

Medical Policies and Clinical Utilization Management Guidelines update

This communication applies to the Medicaid programs for Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA).

The *Medical Policies, Clinical Utilization Management (UM) Guidelines* and *Third-Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

Please share this notice with other members of your practice and office staff.

To view a guideline, visit https://medicalpolicy.simplyhealthcareplans.com/shp_search.html (Simply) or https://medicalpolicy.clearhealthalliance.com/cha_search.html (CHA).

Notes/updates:

Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive.

- ***CG-SURG-112 — Carpal Tunnel Decompression Surgery**
 - Outlines the Medically Necessary and Not Medically Necessary criteria for carpal tunnel decompression surgery
- ***CG-SURG-113 — Tonsillectomy with or without Adenoidectomy for Adults**
 - Outlines the *Medically Necessary* and *Not Medically Necessary* criteria
- ***LAB.00042 — Molecular Signature Test for Predicting Response to Tumor Necrosis Factor Inhibitor Therapy**
 - Molecular signature testing to predict response to Tumor Necrosis Factor inhibitor (TNFi) therapy is considered *Investigational & Not Medically Necessary* for all uses, including but not limited to guiding treatment for rheumatoid arthritis
- ***OR-PR.00007 — Microprocessor Controlled Knee-Ankle-Foot Orthosis**
 - Outlines the *Medically Necessary* and *Not Medically Necessary* criteria for the use of a microprocessor controlled knee-ankle-foot orthosis

Medical Policies

On August 12, 2021, the Medical Policy and Technology Assessment Committee (MPTAC) approved the following *Medical Policies* applicable to Simply and CHA. These guidelines take effect June 3, 2022.

| Publish date | Medical Policy # | Medical Policy title | New or revised |
|---------------------|-------------------------|---|-----------------------|
| 10/6/2021 | *LAB.00042 | Molecular Signature Test for Predicting Response to Tumor Necrosis Factor Inhibitor Therapy | New |
| 10/6/2021 | *OR-PR.00007 | Microprocessor Controlled Knee-Ankle-Foot Orthosis | New |
| 8/19/2021 | SURG.00119 | Endobronchial Valve Devices | Revised |

<https://provider.simplyhealthcareplans.com>

<https://provider.clearhealthalliance.com>

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Medicaid contract. Simply Healthcare Plans, Inc. dba Clear Health Alliance is a Managed Care Plan with a Florida Medicaid contract.

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Clinical UM Guidelines

On August 12, 2021, the MPTAC approved the following *Clinical UM Guidelines* applicable to Simply and CHA. These guidelines were adopted by the medical operations committee for our members on September 23, 2021. These guidelines take effect June 3, 2022.

| Publish date | <i>Clinical UM Guideline #</i> | <i>Clinical UM Guideline title</i> | New or revised |
|---------------------|---------------------------------------|--|-----------------------|
| 10/6/2021 | *CG-SURG-112 | Carpal Tunnel Decompression Surgery | New |
| 10/6/2021 | *CG-SURG-113 | Tonsillectomy with or without Adenoidectomy for Adults | New |
| 10/6/2021 | CG-DME-44 | Electric Tumor Treatment Field (TTF) | Revised |
| 8/19/2021 | CG-GENE-22 | Gene Expression Profiling for Managing Breast Cancer Treatment | Revised |
| 8/19/2021 | CG-MED-55 | Site of Care: Advanced Radiologic Imaging | Revised |
| 8/19/2021 | CG-SURG-82 | Bone-Anchored and Bone Conduction Hearing Aids | Revised |