

## **Medical Policies update**

On February 2, 2017, the Medical Policy and Technology Assessment Committee approved the following *Medical Policies* and *Clinical Utilization Management (UM) Guidelines* applicable to Summit Community Care. These policies and guidelines were developed or revised to support clinical coding edits. Several policies and guidelines were revised to provide clarification only and are not included in the below listing.

This list represents the *Clinical UM Guidelines* adopted by the Medical Operations Committee for the Government Business Division on March 21, 2017. On February 2, 2017, the clinical guidelines were made publicly available on the Summit Community Care *Medical Policies* and *Clinical UM Guidelines* subsidiary website. Visit <u>Clinical UM Guidelines</u> to search for specific guidelines.

The *Medical Policies* were made publicly available on the Summit Community Care provider website on the effective date listed below. Visit <u>Medical Policies</u> to search for specific policies.

Existing precertification requirements have not changed. Please share this notice with other members of your practice and office staff.

For questions, please contact Provider Services at 1-844-462-0022.

Please note: For markets with pharmacy services carved out, the applicable listings below would be informational only.

Medical Policies					
Effective date	Medical Policy number	Medical Policy title	New or revised		
3/29/2017	LAB.00034	Serological antibody testing for helicobacter pylori	New		
3/29/2017	SURG.00146	Extracorporeal carbon dioxide removal	New		
3/29/2017	SURG.00147	Synthetic cartilage implant for metatarsophalangeal joint disorders	New		
2/16/2017	DRUG.00068	Vedolizumab (Entyvio®)	Revised		
2/16/2017	SURG.00103	Intraocular anterior segment aqueous drainage devices (without extraocular reservoir)	Revised		

ARPEC-0149-18 February 2019

Clinical UM Guidelines				
Effective date	Clinical UM Guideline number	Clinical UM Guideline title	New or revised	
3/29/2017	CG-MED-56	Nonobstetrical transvaginal ultrasonography	New	
2/16/2017	CG-DME-38	Continuous interstitial glucose monitoring	Revised	
2/16/2017	CG-DRUG-28	Alglucosidase alfa (Lumizyme®)	Revised	
2/16/2017	CG-MED-42	Maternity ultrasound in the outpatient setting	Revised	