

## Medical Policies

Policy Title	Summary	Products Affected	Effective Date
Artificial Pancreas Device Systems	Ad hoc review. <ul style="list-style-type: none"> <li>Retired policy.</li> </ul>	All products	1/1/2025
Assisted Reproductive Services	Ad hoc review. <ul style="list-style-type: none"> <li>Clarified 4<sup>th</sup> exclusion.</li> </ul>	All products	1/1/2025
Durable Medical Equipment	Ad hoc review. <ul style="list-style-type: none"> <li>Clarified exclusions.</li> </ul>	All products	1/1/2025
Epidural Steroid Injection	New policy.	All products	1/1/2025
Experimental and Investigational	Ad hoc review. <ul style="list-style-type: none"> <li>Updated code list</li> </ul>	All products	1/1/2025
HIV-Associated Lipodystrophy Syndrome	Annual review. <ul style="list-style-type: none"> <li>No changes.</li> </ul>	All products	1/1/2025
UVB Home Phototherapy for Skin Disease	Annual review. <ul style="list-style-type: none"> <li>Added MassHealth variation.</li> <li>Clarified Medicare variation.</li> </ul>	MassHealth ACO, Medicare Advantage	1/1/2025
Breast Surgeries	Annual review. <ul style="list-style-type: none"> <li>Added descriptions of InterQual customizations.</li> <li>Simplified description of InterQual customization under breast implant removal.</li> </ul>	All products	1/1/2025
Enteral Nutrition Formulas and Supplements	Ad hoc review. <ul style="list-style-type: none"> <li>Lowered age eligibility for Relizorb to 2 years from 5 years.</li> </ul>	All products	1/1/2025
Medically Necessary Services	New policy.	All products	1/1/2025
Phototherapy and Photochemotherapy	Annual Review. <ul style="list-style-type: none"> <li>Added MassHealth variation.</li> <li>Extended prior authorization window for UVB photochemotherapy and PUVA from 3 months to 16 weeks.</li> </ul>	All products	3/1/2025

	<ul style="list-style-type: none"> <li>• Relaxed criteria to allow for more frequent maintenance treatments when necessary.</li> <li>• Fixed typos in UVB photochemotherapy and PUVA criteria.</li> <li>• Added Pruritis to conditions that can be treated with UVB photochemotherapy.</li> </ul>		
<p>Pylarify and Gallium Ga-68 PSMA Imaging for Patients with Prostate Cancer</p>	<p>Ad hoc review.</p> <ul style="list-style-type: none"> <li>• Updated restaging/recurrent eligibility criteria per NCCN guidelines.</li> <li>• Clarified language in Medicare variation.</li> <li>• Added code disclaimer.</li> <li>• Updated codes.</li> <li>• Added criteria and code for Posluma.</li> <li>• Updated references.</li> <li>• Updated prior authorization table to reflect that MassHealth does not cover Posluma.</li> </ul>	All products	1/1/2025
<p>Reconstructive and Cosmetic Procedures</p>	<p>Annual review.</p> <ul style="list-style-type: none"> <li>• Added references to InterQual subsets and summaries of customized InterQual criteria.</li> <li>• Added code and criteria for Pectus Carinatum bracing.</li> <li>• Updated list of skin biopsies not requiring PA.</li> <li>• Removed liposuction for lipedema exclusion.</li> <li>• Added exclusion regarding scalp cooling to prevent hair loss.</li> <li>• References updated.</li> </ul>	All products	3/1/2025