



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

September 2023 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 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 385	Orthopedic Implants	New policy
CAM 163	Light Therapy for Dermatologic Conditions	Archived (Included in CAM 386 Phototherapy: PUVA, UV-B and Targeted Phototherapy)
CAM 164	Ultraviolet Light Therapy in the Home Setting (UVB)	Archived (Included in CAM 386 Phototherapy: PUVA, UV-B and Targeted Phototherapy)
CAM 20186	Targeted Phototherapy and Psoralen With Ultraviolet A for Vitiligo	Archived (Included in CAM 386 Phototherapy: PUVA, UV-B and Targeted Phototherapy)
CAM 209	Diagnostic Testing of Most Common Sexually Transmitted Infections	Updating coding adding code 0402U to be effective 10/01/2023. No other changes made.
CAM 241	Gene Expression Profiling and Protein Biomarkers for Prostate Cancer	Updating coding section. Adding code 0403U to be effective on 10/01/2023. No other change made.
CAM 265	Genetic Cancer Susceptibility Panels Using Next Generation Sequencing	Updated the coding section. Added code 0405U to be effective 10/01/2023. No other changes.
CAM 326	Molecular Testing of Pulmonary Specimens	Updating coding section. Adding CPT code 0406U effective 10/01/2023. No other changes made.
CAM 235	Laboratory Guideline Policy	Updating coding section. Adding CPT code 0407U and 0418U effective on 10/01/2023. No other changes made.
CAM 380	Coronavirus Testing in the Outpatient Setting	Updating coding section. Adding CPT code 0408U effective 10/01/2023. No other changes.
CAM 342	Microsatellite Instability and Tumor Mutational Burden Testing	Updating coding section. Adding CPT code 0409U effective 10/01/2023. No other change made.
CAM 218	Pharmacogenetic Testing	Updating coding section. Adding CPT codes 0411U and 0419U effective on 10/01/2023. No other changes made.
CAM 335	Biochemical Markers of Alzheimer Disease and Dementia	Updating Coding section. Adding CPT code 0412U effective 10/01/2023. No other change made.
CAM 288	Testing for Targeted Therapy of Non-Small-Cell Lung Cancer	Updating the coding section. Adding CPT 0414U effective 10/01/2023. No other changes made.

CAM 188	Cardiovascular Disease Risk Assessment	Updating Coding section. Adding CPT codes 0415U and 0019M effective 10/01/2023. No other changes made.
CAM 181	Pathogen Panel Testing	Updating Coding section. Adding CPT code 0416U effective 10/01/2023. No other changes made.
CAM 258	Genetic Testing of Mitochondrial Disorders	Updating Coding section. Adding CPT code 0417U effective 10/01/2023. No other changes made.
CAM 166	General Genetic Testing, Germline Disorders	Updating Coding section. Adding codes 0269U, 0271U, 0272U, 0274U, 0277U and 0278U. No other changes made.
CAM 279	Molecular Markers in Fine Needle Aspirates of the Thyroid	Updating Coding section. Adding code 0362U effective 10/01/2023. No other changes made.
CAM 10120	Continuous or Intermittent Monitoring of Glucose in Interstitial Fluid	Interim review, changing category from DME to prescription medicine. No other changes.
CAM 089	Extracorporeal Photopheresis	Interim review, adding anxiety disorder screening in adults, updating verbiage to include suicide risk in the depression screening for adults recommendation. Reaffirming latent tuberculosis screening for at risk adults. Updating the folic acid supplementation recommendation to use the term person/persons.
CAM 80148	Intensity-Modulated Radiotherapy: Cancer of the Head and Neck or Thyroid	Annual review, no change to policy intent. Updating description, background, rationale and references.
CAM 90329	Eyelid Thermal Pulsation for the Treatment of Dry Eye Syndrome	Annual review, no change to policy intent. Updating rationale and references.
CAM 701134	Steroid-Eluting Sinus Stents and Implants	Annual review, no change to policy intent. Updating rationale and references.
CAM 60115	Videofluoroscopic Evaluation of Velopharyngeal Dysfunction	Annual review, no change to policy intent.
CAM 20105	Local or Whole Body Hyperthermia	Annual review, no change to policy intent.
CAM 60127	FDG Using Camera-Based Imaging (FDG-SPECT)	Annual review, no change to policy intent.
CAM 701153	Adipose-Derived Stem Cells in Autologous Fat Grafting to the Breast	Annual review, no change to policy intent. Updating rationale and reference.
CAM 70312	Islet Cell Transplantation	Annual review, no change to policy intent. Updating Regulatory status, rationale and references.
CAM 80150	Radioimmunotherapy in the Treatment of Non-Hodgkin Lymphoma	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, but, policy being rewritten for clarification and specificity. Also updating rationale and references.

CAM 60156	Myocardial Sympathetic Innervation Imaging in Patients With Heart Failure	Annual review, no change to policy intent. Updating guidelines, coding, rationale and references.
CAM 70121	Reduction Mammoplasty for Breast-Related Symptoms	Annual review, no change to policy intent. Updating rationale and references.
CAM 70186	Endovascular Stent Grafts for Disorders of the Thoracic Aorta	Annual review, no change to policy intent. Updating coding.
CAM 094	Women's Preventive Services	Interim review, to update the folic acid supplementation recommendation to change the use of the word women to persons. No change to policy intent.
CAM 80111	Transcatheter Arterial Chemoembolization To Treat Primary or Metastatic Liver Malignancies	Annual review, no change to policy intent. Updating rationale and references.
CAM 20138	Transesophageal Endoscopic Therapies for Gastroesophageal Reflux Disease	Annual review, no change to policy intent. Updating background, rationale and references.
CAM 157	Medical Policy Development and Review	Interim review to update verbiage for clarity and specificity.
CAM 241	Gene Expression Profiling and Protein Biomarkers for Prostate Cancer	Updating coding section. Adding code 0403U to be effective on 10/01/2023. No other change made.
CAM 047	Amniotic Membrane and Limbal Stem Cell Transplantation for the Treatment of Ocular Conditions	Annual review, no change to policy intent.
CAM 10405	Microprocessor-Controlled Prosthetic for the Lower Limb	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 70129	Percutaneous Electrical Nerve Stimulation (PENS) and Percutaneous	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 description and background.
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 rationale and references.
CAM 80158	Cranial Electrotherapy Stimulation (CES) and Auricular Electrostimulation	Annual review, no change to policy intent. Updating background, rationale and references. Adding CPT 0783T.
CAM 80167	Medical Management of Obstructive Sleep Apnea Syndrome	Annual review, no change to policy intent. Updating reg status, rationale and references.
CAM 109	Preventive Services for Non-Grandfathered (PPACA) Plans: Immunizations	On 0173A add{ed} the word 'months' after Age 6.
CAM 386	Phototherapy: PUVA, UV-B and Targeted Phototherapy	Reorganizing UVB home and office treatment so they follow one another in order. No other Changes.

CAM 564	Surgical Guidelines (Secondary, Multiple Procedures, Co-Surgeons, Assistant Surgeons, Standby Physicians, Microsurgery/Microdissection)	Annual review, no change to policy intent.
CAM 014	Neuromuscular Electrical Stimulation (NMES)	Annual review, reformatting policy verbiage, but, no change to intent.
CAM 10118	Pneumatic Compression Pumps for Treatment of Lymphedema	Interim review to update statement regarding lymphedema pumps for the trunk or chest to clarify this is not medically necessary with or without involvement of the upper and/or lower limbs. Also Updating rationale and references.
CAM 30301	Digital Health Technologies: Diagnostic Applications	Annual review, no change to policy intent. Updating table 7 and it's footnotes.
CAM 015	Influenza Vaccine	Annual review, updating table one and two for ACIP 2023/2024 recommendations.
CAM 046	Breast Pumps	Annual review, no change to policy intent.
CAM 079	Breast Surgical Procedures/Prosthesis	Annual review, no change to policy intent.
CAM 20116	Recombinant and Autologous Platelet-Derived Growth Factors for Wound Healing and Other Non-Orthopedic Conditions	Annual review, no change to policy intent. Updating regulatory status, rationale and references. Adding HCPCS G0465.
CAM 40119	Laparoscopic, Percutaneous and Transcervical Techniques for Uterine Fibroids Myolysis	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 60118	Scintimammography and Gamma Imaging of the Breast and Axilla	Annual review, no change to policy intent. Updating rationale and references.
CAM 701105	Balloon Ostial Dilation for Treatment of Chronic and Recurrent Acute Rhinosinusitis	Annual review, no change to policy intent. Updating rationale and references.
CAM 701150	Vagus Nerve Blocking Therapy for Treatment of Obesity	Annual review, no change to policy intent.
CAM 80106	Oncologic Applications of Photodynamic Therapy, Including Barrett Esophagus	Annual review, no change to policy intent.