a href="http://www.asn-online.org">http://www.asn-online.org</a>  |
| Neurological Surgery                   | American Association of Neurological Surgeons (AANS) <a href="http://www.aans.org">http://www.aans.org</a>  |
| Neurology                              | American Academy of Neurology (AAN) <a href="http://www.aan.com">http://www.aan.com</a>   |
| Neurology-Child                        | Child Neurology Society (CNS) <a href="http://www.childneurologysociety.org">http://www.childneurologysociety.org</a>   |
| Neuroradiology                         | American Society of Neuroradiology (ASNR) <a href="http://www.asnr.org">http://www.asnr.org</a>   |
| Nuclear Medicine                       | American College of Nuclear Medicine (ACNM) <a href="http://www.acnmonline.org/">http://www.acnmonline.org/</a>   |
| Occupational Therapy                   | American Occupational Therapy Association <a href="http://www.aota.org/">http://www.aota.org/</a>   |
| Oncology                               | American Society of Clinical Oncology (ASCO) <a href="http://www.asco.org">http://www.asco.org</a>  |
| Ophthalmology                          | American Academy of Ophthalmology (AAO) <a href="http://www.aao.org">http://www.aao.org</a>   |
| Ophthalmology-pediatric                | American Association for Pediatric Ophthalmology and Strabismus <a href="http://www.aapos.org/">http://www.aapos.org/</a>   |



| Subspecialty                         | Specialty Society Guidelines – Some are not Publicly Available   |
|--------------------------------------|--|
| Optometry                            | American Optometric Association (AOA) <a href="http://www.aoa.org/?sso=y">http://www.aoa.org/?sso=y</a><br>National Optometric Association<br><a href="http://nationaloptometricassociation.com">http://nationaloptometricassociation.com</a>  |
| Orthopaedic Surgery                  | American Academy of Orthopaedic Surgeons (AAOS) <a href="http://www.aaos.org">http://www.aaos.org</a><br>National Association of Spine Specialists (NASS) <a href="https://www.spine.org/">https://www.spine.org/</a>  |
| Otolaryngology                       | American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS)<br><a href="http://www.entnet.org">http://www.entnet.org</a>  |
| Pathology                            | College of American Pathologists (CAP) <a href="http://www.cap.org">http://www.cap.org</a><br>American Society for Clinical Pathology (ASCP) <a href="http://www.ascp.org">http://www.ascp.org</a>   |
| Pediatrics                           | American Academy of Pediatrics (AAP) <a href="http://www.aap.org">http://www.aap.org</a>   |
| Physical Medicine and Rehabilitation | American Academy of Physical Medicine and Rehabilitation (AAPM&R)<br><a href="http://www.aapmr.org">http://www.aapmr.org</a>   |
| Physical Therapy                     | American Physical Therapy Association <a href="http://www.apta.org/">http://www.apta.org/</a>  |
| Plastic Surgery                      | American Society of Plastic Surgeons (ASPS) <a href="http://www.plasticsurgery.org">http://www.plasticsurgery.org</a>  |
| Preventive Medicine                  | American College of Preventive Medicine (AAPM) <a href="http://www.acpm.org">http://www.acpm.org</a><br>American College of Occupational and Environmental Medicine (ACOEM)<br><a href="https://www.acoem.org">https://www.acoem.org</a>   |
| Psychiatry                           | American Psychiatric Association (APA) <a href="http://www.psych.org">http://www.psych.org</a>   |
| Psychiatry–Child and Adolescent      | American Academy of Child & Adolescent Psychiatry <a href="http://www.aacap.org">http://www.aacap.org</a>  |
| Pulmonary Disease                    | American College of Chest Physicians <a href="http://www.chestnet.org">http://www.chestnet.org</a>   |
| Radiology                            | American College of Radiology (ACR) <a href="http://www.acr.org">http://www.acr.org</a><br>American Society for Radiation Oncology (ASTRO) <a href="http://www.astro.org">http://www.astro.org</a>   |
| Rheumatology                         | American College of Rheumatology <a href="http://www.rheumatology.org">http://www.rheumatology.org</a>   |
| Sleep Medicine                       | American Academy of Sleep Medicine (AASM) <a href="http://www.aasmnet.org">http://www.aasmnet.org</a>  |
| Speech Therapy                       | American Speech-Language-Hearing Association (ASHA)<br><a href="http://www.asha.org/default.htm">http://www.asha.org/default.htm</a>   |
| Surgery and Vascular Surgery         | American College of Surgeons (ACS) <a href="http://www.facs.org">http://www.facs.org</a><br>Society for Vascular Surgery (SVS) <a href="https://vascular.org/">https://vascular.org/</a><br>Vascular & Endovascular Surgery Society (VESS) <a href="https://vesurgery.org/">https://vesurgery.org/</a> |
| Surgery of the Hand                  | American Association for Hand Surgery<br><a href="http://www.handsurgery.org/about/">http://www.handsurgery.org/about/</a>   |
| Thoracic Surgery                     | The Society of Thoracic Surgeons (STS) <a href="http://www.sts.org/">http://www.sts.org/</a>   |



| Subspecialty   | Specialty Society Guidelines – Some are not Publicly Available   |
|----------------|--|
| Urology        | American Urological Association (AUA) <a href="http://www.auanet.org">http://www.auanet.org</a>              |
| Urogynecologic | The American Urogynecologic Society (AUGS) <a href="http://www.augs.org/about">http://www.augs.org/about</a> |
| Vascular       | Society for Vascular Medicine <a href="http://www.vascularmed.org/">http://www.vascularmed.org/</a>          |

## References

1. Agency for Healthcare Research and Quality (AHRQ) – Clinical Information. Available at: <https://www.ahrq.gov/prevention/guidelines/index.html> Accessed June 17, 2024.
2. American Hospital Formulary Service (AHFS) Clinical Drug Information. Available at: <http://www.ahfsdruginformation.com>. Accessed June 17, 2024.
3. American Medical Association. CPT Process - How a Code Becomes a Code. Available at: <https://www.ama-assn.org/practice-management/cpt> Accessed June 17, 2024.
4. Blue Cross Blue Shield Association's Evidence Positioning System. <https://www.bcbsaoca.com/eps/>. Accessed June 17, 2024.
5. Centers for Disease Control and Prevention (CDC). Available at: <http://www.cdc.gov>. Accessed June 17, 2024.
6. Centers for Medicare & Medicaid Services (CMS). Available at: <https://www.cms.gov/medicare-coverage-database/search.aspx> . Accessed June 17, 2024.
7. Choosing Wisely Lists an initiative of the American Board of Internal Medicine. Choosing wisely website. <http://www.choosingwisely.org/doctor-patient-lists/>. Accessed June 17, 2024.
8. IBM Micromedex Web Applications Access. IBM Watson Health, Cambridge, MA. Available at: URL: <http://www.micromedexsolutions.com>. Accessed June 17, 2024.
9. Hayes, Inc. a symplr company, Health technology research and consulting services. Lansdale, PA: Hayes, Inc. <https://www..hayesinc.com> . Accessed June 17, 2024.
10. Institute for Clinical and Economic Review (ICER). Available at: <https://icer.org/> Accessed June 17, 2024.
11. National Comprehensive Cancer Network®. NCCN Drugs & Biologic Compendium™. Available at: <http://www.nccn.org>. Accessed June 17, 2024.
12. National Library of Medicine – PubMed. Available at: <https://pubmed.ncbi.nlm.nih.gov/> . Accessed June 17, 2024.
13. National Institutes of Health (NIH). Available at <https://www.nih.gov/>. Accessed June 17, 2024.
14. US Food and Drug Administration (FDA). Available at: <http://www.fda.gov>. Accessed June 17, 2024.
15. Provider specialty societies that may include those listed in the table in the **Administrative Review** section. Accessed June 17, 2024.

## History



| Date     | Comments   |
|----------|--|
| 01/12/16 | New Benefit Coverage Guideline, add to Administrative section. In the absence of a medical policy or utilization management guideline, licensed medical professionals review service requests submitted with an unlisted code. This policy explains the resources used to review these submissions for benefit coverage for procedures and services. |
| 02/01/17 | Annual Review, approved January 10, 2017. No change to benefit coverage guideline. Policy moved to new format.   |
| 06/01/17 | Interim Review, approved May 23, 2017. Policy updated with the addition of FDA-approved drug packet insert and a resource used for review; clarified this applies to Pharmacy by adding, "... in the absence of a Pharmacy policy" throughout the document.  |
| 06/01/18 | Annual Review, approved May 3, 2018. Policy reviewed. No change to UM guideline statements.  |
| 03/01/19 | Annual Review, approved February 25, 2019. References 3 and 4 updated. Guideline statements unchanged.   |
| 02/01/20 | Annual Review, approved January 23, 2020. Benefit coverage guideline reviewed. Provider specialty societies references updated. Minor edits made for greater clarity. Guideline intent unchanged.  |
| 06/01/21 | Interim Review, approved May 4, 2021. Added definition of terms: medically necessary, experimental/investigational, and cosmetic for clarity.  |
| 01/01/22 | Annual Review, approved December 2, 2021. Benefit coverage guideline reviewed. Guideline statements remain unchanged.  |
| 04/01/22 | Annual Review, approved March 7, 2022. Benefit coverage guideline reviewed. References updated. Guideline statements unchanged.  |
| 04/01/23 | Annual Review, approved March 6, 2023. Benefit coverage guideline reviewed. References added and updated. ECRI removed from resource list, otherwise guideline statements unchanged.   |
| 08/01/24 | Annual Review, approved July 8, 2024. Benefit coverage guideline reviewed. References added and updated, otherwise guideline statements unchanged.   |

**Disclaimer:** This medical policy is a guide in evaluating the medical necessity of a particular service or treatment. The Company adopts policies after careful review of published peer-reviewed scientific literature, national guidelines and local standards of practice. Since medical technology is constantly changing, the Company reserves the right to review and update policies as appropriate. Member contracts differ in their benefits. Always consult the member benefit booklet or contact a member service representative to determine coverage for a specific medical service or supply. CPT codes, descriptions and materials are copyrighted by the American Medical Association (AMA). ©2024 Premera All Rights Reserved.



**Scope:** Medical policies are systematically developed guidelines that serve as a resource for Company staff when determining coverage for specific medical procedures, drugs or devices. Coverage for medical services is subject to the limits and conditions of the member benefit plan. Members and their providers should consult the member benefit booklet or contact a customer service representative to determine whether there are any benefit limitations applicable to this service or supply. This medical policy does not apply to Medicare Advantage.

