



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

## July 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](http://www.SouthCarolinaBlues.com) and [www.BlueChoiceSC.com](http://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 289	Erectile Dysfunction	<b>Archived</b>
CAM 302	HIV Genotyping and Phenotyping	<b>Archived (Included in CAM 282 Human Immunodeficiency Virus Testing.)</b>
CAM 305	Genetic Testing for Mental Health Conditions	<b>Archived (Testing addressed by CAM 305 will now be addressed by CAM 166.)</b>
CAM 20197	Alcohol Injections for Treatment of Peripheral Neuromas	<b>Archived (Material will be migrated to new policy CAM 701147 Minimally Invasive Ablation Procedures for Morton and Other Peripheral Neuromas.)</b>
CAM 90311	Photocoagulation of Macular Drusen	<b>Archived</b>
CAM 60151	Interim Positron Emission Tomography Scanning in Oncology to Detect Early Response During Treatment	Annual review, no change to policy intent. Updating background, guidelines, rationale and references. Adding code G0235.
CAM 60160	Therapeutic Radiopharmaceuticals for Neuroendocrine Tumors	Annual review, updating policy to include statement regarding pheochromocytoma and paraganglioma. Also updating criteria 3,4, and 5 for initial Lutetium 177 use for clarity and specificity. Updating regulatory status.
CAM 282	Human Immunodeficiency Virus Testing	Annual review, entire policy is being updated as all information from CAM 302 is being migrated to this policy and that policy is being archived. This policy will now be titled Human Immunodeficiency Virus Testing.
CAM 142	Cervical Spine Procedures	Updating Next review date. No other changes.
CAM 80164	Home Noninvasive Positive Airway Pressure for Chronic Obstructive Pulmonary Disease	Updating coding. Added codes E0470 and E0562 to coding section. No other changes made.
CAM 80304	Speech Therapy	Annual review, verbiage related to habilitative speech therapy added.
CAM 10129	Tumor Treating Fields Therapy	Annual Review, no change to policy intent. Updating rationale and references.
CAM 20184	Chromoendoscopy as an Adjunct to Colonoscopy	Annual review, no change to policy intent. Updating rationale and references.
CAM 10115	Oscillatory Devices for the Treatment of Cystic Fibrosis and Other Respiratory Conditions	Annual review, no change to policy intent. Updating background, regulatory status, rationale, references and verbiage for code E0483.
CAM 218	Pharmacogenetic Testing	Moving review date to September. No other changes.

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 80122	Allogeneic Hematopoietic Stem-Cell Transplantation for Genetic Diseases and Acquired Anemias	Annual review, no change to policy intent.
CAM 159	Lyme Disease Testing	Annual review, Updating policy for clarity. Also updating Description, Rationale, Reference and Table of terminology.
CAM 109	Preventive Services for Non-Grandfathered (PPACA) Plans: Immunizations	Creating a New Category named Respiratory Syncytial Virus under this category will be adding the following two codes: 90678 and 90679. Adding Benefit limits should indicate one dose for adults 60 years of age and older.
CAM 50110	Immune Prophylaxis for Respiratory Syncytial Virus	Adding note directing readers to CAM 109 for vaccine coverage for adults 60 and greater.
CAM 036	Unicompartmental and Bicompartamental Knee Arthroplasties	Annual review, no change to policy intent.
CAM 452	Pain Management Services (Chronic Pain and Rehabilitation Therapies)	Annual review, no change to policy intent.
CAM 10201	Total Parenteral Nutrition and Enteral Nutrition in the Home	Annual review, no change to policy intent.
CAM 20186	Targeted Phototherapy and Psoralen with Ultraviolet A for Vitiligo	Annual review, no change to policy intent. Updating rationale and references.
CAM 20187	Confocal Laser Endomicroscopy	Annual review, no change to policy intent. Updating rationale and references.
CAM 20139	Quantitative Sensory Testing	Annual review, no change to policy intent. Updating background, rationale, references and regulatory status.
CAM 20198	Orthopedic Applications of Platelet-Rich Plasma	Annual review, no change to policy intent.
CAM 60150	Use of Magnetic Resonance Imaging to Monitor Integrity of Silicone Gel-Filled Breast Implants	Annual review, no change to policy intent.
CAM 701107	Interspinous and Interlaminar Stabilization/Distracton Devices Spacers	Annual review, no change to policy intent.
CAM 701120	Facet Arthroplasty	Annual review, no change to policy intent. Updating rationale and references.
CAM 701142	Surgery for Groin Pain in Athletes	Annual review, no change to policy intent. Updating rationale and references.
CAM 70115	Meniscal Allografts and Other Meniscal Implants	Annual review, no change to policy intent.
CAM 701110	Vertical Expandable Prosthetic Titanium Rib	Annual review, no change to policy intent.

CAM 701161	Three-Dimensional Printed Orthopedic Implants	Annual review, no change to policy intent.
CAM 70169	Sacral Nerve Neuromodulation/Stimulation	Annual review, no change to policy intent.
CAM 70193	Decompression of the Intervertebral Disc Using Laser (Laser Discectomy) or Radiofrequency Coblation (Nucleoplasty™)	Annual review, no change to policy intent.
CAM 80132	Hematopoietic Cell Transplantation for Acute Lymphoblastic Leukemia	Annual review, no change to policy intent. Updating rationale and references.
CAM 80162	Electronic Brachytherapy for Nonmelanoma Skin Cancer	Annual review, no change to policy intent. Updating rationale and references.
CAM 80311	Endobronchial Brachytherapy	Annual review, no change to policy intent. Updating rationale and references.
CAM 147	Knee Braces, Orthopedic Casts, Splints	Added E code range E1801-E1816, E1818.
CAM 701171	Remote Electrical Neuromodulation for Migraines	Annual review, no change to policy intent. Updating Coding.
CAM 701109	Lipid Apheresis	Annual review, no change to policy intent. Review date changed.
CAM 10102	Automated Ambulatory Blood Pressure Monitoring for the Diagnosis of Hypertension in Patients with Elevated Office Blood Pressure	Annual review, no change to policy intent. Updating guidelines, rationale and references.
CAM 10127	Electrical and Electromagnetic Stimulation for the Treatment of Arthritis	Annual review, no change to policy intent. Updating regulatory status, rationale and references.
CAM 60148	Positional Magnetic Resonance Imaging (MRI)	Annual review, no change to policy intent. Updating rationale and references.
CAM 60155	Selected Positron Emission Tomography Technologies for Evaluation of Alzheimer Disease	Annual review, no change to policy intent. Updating coding, rationale and references.
CAM 079	Breast Surgical Procedures/Prosthesis	Interim review. Adding codes L8000, L8001, L8002, L8010, L8015, L8020, L8030, L8031, L8035 and L8039. No other changes made.
CAM 089	Preventive Services for Non-Grandfathered (PPACA) Plans: USPSTF recommended services	Updating ICD-10 coding. Effective 10/01/2023, Z298 is being terminated and replace with Z2989.
CAM 20189	Laser Treatment of Onychomycosis	Annual review, no change to policy intent.
CAM 20183	Interventions for Progressive Scoliosis	Annual review, no change to policy intent.
CAM 70167	Endovascular Stent Grafts for Abdominal Aortic Aneurysms	Annual review, no change to policy intent. Updating regulatory status, coding, rationale and references.
CAM 140	Prescription Medication and Illicit Drug Testing in the Outpatient Setting	Interim review updating police to replace RiskViewRX with CareView360. Also updating rationale and PLA coding.

CAM 293	Pancreatic Cancer Risk Testing Using Pancreatic Cyst Fluid	Annual review, no change to policy intent. Policy rewritten for clarity and consistency. Updating description, table of terminology, rationale, references and coding. Adding 88108, 88112 and 88173. Removing 89240.
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