



BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan of South Carolina

August 2021 Medical Policy Updates

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan frequently revise the medical policies we use to make clinical determinations for a member’s coverage. Here are medical policies that have been updated or newly added. A revision history for each policy is included. Please visit the Medical Policies and Clinical Guidelines pages of www.SouthCarolinaBlues.com and www.BlueChoiceSC.com regularly to stay informed of these changes and to read any policy in its entirety.

Policy Number	Policy Name	Recent Changes
CAM 50138	Aducanumab for Alzheimer Disease	New policy
CAM 274	Cluneal Nerve Block for Treatment of Low Back Pain	New policy
CAM 017	Contraceptive Management	Annual review, no change to policy intent.
CAM 045	Suit Therapy	Annual review, no change to policy intent.
CAM 137	Paravertebral Facet Joint Injections/Blocks	Annual review, no change to policy intent.
CAM 201	Extended-Release Injectable (Sublocade)	Annual review, no change to policy intent.
CAM 20157	Electrostimulation and Electromagnetic Therapy for the Treatment of Chronic Wounds	Annual review, no change to policy intent.
CAM 223	Tagraxofusp-erzs (Elzonris)	Annual review, no change to policy intent.
CAM 225	Sufentanil Sublingual Tablet (Dsuvia)	Annual review, no change to policy intent.
CAM 226	BioZorb®	Annual review, no change to policy intent.
CAM 50126	Buprenorphine Implant for Treatment of Opioid Dependence	Annual review, no change to policy intent.
CAM 70171	Lung Volume Reduction Surgery for Severe Emphysema	Annual review, no change to policy intent.
CAM 151	Quantose Impaired Glucose Tolerance (IGT) Test	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 181	Pathogen Panel Testing	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 200	Folate Testing	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 206	Urine Culture Testing for Bacteria	Annual review, no change to policy intent. Updating policy verbiage to remove urinalysis testing for clarity. Updating coding, description, rationale and references.
CAM 247	Redblood Cell Molecular Testing	Annual review, no change to policy intent. Updating rationale and references.
CAM 287	Genetic Testing for Alzheimer's Disease	Annual review, no change to policy intent. Updating rationale and references.

CAM 288	Testing for Targeted Therapy of Non-Small-Cell Lung Cancer	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 292	Genetic Testing for Neurofibromatosis and Related Disorders	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 293	Pancreatic Cancer Risk Testing Using Molecular Classifier in Pancreatic Cyst Fluid	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 70121	Reduction Mammoplasty for Breast-Related Symptoms	Interim review to update link to BMI, IBW, BSA calculator. No other changes made.
CAM 80113	Accelerated Breast Irradiation and Brachytherapy Boost After Breast-Conserving Surgery for Early-Stage Breast Cancer	Annual review, no change to policy intent. Updating background, guidelines, rationale and references.
CAM 10127	Electrical and Electromagnetic Stimulation for the Treatment of Arthritis	Annual review, no change to policy intent. Updating rationale and references.
CAM 192	Serum Testing for Evidence of Mild Traumatic Brain Injury	Annual review, no change to policy intent. Updating rationale and references.
CAM 20192	Fecal Microbiota Transplantation	Annual review. Updating policy to indicate there must be 2 recurrent infections, previously 3 recurrences were listed. Also updating guidelines, rationale and references.
CAM 204	ZOMETA (zoledronic acid)	Annual review, no change to policy intent.
CAM 289	Erectile Dysfunction	Annual review, no change to policy intent. Adding note 1 regarding serum testosterone testing. Updating description, rationale, references and coding.
CAM 303	Identification of Microorganisms Using Nucleic Acid Probes	Annual review, no change to policy intent. Updating rationale and references.
CAM 304	Genetic Testing for Li-Fraumeni Syndrome	Annual review, no change to policy intent. Updating rationale and references.
CAM 305	Genetic Testing for Mental Health Conditions	Annual review, no change to policy intent. Updating description, rationale and references. Removing guidelines as that information is included in the rationale.
CAM 80122	Allogeneic Hematopoietic Stem-Cell Transplantation for Genetic Diseases and Acquired Anemias	Annual review, no change to policy intent. Updating rationale and references.
CAM 80312	Hippotherapy	Annual review, no change to policy intent. Updating rationale and references.
CAM 050	Daily Hemodialysis and Hemodialysis in the Home Setting	Interim review to increase the number of weekly treatments from 3-4 to 5 treatments per week. No other changes made.
CAM 300	Genetic Testing for Lactase Insufficiency	Annual review, no change to policy intent. Updating rationale and references. Removing regulatory status as that information is included in the rationale.

CAM 301	Genetic Testing for Ophthalmologic Conditions	Annual review, no change to policy intent. Updating rationale and references.
CAM 136	Spinal Epidural Injections	Annual review, no change to policy intent.
CAM 142	Cervical Spine Procedures	Annual review, no change to policy intent.
CAM 298	Molecular Profiling for Cancers of Unknown Primary Origin	Annual review, no change to policy intent. Updating description, rationale and references. Removing regulatory status as that is included in the rationale.
CAM 299	Genetic Testing for the Diagnosis of Inherited Peripheral Neuropathies	Annual review, no change to policy intent. Updating coding, rationale and references. Removing regulatory status as that is now included in the rationale.
CAM 224	Emapalumab-Izsg (Gamifant)	Annual review, no change to policy intent.
CAM 50120	Pertuzumab for Treatment of Malignancies	Annual review, no change to policy intent.
CAM 80121	Allogeneic Hematopoietic Cell Transplantation for Myelodysplastic Syndromes and Myeloproliferative Neoplasms	Annual review, no change to policy intent. Updating rationale and references.
CAM 302	HIV Genotyping and Phenotyping	Annual review, no change to policy intent. Updating rationale and references.
CAM 296	Multigene Expression Assay for Predicting Recurrence in Colon Cancer	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 297	Genetic Testing for Alpha- and Beta-Thalassemia	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 154	DNA Ploidy Cell Cycle Analysis	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 80115	Hematopoietic Cell Transplantation for Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 80123	Hematopoietic Cell Transplantation for Epithelial Ovarian Cancer	Annual review, no change to policy intent. Updating rationale and references.
CAM 701101	Surgical Treatment of Snoring and Obstructive Sleep Apnea Syndrome	Annual review, no change to policy intent. Updating background, regulatory status, rationale and references.
CAM 246	Gamma-glutamyl Transferase	Annual review, no change to policy intent. Updating rationale and references.
CAM 153	Zika Virus Risk Assessment	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 50136	Desensitization Treatment of Peanut Allergies	Annual review, no change to policy intent. Updating rationale and references.
CAM 290	Genetic Testing for Adolescent Idiopathic Scoliosis	Annual review, no change to policy intent. Updating rationale and references.
CAM 291	Whole Genome and Whole Exome Sequencing	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 205	General Inflammation Testing	Annual review, no change to policy intent. Updating rationale and references.

CAM 198	Pancreatic Enzyme Testing for Acute Pancreatitis	Annual review, no change to policy intent. Updating rationale and references.
CAM 193	Cardiac Biomarkers for Myocardial Infarction	Annual review, no change to policy intent. Updating rationale and references.
CAM 295	Molecular Testing for Chronic Heart Failure and Heart Transplant	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 130	Vitamin B12 and Methylmalonic Acid Testing	Updating coding. No change to policy intent.
CAM 294	Genetic Testing for Hereditary Hearing Loss	Annual review, no change to policy intent. Updating description, rationale, references and coding.
CAM 077	Oral Screening, Lesion Identification Systems and Genetic Screening	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 140	Prescription Medication and Illicit Drug Testing in the Outpatient Setting	Interim review, updating policy verbiage for clarity and specificity.
CAM 127	Hepatitis C Testing	Annual review, updating policy to include clarification of once in a lifetime testing in #1, adding age and illicit intranasal or injectable drug use to #2, adding #3 related to ongoing risk factors.
CAM 308	Testing for Alpha-1 Antitrypsin Deficiency	Annual review, no change to policy intent. Updating rationale and references. Removing regulatory status as that is included in the rationale.
CAM 309	Genetic Testing for Hereditary Pancreatitis	Annual review, no change to policy intent. Updating description, rationale and references. Removing regulatory status as that is now included in the rationale.
CAM 310	BCR-ABL1 Testing	Annual review, updating policy to include coverage for failure to reach response milestones and loss of response. Also updating rationale and references.
CAM 311	Genetic Testing for PTEN Hamartoma Tumor Syndrome	Annual review, updating policy to include medical necessity coverage in #5 for Bannayan-Riley_Ruvalcaba syndrome, no other changes to intent. Also updating rationale and references.
CAM 80124	Hematopoietic Cell Transplantation for Miscellaneous Solid Tumors in Adults	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 277	Serum Tumor Markers for Malignancies	Interim review updating coding. No other changes made. Added code G0327 effective 7/1/2021.
CAM 306	Genetic Testing for Acute Myeloid Leukemia	Annual review, removing Genetic testing for FLT3, NPM1, CEBPA, IDH 1/2, KIT and other mutations to detect minimal residual disease is investigational/unproven therefore considered NOT MEDICALLY NECESSARY. as this is addressed in another policy. No other change to policy intent. Updating rationale and references. Removing regulatory status as that is included in the rationale.

CAM 307	KRAS, NRAS, and BRAF Mutation Analysis in Metastatic Colorectal Cancer	Annual review, no change to policy intent. Updating rationale and references. Removing regulatory status as that is included in the rationale.
CAM 80307	Back to School	Annual review, no change to policy intent.
CAM 80150	Radioimmunotherapy in the Treatment of Non-Hodgkin Lymphoma	Annual review, no change to policy intent.
CAM 70160	Dynamic Cardiomyoplasty	Annual review, no change to policy intent.
CAM 60127	FDG Using Camera-Based Imaging (FDG-SPECT)	Annual review, no change to policy intent.
CAM 60115	Videofluoroscopic Evaluation of Velopharyngeal Dysfunction	Annual review, no change to policy intent.
CAM 20490	Multianalyte Assays with Algorithmic Analyses for Predicting Risk of Type 2 Diabetes	Annual review, no change to policy intent.
CAM 20225	Computerized 2-lead Resting Electrocardiogram Analysis for the Diagnosis of Coronary Artery Disease	Annual review, no change to policy intent.
CAM 20214	Transcatheter Ablation of Septal Hypertrophy (TASH)	Annual review, no change to policy intent.
CAM 20134	Cutaneous Electrogastrography (EEG)	Annual review, no change to policy intent.
CAM 40111	Occlusion of Uterine Arteries Using Transcatheter Embolization	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 20199	Polysomnography for Non-Respiratory Sleep Disorders	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 10405	Microprocessor-Controlled Prosthetic for the Lower Limb	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 230	Genicular Nerve Blocks and Ablation for Chronic Knee Pain	Annual review, no change to policy intent. Updating rationale and references.
CAM 313	Chromosomal Microarray	Annual review, updating policy for specificity in #2 (second consecutive clinical first trimester pregnancy, adding criteria #3 f & g related to growth restriction. Also updating rationale and references.) (Policy number was CAM 204122 and changed to CAM 313).
CAM 044	Genetic Testing for Cystic Fibrosis	Annual review, updating policy for specificity of #3 and #4. No change to policy intent.
CAM 312	Molecular Panel Testing of Cancers for Diagnosis, Prognosis, and Identification of Targeted Therapy	Annual review, updating policy to add criteria #3 related to tumor mutation burden testing. No other changes to intent. Also updating rationale and references.) (Policy number was CAM 204115 and changed to CAM 312).
CAM 20216	Ultrasonographic Measurement of Carotid Intimal-Medial Thickness as an Assessment of Subclinical Atherosclerosis	Annual review, no change to policy intent. Updating background, guidelines, rationale and references.

CAM 80137	Inhaled Nitric Oxide	Annual review, no change to policy intent. Updating rationale and references.
CAM 80308	Cardiac Rehabilitation in the Outpatient Setting	Annual review, adding Benson-Henry Institute Program to the list of not medically necessary rehabilitation programs. No other changes to policy intent. Also updating description, background, rationale and references.
CAM 071	Concurrent Care	Interim review, updating the policy to reflect "clinician" where "physician" previously was. Also adding a list of clinician types.
CAM 172	Daratumumab (Darzalex®) Injection	Annual review, no change to policy intent.
CAM 10128	Postsurgical Home Use of Limb Compression Devices for Venous Thromboembolism Prophylaxis	Annual review, no change to policy intent. Updating rationale and references.
CAM 20129	Biofeedback as a Treatment of Headache	Annual review, no change to policy intent. Updating guidelines, background, rationale and references.
CAM 20441	Noninvasive Techniques for the Evaluation and Monitoring of Patients with Chronic Liver Disease	Interim review updating policy verbiage for clarity.
CAM 50135	Prescription Digital Therapeutics for Substance Abuse	Annual review, no change to policy intent.
CAM 60154	Dopamine Transporter Imaging with Single Photon Emission Computed Tomography (DAT-SPECT)	Annual review, no change to policy intent. Updating description, rationale and references.
CAM 701153	Adipose-Derived Stem Cells in Autologous Fat Grafting to the Breast	Annual review, no change to policy intent. Updating rationale and references.
CAM 80146	Intensity-Modulated Radiotherapy of the Breast and Lung	Annual review, no change to policy intent. Updating rationale and references.
CAM 20305	Uses of Monoclonal Antibodies	Annual review, no change to policy intent. Updating rationale and references.
CAM 70105	Cochlear Implant	Updating policy removing language regarding unilateral hearing loss.
CAM 70113	Surgical Treatment of Bilateral Gynecomastia	Annual review, no change to policy intent. Updating references.
CAM 701128	Bronchial Valves	Annual review, no change to policy intent. Updating rationale and references.
CAM 701159	Sphenopalatine Ganglion Block for Headache	Annual review, no change to policy intent. Updating background, description, rationale and references.
CAM 70186	Endovascular Stent Grafts for Disorders of the Thoracic Aorta	Annual review, no change to policy intent. Updating rationale and references.
CAM 70312	Islet Cell Transplantation	Annual review, no change to policy intent. Updating rationale and references.
CAM 80147	Intensity-Modulated Radiotherapy of the Prostate	Annual review, no change to policy intent. Updating background, guidelines, rationale and references.
CAM 201100	Dry Needling of Trigger Point Injections for Myofascial Pain	Adding codes 20550-20553 to coding section. No other changes made.

CAM 80148	Intensity-Modulated Radiotherapy: Cancer of the Head and Neck or Thyroid	Annual review, no change to policy intent. Updating rationale and references.
CAM 50133	Brexanolone for Postpartum Depression	Annual review, removing requirement to have an inadequate response to two antidepressant agents prior to using this treatment. No other changes made.
CAM 60156	Myocardial Sympathetic Innervation Imaging in Patients with Heart Failure	Annual review, no change to policy intent. Updating rationale and references.
CAM 701139	Peripheral Subcutaneous Field Stimulation	Annual review, no change to policy intent. Updating references.
CAM 70129	Percutaneous Electrical Nerve Stimulation (PENS) and Percutaneous Neuromodulation Therapy (PNT)	Annual review, no change to policy intent. Updating rationale and references.
CAM 047	Amniotic Membrane and Limbal Stem Cell Transplantation for the Treatment of Ocular Conditions	Annual review, no change to policy intent.
CAM 80111	Transcatheter Arterial Chemoembolization to Treat Primary or Metastatic Liver Malignancies	Annual review, no change to policy intent.
CAM 171	Radium Ra 223 (Xofigo®) Injection	Annual review, no change to policy intent.
CAM 194	Ustekinumab (Stelara™)	Annual review, no change to policy intent.
CAM 50118	Bevacizumab in Advanced Adenocarcinoma of the Pancreas	Annual review, no change to policy intent.
CAM 115	Durable Medical Equipment (DME)	Annual review, no change to policy intent.
CAM 70313	Composite Tissue Allotransplantation of the Hand and Face	Annual review, no change to policy intent.
CAM 70191	Radiofrequency Ablation of Primary or Metastatic Liver Tumors	Annual review, no change to policy intent. Updating rationale and references.
CAM 90329	Eyelid Thermal Pulsation for the Treatment of Dry Eye Syndrome	Annual review, no change to policy intent. Updating regulatory status, description, rationale and references.
CAM 20121	Temporomandibular Joint Dysfunction	Annual review, adding platelet concentrate to the list of not medically necessary treatments. No other change to policy intent. Also updating rationale and references.
CAM 701134	Steroid-Eluting Sinus Stents and Implants	Annual review, updating title to include implants. No change to policy intent. Also updating background, regulatory status, rationale and references.
CAM 176	Telehealth	Adding dashes to date on external policy. No other changes made.
CAM 089	Preventive Services for Non-Grandfathered (PPACA) Plans: USPSTF recommended services	Updating newborn hearing testing coding to include 92652 and 92653.