

Medical Policy and Coding Updates

June 1, 2023

Special notices

Effective September 1, 2023

Intraarticular Corticosteroids, 5.01.633

New policy

Drug added

- Zilretta® (triamcinolone acetonide extended-release injectable suspension) Intra-articular
 - Added as medically necessary for moderate to severe osteoarthritis pain of the knee in adults and may be approved once per knee per lifetime
 - Considered investigational for all other indications

Open and Thoracoscopic Approaches to Treat Atrial Fibrillation and Atrial Flutter (Maze and Related Procedures), 7.01.14

New policy

Maze or modified maze procedure

Medical necessity criteria added

- For the treatment of atrial fibrillation or flutter when performed on a non-beating heart during cardiopulmonary bypass

Stand-alone minimally invasive, off-pump maze procedures

Investigational criteria added

- For the treatment of atrial fibrillation or flutter, including when done via mini-thoracotomy

Hybrid ablation

Investigational criteria added

- For the treatment of atrial fibrillation or flutter

Effective August 4, 2023

Miscellaneous Oncology Drugs, 5.01.540

Miscellaneous Intramuscular/Intravenous/Subcutaneous Agents

Drug added

- Xgeva® (denosumab)
 - For the prevention of skeletal-related events in individuals with bone metastases from solid tumors
 - For the prevention of skeletal-related events in individuals with multiple myeloma

Effective July 6, 2023

Pharmacologic Treatment of Clostridium Difficile, 5.01.631

New policy

Drugs added

- Rebyota™ (fecal microbiota, live-jslm)
- Zinplava™ (bezlotoxumab)
 - Treatment of Clostridioides difficile infection in people aged 18 years and older

Medical policies

New medical policies Effective June 1, 2023

Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses, 1.01.506

Policy renumbered

This policy replaces Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses, 1.01.11

Continuous Passive Motion in the Home Setting, 1.01.540

Policy renumbered

This policy replaces Continuous Passive Motion in the Home Setting, 1.01.10

Cooling Devices Used in the Outpatient Setting, 1.01.538

Policy renumbered

This policy replaces Cooling Devices Used in the Outpatient Setting, 1.01.26

Revised medical policies Effective June 1, 2023

No updates this month

Pharmacy policies

New pharmacy policies Effective May 1, 2023

Adstiladrin® (nadofaragene firadenovec-vncg), 5.01.632

New policy

Drug added

Adstiladrin® (nadofaragene firadenovec-vncg) Intravesical

- Added medical necessity criteria for treatment of non-muscle invasive bladder cancer (NMIBC) with carcinoma in situ (CIS)

Gene Therapies for Cerebral Adrenoleukodystrophy, 5.01.634

New policy

Drug added

Skysona® (elivaldogene autotemcel) IV

- Added medical necessity criteria for treatment of adrenoleukodystrophy
- Use is limited to a one-time infusion

Revised pharmacy policies Effective June 1, 2023

Amyotrophic Lateral Sclerosis (ALS) Medications, 5.01.578

Drug added

Qalsody™ (tofersen) Intrathecal

- Added medical necessity criteria for treatment of amyotrophic lateral sclerosis (ALS)
- Considered investigational for all indications

Antibody-Drug Conjugates, 5.01.582

Drug added

Padcev® (enfortumab vedotin-ejfv) IV

- Added medical necessity criteria for treatment of locally advanced or metastatic urothelial cancer (mUC) in adults
- Considered investigational for all other indications

BRAF and MEK Inhibitors, 5.01.589

Combination therapy for other indications

Medical necessity criteria updated

Indication added for treatment of low-grade glioma (LGG) with BRAF V600E mutations in individuals aged 1 year and older

- Tafinlar® (dabrafenib) in combination with Mekinist® (trametinib)

Immune Checkpoint Inhibitors, 5.01.591

PD-1 inhibitors

Drug added

Zynyz™ (retifanlimab-dlwr)

- Added medical necessity criteria for treatment of metastatic or recurrent, locally advanced Merkel cell carcinoma (MCC) who have not received a prior systemic therapy

Medical necessity criteria updated

Added indications for treatment of stage IB, II or IIIA non-small cell lung cancer (NSCLC) or locally advanced or metastatic urothelial carcinoma (la/mUC)

- Keytruda® (pembrolizumab)

Medical necessity criteria updated

Treatment of unresectable or metastatic alveolar soft part sarcoma (ASPS) in individuals aged 2 years and older

- Tecentriq® (atezolizumab)

Herceptin® (trastuzumab) and Other HER2 Inhibitors, 5.01.514

Oral drugs

Medical necessity criteria updated

Added indication for the treatment of RAS wild-type, HER2-positive, unresectable or metastatic colorectal cancer in adults

- Tukysa® (tucatinib)

Hetlioz® (tasimelteon), 5.01.552

MT1 and MT2 antagonist

Drug added

Generic tasimelteon capsules

- Added medical necessity criteria for the treatment of non-24-hour sleep-wake disorder in individuals aged 18 years and older
- Quantity limit is 20 mg per day
- Considered investigational for all other indications

Medical necessity criteria updated

Added criterion requiring documented trial and failure or intolerance to generic tasimelteon

- Hetlioz® (tasimelteon) capsules

Migraine and Cluster Headaches, 5.01.503

Brand name triptans

Drug added

RizaFilm® (rizatriptan; oral film)

- Considered medically necessary for treatment of acute migraine and cluster headaches

- Quantity may not exceed 8 sprays per 30 days

Quantity limit added

Added 18 oral films per 30 days

CGRP inhibitors

Drug added

Zavzpret™ (zavegepant)

- Considered medically necessary for the treatment of migraine with or without aura in individuals aged 18 years and older
- Use is not concurrent with Nurtec® ODT (rimegepant) or Ubrelvy® (ubrogepant)

Medical necessary criteria updated

Added Zavzpret™ (zavegepant) to the list of agents for which concomitant use is not allowed

- Nurtec® ODT (rimegepant)
- Ubrelvy® (ubrogepant)

Monoclonal Antibodies for the Treatment of Lymphoma, 2.03.502

Polivy™ (polatuzumab vedotin-piiq)

Medical necessity criteria updated

Added indication for use in combination with a rituximab product, cyclophosphamide, doxorubicin, and prednisone (R-CHP)

- Polivy™ (polatuzumab vedotin-piiq)

Pharmacotherapy of Arthropathies, 5.01.550

First-line IL-6 inhibitors

Drug added

Kevzara® (sarilumab) SC

- Added medical necessity criteria for treatment of polymyalgia rheumatic in adults

Second-line Janus Kinase inhibitors

Note added

Use for treatment of alopecia is considered cosmetic

- Olumiant® (baricitinib) oral

Pharmacotherapy of Multiple Sclerosis, 5.01.565

Relapsing multiple sclerosis (RMS)

Drug added

Generic teriflunomide oral

- Added medical necessity criteria for treatment of RMS

Medical necessity criteria updated

Added criterion requiring documented trial and failure or intolerance to generic teriflunomide

- Aubagio® (teriflunomide) oral

Vascular Endothelial Growth Factor (VEGF) Receptor Inhibitors for Ocular Disorders, 5.01.620

Medical necessity criteria updated

Added indication for treatment of retinopathy prematurity (ROP)

- Eylea® (aflibercept)

Archived policies

Effective June 1, 2023

No updates this month

Deleted policies

Effective June 1, 2023

Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses, 1.01.11

Content from this policy has been moved to Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses, 1.01.506

Continuous Passive Motion in the Home Setting, 1.01.10

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Coding updates

Added codes

Effective June 1, 2023

Intravenous Iron Replacement Products, 5.01.6303

Now requires review for medical necessity and prior authorization

J1437, J1439, Q0138, Q0139

Revised codes

Effective June 1, 2023

No updates this month

Removed codes Effective June 1, 2023

No updates this month