



# MARYLAND AAHAM

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*Third-Party Payer Meeting*

MARCH 6, 2020

# AGENDA

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1. View Medical Policy
2. Enter Pre-Cert/Pre-Auth (In-Network/Out-of-Area)
3. View Out of Area Medical Policy search feature
4. View Pharmacy and medical criteria for a drug medical policy
5. Locate the Institutional Manual
6. Locate the Provider Quick Reference Guide
7. Locate the FEP Medical Policy Brochure
8. Locate the FEP Benefit Brochure
9. Understand FEP Pharmacy

# MEDICAL POLICY

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# Finding Medical Policy

CareFirst Medical Policy is a Reference Manual for providers and physicians in the CareFirst network.

You can find approved medical policies and operating procedures for all products offered by CareFirst.

To locate medical policies, navigate to [www.Provider.CareFirst.com](http://www.Provider.CareFirst.com).

The screenshot shows the CareFirst website interface. At the top, there is a navigation bar with the CareFirst logo, a search icon, and links for 'Need Insurance?', 'Members', 'Employers', 'Brokers', 'Providers', and 'Community'. Below this is a dark navigation bar with 'HOME', 'JOIN OUR NETWORKS', 'PROGRAMS/SERVICES', and 'RESOURCES'. The main content area features a large banner with a 'Login' form on the left and a 'CONTROL YOUR DATA' message on the right. The 'Login' form includes fields for 'User ID' and 'Password', with options for 'Forgot User ID', 'Reset Password', 'Remember me', and 'Create an Account'. A yellow arrow points to the 'Medical Policy' section in the footer, which contains the text: 'Find approved medical policies and operating procedures for all products offered by CareFirst in the online Medical Policy Reference Manual.' and a 'Search Now' button. Other footer sections include 'Electronic Claims', 'Stay Connected', and 'Quick Links'.

Read the text and click 'OK' to continue

## Medical Policy Disclaimer

The policies and procedures in this Medical Policy Reference Manual are for informational use only. It is an informational database, which, along with other documentation, is used to assist the Plan\* in reaching decisions on matters of medical policy, and related member/subscriber coverage. These policies and procedures are not intended to certify or authorize coverage availability and do not serve as an explanation of benefits or a contract. Member/subscriber coverage will vary from contract to contract and by line of business. Benefits will only be available upon the satisfaction of all terms and conditions of coverage. Some benefits may be excluded from individual coverage contracts.

These medical policies are not intended to replace or substitute for the independent medical judgment of a practitioner or other health professional for the treatment of an individual.

Medical technology is constantly changing and CareFirst reserves the right to review and update its medical policy as necessary.

For specific billing codes and instructions, refer to the appropriate coding manual, such as the Health Care Financing Administration Common Procedure Coding System (HCPCS) (National Level II Medicare Codes), the International Classification of Diseases and the American Medical Association's Current Procedural Technology.

\*For the purposes of this Manual, 'Plan' refers to all lines of business and affiliates of CareFirst BlueCross BlueShield.



# Finding Medical Policy Cont'd.

Click 'Medical Policies' to continue

The screenshot shows the CareFirst website interface. At the top, there is a navigation bar with the CareFirst logo, a 'Log in' button, and a search bar. Below this is a dark navigation menu with links for 'HOME', 'JOIN OUR NETWORKS', 'PROGRAMS/SERVICES', and 'RESOURCES'. The 'PROGRAMS/SERVICES' link is highlighted with a blue underline. The main content area is titled 'Medical Policy' and contains the following text: 'The online Medical Policy Reference Manual contains approved medical policies and operating procedures for all products offered by CareFirst. Medical policies, which are based on the most current research available at the time of policy development, state whether a medical technology, procedure, drug or device is:'. A bulleted list follows: 'experimental/investigational', 'cosmetic', and 'medically necessary'. Below the list, it says 'Operating procedures provide specific benefit information and/or instructions.' In the left sidebar, under the 'Medical' heading, there is a list of links: 'Electronic Capabilities', 'Medical Policy', 'Pre-Cert/Pre-Auth (In-Network)', 'Pre-Cert/Pre-Auth (Out-of-Area)', 'Medical Forms', and 'Medical News'. A yellow arrow points from the 'Pre-Cert/Pre-Auth (Out-of-Area)' link to a blue button labeled 'Medical Policies' located below the main text.

# Finding Medical Policy Cont'd.

Type your key word and click “Search’. Select a file to open from the search results

The screenshot shows the CareFirst Policy Search interface. At the top left is the CareFirst logo. Below it is a 'Policy Search' button. The main area is titled 'Advanced Search' and contains a search box with the text 'Video Electro' and a 'SEARCH' button. Below the search box are 'Advanced Search Options'. The 'Search Results' section shows a table of results with columns for Division, Policy Location, Type, Policy Number, Title, File Type, Related Policies, and Purpose. The first result is 'Video Electroencephalographic (EEG) Monitoring' with a policy number of 2.01.044. There are three yellow callout boxes: '1' points to the search box, '2' points to the SEARCH button, and '3' points to the first search result row.

**1** Keyword  
Video Electro

**2** SEARCH

**3**

DIVISION	POLICY LOCATION	TYPE	POLICY NUMBER	TITLE	FILE TYPE	RELATED POLICIES	PURPOSE
CareFirst	... \ Medical Policy (Public) \ 99. Archived...02. Medicine \ 99. Archived...2.01. Medicine	Medical Policy	2.01.044	Video Electroencephalographic (EEG) Monitoring	PDF	0 3	
CareFirst	... \ Medical Policy (Public) \ 99. Archived...10. Administrative	Procedure	10.01.012A	Archived Telemedicine (Unified Communications)	PDF	0 4	
CareFirst	... \ Medical Policy (Public) \ 01. Durable Medical Equipment \ 1.04. Prosthetic Appliances		1.04.001	Prosthetics	PDF	0 13	
CareFirst	... \ Medical Policy (Public) \ 04. OB/GYN/Reproduction \ 4.01. OB/GYN	Medical Policy	4.01.010	Lactation Consultations	PDF	0 0	
CareFirst	... \ Medical Policy (Public) \ 01. Durable Medical Equipment \ 1.02. Medical Supplies	Procedure	1.02.024A	Over-the-Counter Miscellaneous Supplies and Equipment	PDF	0 2	
CareFirst	... \ Medical Policy (Public) \ 10. Administrative	Procedure	10.01.013A	Medical Record Documentation Standards	PDF	0 16	
CareFirst	... \ Medical Policy (Public) \ 05. Prescription Drug	Medical Policy	5.01.022	Steroid-eluting Implants for Sinus Surgery	PDF	0 0	
CareFirst	... \ Medical Policy (Public) \ 08. Rehabilitation Therapy	Medical Policy	8.01.005	Speech Therapy	PDF	0 18	
CareFirst	... \ Medical Policy (Public) \ 01. Durable Medical Equipment \ 1.01. Medical Equipment	Medical Policy	1.01.061	Transcutaneous Electroneural Stimulation for Relief of Nausea and Vomiting	PDF	0 1	
CareFirst	... \ Medical Policy (Public) \ 06. Radiology Imaging	Medical Policy	6.01.036	Magnetoencephalography and Magnetic Source Imaging	PDF	0 1	

Items per page: 10 Showing 1-10 of 16 Page 1 of 2

# Key Features

- Title (Magnifying glass) – Click to see the Policy/SOP Effective Date, Review Date, Revision Dates, Responsible Party, and any Related Policies under the 'TITLE' column.
- File Type – Shows the document type for the file and medical policy information and/or SOP (Description, policy guidelines references, etc.)
- Paper Clip – Click to see any attachments associated with the Policy and/or SOP. The number identifies how many attachments are there for viewing.
- Related Policies – For additional policies associated with the policy.

### Search Results

Filter By: Any Field | Contains | Enter value [Search] [Filter]

DIVISION	POLICY LOCATION	TYPE	POLICY NUMBER	TITLE	FILE TYPE	RELATED POLICIES	PURPOSE
CareFirst	... \ Medical Policy (Public) \ 02. Medicine \ 2.01. Medicine	Medical Policy	2.01.044	Video Electroencephalographic (EEG) Monitoring		0  3	

**Search Results**

Filter By: Any Field | Contains | Enter value [ ] [ ] [ ]

DIVISION	POLICY LOCATION	TYPE	POLICY NUMBER	TITLE	FILE TYPE	RELATED POLICIES	PURPOSE
CareFirst	... \Medical Policy (Public) \99. Archived...02. Medicine \99. Archived...2.01. Medicine	Medical Policy	2.01.044	Video Electroencephalographic (EEG) Monitoring		0  3	
CareFirst	... \Medical Policy (Public) \99. Archived...10. Administrative	Procedure	10.01.012A	Archived Telemedicine (Unified Communications)		0  4	

## Medical Policy Reference Manual

### Medical Policy

#### 2.01.044 Video Electroencephalographic (EEG) Monitoring

Original MPC Approval: 06/28/2000  
 Last Review: 07/22/19  
 Last Revision: 01/01/20

#### Description

**This policy has been archived as of 07/22/19. The policy remains in effect and is no longer scheduled for review.**

Video electroencephalographic (EEG) monitoring is used in a select group of patients for evaluating seizure disorders. A video recording is made during 10 to 64 channel EEG monitoring in order to capture the patient's behavior and the corresponding EEG pattern. The video EEG allows clinicians to examine changes in the EEG along with the clinical manifestations of seizures as they occur. Video EEG monitoring is widely accepted as a safe and effective method for diagnosing and classifying seizure disorders, distinguishing seizures from non-epileptic events, and localizing seizure foci.

# PRE-CERT/PRE-AUTH (IN-NETWORK / OUT OF AREA)

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From the Programs/Services tab click the Pre-Cert/Pre-Auth In-Network or Out-of-Area link or Quick Link Pre-Cert/Pre-Auth link from the Quick Links section to view.

The screenshot shows the CareFirst website interface. At the top, there is a navigation bar with 'HOME', 'JOIN OUR NETWORK', 'PROGRAMS/SERVICES', and 'RESOURCES'. The 'PROGRAMS/SERVICES' tab is highlighted with a callout '1'. Below the navigation bar, there is a sidebar with a 'Medical' section containing links: 'Electronic Capabilities', 'Medical Policy', 'Pre-Cert/Pre-Auth (In-Network)', 'Pre-Cert/Pre-Auth (Out-of-Area)', 'Medical Forms', and 'Medical News'. The 'Pre-Cert/Pre-Auth (In-Network)' link is highlighted with a callout '2'. The main content area is titled 'Pre-Cert/Pre-Auth (In-Network)' and contains text about service review criteria and a list of services. The 'Artificial Cervical Disc' link is highlighted with a callout '3'.

The screenshot shows a detailed view of the 'Artificial Cervical Disc' medical policy. It includes the CareFirst logo, the title 'Medical Policy Reference Manual Medical Policy', and the specific policy code '7.01.100 Cervical Vertebral Disc Replacement'. It also lists the approval and review dates: 'Original MPC Approval: 10/10/2007', 'Last Review: 01/28/2019', and 'Last Revision: 01/28/2019'. A 'Description' section follows, explaining that degenerative disc disease (DDD) of the cervical spine is a common condition that often accompanies aging, leading to loss of moisture and elasticity in the intervertebral discs.

Find Pre-Service Review information for out-of-area members.

## Process for Obtaining Pre-Service Review Information

To view the out-of-area Blue Plan's medical policy or general information, please:

- Select the type of information requested
- Enter the first three letters of the member's identification ID card
- Click 'GO'

**Type of information being requested:**

Please select one at a time

Medical Policy

General Pre-Service Review information

YTP

Go

If you experience technical difficulties or need additional information, please contact your local Blue Plan.

## General Pre-Certification/Pre-Authorization Information

**PLEASE READ:** Members of some group health plans may have terms of coverage or benefits that differ from the information presented here. The following information describes the general policies of Anthem Blue Cross and Blue Shield and is provided for reference only. This information is NOT to be relied upon as pre-authorization or pre-certification for health care services and is NOT a guarantee of payment. To verify coverage or benefits or determine pre-certification or pre-authorization requirements for a particular member, call 1-800-676-BLUE or send an electronic inquiry through your established connection with your local Blue Plan.

**I have read the above information:**

Continue

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# PHARMACY

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*Medical criteria for a drug medical policy*

WHERE TO LOCATE DRUG CRITERIA/POLICIES

# Locating Drug Criteria/Policies

A list of drugs\* and their required criteria/policies can be located on the CareFirst website at [www.carefirst.com/providers](http://www.carefirst.com/providers) under Programs/Services > Pharmacy Forms.

The screenshot shows the CareFirst website navigation menu. The 'PROGRAMS/SERVICES' tab is selected and underlined. A yellow arrow points to 'Pharmacy Prior Authorization' under the 'Pharmacy' sub-tab.

HOME	JOIN OUR NETWORKS	PROGRAMS/SERVICES	RESOURCES	
Medical	Dental	Pharmacy	Care Management	Wellness/Incentives
Electronic Capabilities	Dental Overview	Pharmacy Exception Requests	PCMH	Blue Rewards
Medical Policy	Dental Electronic Capabilities	Pharmacy Resources	PCMH News	
Pre-Cert/Pre-Auth (In-Network)	Dental NPI & Payer Codes	Pharmacy Prior Authorization	Quality & Affordability	
Pre-Cert/Pre-Auth (Out-of-Area)	Dental Clinical Criteria		Clinical Resources	
Medical Forms	Dental Forms		Profile Score	
Medical News	Dental News			
	Dental Seminar Video			
	Dental Wellness			

After selecting Pharmacy Prior Authorization you will be directed to the page below where you can locate the drug in question to view the Drug Criteria/Policy.

Pharmacy Prior Authorization\*

### Drug Prior Authorization

Prior authorization requests must be submitted electronically through the CareFirst Provider Portal for all drugs requiring prior authorization.

If you are already using the CareFirst Provider Portal, login at [www.carefirst.com/providerlogin](http://www.carefirst.com/providerlogin), and click on the Prior Auth/Notifications tab to begin your request. If you are not yet registered to use the Provider Portal, you can do so at [www.carefirst.com/carefirstdirect](http://www.carefirst.com/carefirstdirect).

#### Questions?

If you are experiencing technical difficulties with the Provider Portal, please contact the Provider Portal Help Desk at [877-526-8390](tel:877-526-8390).

For all other questions regarding the submission of your request, please contact:

- For [specially drugs](#): [888-877-0518](tel:888-877-0518)
- For non-specialty drugs: [855-582-2038](tel:855-582-2038)
- For [EEP drugs](#) requiring online prior authorization: [800-469-7556](tel:800-469-7556)

Jump To:

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5H1 Agonsit Post QL PA®

Back to Top

A
Abraxane®
Abstral®
Acamprosate Calcium (Exchange Only)

Drug Name	Drug Criteria
Abraxane®	<a href="#">Abraxane®</a> >
Abstral®	<a href="#">Abstral®</a> >
Acamprosate Calcium (Exchange Only)	<a href="#">Acamprosate Calcium (Exchange Only)</a> >

[See More](#)

Drug Name	Drug Criteria
Abraxane®	<a href="#">Abraxane®</a> >
Abstral®	<a href="#">Abstral®</a> >
Acamprosate Calcium (Exchange Only)	<a href="#">Acamprosate Calcium (Exchange Only)</a> >
Actemra IV®	<a href="#">Actemra IV® Policy</a> >
Actemra SQ®	<a href="#">Actemra SQ® Policy</a> >
Acthar®	<a href="#">Acthar® Policy</a> >
Actimmune®	<a href="#">Actimmune® Policy</a> >

## POLICY Document for Abraxane (paclitaxel, albumin-bound)

The overall objective of this policy is to support the appropriate and cost effective use of the medication. This document provides specific information to each section of the overall policy.

### Section 1: Clinical Criteria

- Policy information specific to the clinical appropriateness for the medication

### Section 2: Oncology Clinical Policy

- Policy information specific to regimen review per NCCN Guidelines.

## Section 1: Clinical Criteria

### SPECIALTY GUIDELINE MANAGEMENT

#### Abraxane (paclitaxel, albumin-bound)

### POLICY

#### I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed

# CAREFIRST UPDATES

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## Medications Added to Prior Authorization List and Site of Care Program – 2/1/20

Drugs Added to Prior Authorization: 2/1/20		Drugs Added to Site of Care: 2/1/20	
Drug Name	Drug Class	Drug Name	Drug Class
Crysvita**	Rare Disorders	Crysvita**	Rare Disorders
EVENTITY ***	Osteoporosis	Cuvitru*	Immune Deficiencies and Related Disorders
KANJINTI ***	Oncology	Exondys 51*	Muscular Dystrophy
Mvasi***	Oncology	Hizentra*	Immune Deficiencies and Related Disorders
Ogivri***	Oncology	MEPSEVII*	Lysosomal Disorders
Trivisc***	Osteoarthritis	ONPATTRO*	Amyloidosis
Ultomiris**	Paroxysmal Nocturnal Hemoglobinuria	Radicava*	Movement Disorders
		Ultomiris**	Paroxysmal Nocturnal Hemoglobinuria

## Medications Added to Prior Authorization List – 4/1/20

Drug name	HCPCS	Drug Class	Update
Arzerra	J9302	Oncology	New drug; PA added
Besponsa	J9229	Oncology	New drug; PA added
Blincyto	J9039	Oncology	New drug; PA added
Folotyn	J9307	Oncology	New drug; PA added
Imlygic	J9325	Oncology	New drug; PA added
Istodax	J9315	Oncology	New drug; PA added
Libtayo	J9119	Oncology	New drug; PA added
Lutathera	A9513	Oncology	New drug; PA added
Poteligeo	J9204	Oncology	New drug; PA added
Proleukin	J9015	Oncology	New drug; PA added
Sylvant	J2860	Oncology	New drug; PA added
Torisel	J9330	Oncology	New drug; PA added

Family of health care plans

## Specialty Drugs

(Effective February 1, 2020)

Specialty drugs are medications that may be used to treat rare health conditions and require special handling (such as refrigeration), administration or monitoring. Specialty drugs are typically covered for a one-month supply. CVS Specialty Pharmacy can ship specialty drugs to your home or to a retail CVS Pharmacy for you to pick up. The following is a list of specialty drugs that may be covered through either your prescription or medical plan; however other specialty drugs may also be covered. This list represents brand products in CAPS and generic products in lowercase italics. Contact CVS Specialty at 855-264-3237 for any questions about covered specialty drugs.

SPECIALTY DRUGS

<p><b>ACROMEGALY</b></p> <p>octreotide acetate (SANDOSTATIN) <b>Rx, MB, ES, PA, SI</b> SANDOSTATIN LAR <b>MB, mPA</b> LAR <b>† MB, mPA</b> SPOT <b>* MB, mPA</b></p>	<p><b>BATTEN DISEASE</b></p> <p>BRINEURA <b>† MB, mPA</b></p> <p><b>BOTULINUM TOXINS</b></p> <p>TOX <b>MB, mPA, NS</b> BOTOX <b>MB, mPA, NS</b></p>	<p><b>ELECTROLYTE DISORDERS</b></p> <p>CYSTADANE <b>† Rx</b> KEYVEYS <b>† Rx, PA</b> SAJISCA <b>* Rx, ES, PA</b> STRENSIQ <b>† Rx, MB, mPA</b> XLRIDEN <b>† Rx</b></p>
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<p><b>ASTHMA</b></p> <p>CINQAIR <b>* MB, mPA</b> DUPIXENT <b>Rx, ES, PA, SI</b> FASENRA <b>* MB, mPA</b> NUCALA <b>* Rx, MB, ES, mPA, PA, SI</b> XOLAIR <b>* MB, mPA</b></p> <p><b>ATOPIC DERMATITIS</b></p> <p>DUPIXENT <b>Rx, ES, PA, SI</b></p>	<p><b>DUCHENNE MUSCULAR DYSTROPHY</b></p> <p>EMFLAZA <b>† Rx, PA</b> EXONDYS 51 <b>† MB, mPA*</b> VYONDYS 53 <b>† MB</b></p> <p><b>DUPUYTREN'S CONTRACTURE</b></p> <p>XIAFLEX <b>† MB</b></p>	<p><b>BLEEDING DISORDERS</b></p> <p>ADVATE <b>MB, mPA</b> ADYNOVATE <b>MB, mPA</b> AF5TYLA <b>MB, mPA</b> ALPHANATE <b>MB, mPA</b> ALPHANINE 50 <b>MB, mPA</b> ALPROLIX <b>MB, mPA</b> BEBULIN <b>MB, mPA</b> BENEFIX <b>MB, mPA</b></p>
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<p><b>*</b> Indicates Limited Distribution products distributed by CVS Specialty.</p> <p><b>†</b> Indicates Limited Distribution products not distributed by CVS Specialty. Delivered through the CareFirst Exclusive Specialty Pharmacy network. Covered under medical benefit.</p> <p><b>MB</b> Prior authorization required for medical benefits coverage.</p> <p><b>mPA*</b> Prior authorization required for medical benefits coverage and subjected to site of care (outpatient hospital, physician's office, home infusion).</p>	<p><b>NS</b> Non-Specialty</p> <p><b>PA</b> Prior authorization required for prescription benefits coverage. Covered under prescription benefit.</p> <p><b>Rx, MB</b> <b>May be</b> covered under either prescription or medical benefits. Please consult your plan to determine coverage.</p> <p><b>SI</b> Self-injectable product.</p>
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# INSTITUTIONAL PROVIDER MANUAL

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From the Resources tab or Quick Links section click to view the Institutional Provider Manual.

The screenshot shows the CareFirst website interface. At the top, a navigation bar includes 'HOME', 'JOIN OUR NETWORKS', 'PROGRAMS/SERVICES', and 'RESOURCES'. A yellow callout box with a '1' points to the 'RESOURCES' tab. Below this, a sub-menu lists 'Administrative', 'Claims', 'Resources', and 'News/Training'. The 'Administrative' sub-menu is expanded, showing 'CareFirst Direct', 'Update Practice Info', 'Manuals & Guides' (with a yellow callout box and '2'), 'Forms', and 'Inquiries & Appeals'. The 'Manuals & Guides' section is further detailed with links to 'Professional Provider Manual', 'Institutional Provider Manual' (highlighted with a blue arrow), 'Dental Provider Manual', and 'Quick Reference Guides'. The main content area is titled 'Institutional Provider Manual' and contains the following text: 'The following information is for our Institutional Provider Community and Uniform Billers. To quickly access the information you need, click and print the individual section PDF. You can also download and print the [complete manual](#).' A yellow arrow points to the 'complete manual' link. Below this is a 'Note' regarding the Participation Agreement and a link to the 'Provider Quick Reference Guide'. A list of topics is provided: 'Institutional Credentialing', 'CareFirst Direct and CareFirst on Call', 'Inpatient Notification and Outpatient Prior Authorization', 'Timely Filing of Claims', 'How to Submit Claims with Denied Charges', 'Electronic Capabilities', and 'Special Claims Submission Information'. A photo of a doctor and a patient is shown on the right, with the text 'Provider Manual' and 'For our institutional provider community' below it.

## Members have a right to:

- Be treated with respect and recognition of their dignity and right to privacy
- Receive information about the health plan, its services, its practitioners and providers, and members' rights and responsibilities
- Participate with practitioners in making decisions regarding their health care
- Discuss appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage
- Make recommendations regarding the organization's members' rights and responsibilities policy
- Voice complaints or appeals about the their plan or the care provided

## Members have a responsibility to:

- Provide, to the extent possible, information that the health plan and its practitioners and providers need in order to care for them
- Understand their health problems, maximize healthy habits, and participate in developing mutually agreed upon treatment goals to the degree possible
- Follow the plans and instructions for care they have agreed on with their practitioners
- Pay member copayments or coinsurance at the time of service
- Be on time for appointments and to notify practitioners/providers when an appointment must be canceled

# PROVIDER QUICK REFERENCE GUIDES

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# Locating Quick Reference Guides

From Provider.CareFirst.com, click the Manuals & Guides link/Quick Reference Guides to view the Medical guides available.

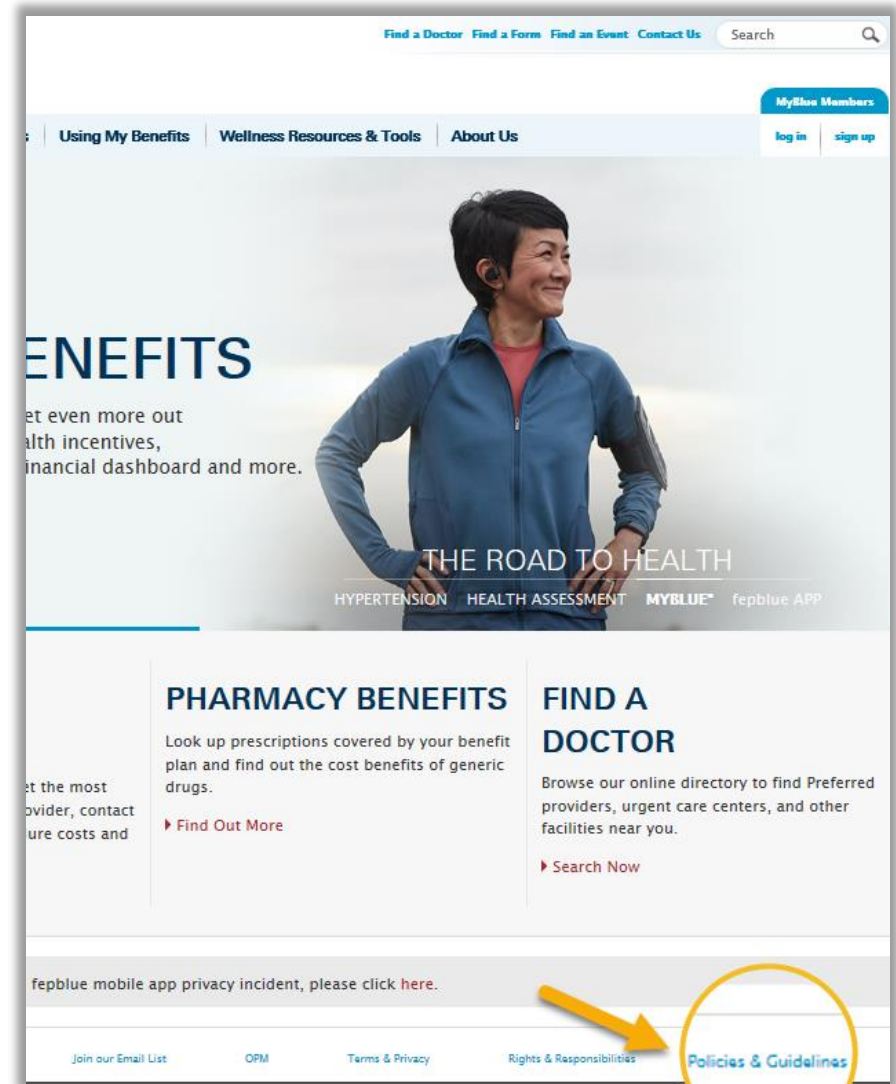
The screenshot displays the CareFirst website interface. At the top, the navigation bar includes links for 'Need Insurance?', 'Members', 'Employers', 'Brokers', 'Providers', and 'Community'. Below this, a secondary navigation bar lists 'HOME', 'JOIN OUR NETWORKS', 'PROGRAMS/SERVICES', and 'RESOURCES'. The main content area features a 'Login' section and a search bar. A large image of a doctor in blue scrubs is visible on the right side. The 'Quick Reference Guides' section is highlighted, showing a list of guides under the 'Medical' category. A yellow arrow points to the 'The Provider Quick Reference Guide' link. Another yellow arrow points to the 'Quick Reference Guides' link in the left-hand navigation menu. A third yellow arrow points to the 'Find Your Provider Rep' link in the 'Stay Connected' section.

# FEP MEDICAL POLICY

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# FEP Medical Policy

Log onto [FEPblue.org](https://FEPblue.org) to view Medical Policies for FEP, click on Policies and Guidelines



BlueCross BlueShield  
Federal Employee Program.

BlueNews Find a Doctor Find a Form Contact Us

Benefit Plans Wellness Resources & Tools Using My Benefits

MyBlue log in sign up

Benefit Plans Medical Policies & Utilization Management Guidelines

## MEDICAL POLICIES & UTILIZATION MANAGEMENT GUIDELINES

Medical Policies Utilization Management Guidelines

### MEDICAL POLICIES

Medical Policies

The policies contained in the FEP Medical Policy Manual are developed to assist in administering contractual benefits and do not constitute medical advice. They are not intended to replace or substitute for the independent medical judgment of a practitioner or other health care professional in the treatment of an individual member. The Blue Cross and Blue Shield Association does not intend by the FEP Medical Policy Manual, or by any particular medical policy, to recommend, advocate, encourage or discourage any particular medical technologies. Medical decisions relative to medical technologies are to be made strictly by members/patients in consultation with their health care providers. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that the Blue Cross and Blue Shield Service Benefit Plan covers (or pays for) this service or supply for a particular member.

I have read the above agreement and I agree.

About FEP\* Contact Us FAQs OPM Terms & Conditions

FEAA NARFE URAC NCOA NCOA

We are proud to support the Federal Employee Education & Assistance Fund (FEAA) and the National Active and Retired Federal Employees Association (NARFE).

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Federal Employee Program.

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Benefit Plans Medical Policies & Utilization Management Guidelines

## MEDICAL POLICIES & UTILIZATION MANAGEMENT GUIDELINES

Medical Policies Utilization Management Guidelines

### MEDICAL POLICIES

Medical Policies

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I have read the above agreement and I agree.

FEP 1.01.05 Ultrasound Accelerated Fracture Healing Device



## FEP Medical Policy Manual

### FEP 1.01.05 Ultrasound Accelerated Fracture Healing Device

**Effective Policy Date:** July 1, 2019

**Original Policy Date:** March 2012

**Related Policies:**

7.01.07 - Electrical Bone Growth Stimulation of the Appendicular Skeleton  
7.01.85 - Bone Morphogenetic Protein

## Ultrasound Accelerated Fracture Healing Device

### Description

Low-intensity pulsed ultrasound (LIPUS) has been investigated as a technique to accelerate healing of fresh fractures, surgically treated closed fractures, delayed unions, nonunions, stress fractures, osteotomy sites, and distraction osteogenesis. LIPUS is administered using a transducer applied to the skin surface overlying the fracture site.

### OBJECTIVE

The objective of this evidence review is to evaluate whether, compared with routine care without low-intensity pulsed ultrasound, low-intensity pulsed ultrasound improves the net health outcome when used as an adjunct to routine care to treat fractures (including fresh fractures, surgically treated closed fractures, delayed unions, nonunions, stress fractures, osteotomy sites, and distraction osteogenesis).

### POLICY STATEMENT

Low-intensity pulsed ultrasound may be considered **not medically necessary** as a treatment of fresh fractures (surgically managed or nonsurgically managed).

Low-intensity pulsed ultrasound may be considered **not medically necessary** as a treatment of fracture nonunion and delayed union fractures.

# FEP PHARMACY REQUIREMENTS AND BENEFIT BROCHURES

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Click the Brochures & Forms link for Service Benefit Plans for members. Hover over the Plan Brochures page or icon and click to view the version.

The image shows a composite of two screenshots from the BlueCross BlueShield Federal Employee Program (FEP) website. The top screenshot shows the main navigation menu with 'Benefit Plans' highlighted. A dropdown menu is open under 'Benefit Plans', listing various options. A yellow arrow points to the 'Plan Brochures & Forms' link. The bottom screenshot shows the 'BROCHURES & FORMS' page, which includes a sub-menu for 'PLAN BROCHURES' and a list of available brochures. The selected brochure is '2020 Blue Cross and Blue Shield Service Benefit Plan Brochure - Standard and Basic Options', with options to view it in English or Spanish, view an interactive version, or order a printed copy.

**BlueCross BlueShield**  
Federal Employee Program.

Find a Doctor Find a Form Find an Event Contact Us

Welcome to FEP **Benefit Plans** Using My Benefits Wellness Resources & Tools About Us

Benefit Plan: **Our Plans**

- Standard Option
- Basic Option
- FEP Blue Focus
- Compare Plans
- Try the AskBlue Plan Selection Tool
- Plan Brochures & Forms**
- Ways to Earn Incentives

**Coverage**

- Preventive Care
- Pharmacy
- Prescriptions
- Maternity
- Care Management
- Overseas

**Dental & Vision Coverage**

FEP BlueDental\*

**How to Enroll**

I'm Employed

**BROCHURES & FORMS**

Claim forms and brochures for Service Benefit Plan members.

Brochures **Forms**

**PLAN BROCHURES**

2020 Blue Cross and Blue Shield Service Benefit Plan Brochure - Standard and Basic Options

English  
Español

View Interactive Brochure  
Order a Printed Brochure

# FEP Pharmacy Requirements

Go to FEPBLUE.ORG then click the Pharmacy link to view the information.

The screenshot shows the BlueCross BlueShield Federal Employee Program website. The main navigation bar includes 'Welcome to FEP', 'Benefit Plans', 'Using My Benefits', 'Wellness Resources & Tools', and 'About Us'. The 'Benefit Plans' section is expanded, showing 'Our Plans' (Standard Option, Basic Option, FEP Blue Focus), 'Coverage' (Preventive Care, Pharmacy, Prescriptions, Maternity, Care Management, Overseas), and 'Dental & Vision Coverage' (FEP BlueDental\*, FEP BlueVision\*). A yellow arrow points from the 'Pharmacy' link in the 'Coverage' menu to the 'PHARMACY' page header.

The 'PHARMACY' page header states: 'Service Benefit Plan members can access a network of over 60,000 Preferred pharmacies nationwide. > Find a Pharmacy'. Below the header, there is a section for 'As a Blue Cross and Blue Shield Service Benefit Plan member, you have several options to obtain the prescription drugs you need. Contact us with questions, or review our list of FAQs.' followed by several program descriptions:

- Retail Pharmacy Program:** Basic Option members (without Medicare Part B primary coverage) and FEP Blue Focus members must use a Preferred retail pharmacy to obtain prescriptions. Standard Option members can use any Preferred or Non-preferred retail pharmacy. > Find Out More
- Mail Service Pharmacy Program:** The Mail Service Pharmacy Program (available to Basic Option members with Medicare Part B primary coverage and all Standard Option members) is a convenient way to get drugs you take regularly delivered to your home. > Find Out More
- Specialty Drug Pharmacy Program:** The Specialty Drug Pharmacy Program provides personalized pharmacy care and close monitoring of your specialty drugs to ensure you receive the support you need. > Find Out More
- Discount Drug Program:** The Discount Drug Program is available to members for specific drugs that are not covered under the regular prescription drug benefit. > Find Out More
- Formulary:** The formulary list is a list of drugs that are considered the preferred treatment for a patient's condition and that can be used as a guide for a doctor when prescribing drugs. > Find Out More
- Prior Approval:** For certain prescription drugs, the Service Benefit Plan Pharmacy Program must determine whether the drug is related to a service or condition that is covered under the Service Benefit Plan before benefits can be approved. > Find Out More
- Standard Option Generic Incentive Program:** Under Standard Option, your cost share may be waived for up to four generic prescription fills if you switch to a generic drug replacement from a brand name prescription. > Find Out More
- Patient-Centered Care (P-Care):** Patient-Centered Care is a complimentary medication-therapy management program available exclusively to Blue Cross and Blue Shield Service Benefit Plan members in which a clinical pharmacist works individually with members over the telephone. > Find Out More
- Patient Safety:** The Blue Cross and Blue Shield Service Benefit Plan has a special program to promote patient safety and monitor healthcare quality. The Patient Safety and Quality Monitoring (PSQM) program features a set of closely aligned programs that are designed to promote the safe and appropriate use of drugs. > Contact Us For More Information
- Value of Generics:** Switching your prescriptions to generic drugs can be a great way to save money.

A second yellow arrow points from the 'Prior Approval' section to the 'Formulary' section.

# CAREFIRST RECEIVES AWARD!

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CareFirst BlueCross BlueShield Among  
**'World's Most Ethical Companies'**  
for Eighth Consecutive Year

In compiling this year's list, Ethisphere scored nominees in five key categories, including:

- Ethics and compliance program;
- Corporate citizenship and responsibility;
- Culture, environmental and social practices;
- Governance; and,
- Leadership and reputation.



The full list of the 2020 "World's Most Ethical Companies" can be found at <https://worldsmoethicalcompanies.com/norees>.

Questions?

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**THANK YOU**

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*For more information, contact*

YOUR PROVIDER RELATIONS REPRESENTATIVE