

Medical Policy Updates Effective February 1, 2010

The MVP Quality Improvement Committee (QIC) approved the policies summarized below during the November and December meetings. Some of the benefit interpretation policies may reflect new technology while others clarify existing benefits. All policy updates are listed online in the Benefits Interpretation Manual (BIM). Visit MVP online at www.mvphealthcare.com. Providers can directly access the online BIM through the References section of the Provider portal. The “Current Updates” page in the BIM lists all policy updates. If you have questions regarding the policies or wish to obtain a paper copy of a policy, contact your Professional Relations representative.

Healthy Practices will continue to inform your office about new and updated policies. MVP encourages your office to look at all of the revisions and updates on a regular basis in the Benefit Interpretation Manual (BIM) located on www.mvphealthcare.com in the References section. The update section will list new policies and/or policy revisions at least 30 days prior to their effective date.

Policy Updates Effective February 1, 2010

The following list of policies was presented to the QIC at the November & December meetings. The policies were recommended for approval without changes. QIC approved the recommendation.

- **Cosmetic & Reproductive Surgery**
- **Enteral Therapy for NY**
- **Genetic Counseling & Testing**
- **Ventricular Assist Device (Left)**
- **Ventricular Reduction Surgery**
- **Vision Therapy (Orthoptics, Eye Exercises)**

Policy Revisions

Botulinum Toxin Treatment

- The policy has been updated to include coverage for Dysport™.
- The only FDA indication for DYSPORE™ is for cervical dystonia.
- In the Indications/Criteria section under the heading Urologic a second bullet point was added indicating “detrusor-sphincter dyssynergia (urinary sphincter spasm with bladder contractions following spinal cord injury)”

Cochlear Implants & Osseointegrated Devices

- Policy criteria have been more clearly defined for both single and bilateral bone anchored hearing aids and cochlear implants for children and adults.
- The policy follows the American Speech and Language Hearing Association Guidelines, the FDA device approvals for cochlear implants and BAHA hearing devices and Medicare criteria.

Erectile Dysfunction

- Previously the Erectile Dysfunction policy addressed drugs, vacuum devices, and penile implants. Due to the NYS Mandate regarding Sex Offenders it was felt to avoid confusion with the prior authorization requirements that the policy needed to be splint into two separate policies. (See Penile Implants for Erectile Dysfunction).
- No criteria changes were made to the Erectile Dysfunction policy.

Lenses for Medical Conditions of the Eye

- There were no changes to the policy criteria.
- Redundant language was removed in order to make the policy more user friendly for providers and staff.

MRI Upright, Standing & Positional (New)

- There is insufficient evidence in peer reviewed literature that upright, standing or positional MRI results in proven beneficial outcomes that are superior to conventional recumbent MRI or Open MRI.
- Upright, Standing and Positional MRI is considered not Medically Necessary for all conditions.

Neuropsychological Testing

- Language has been clarified regarding what is expected prior to neuropsychological testing.
- A thorough behavioral health assessment and neurological evaluation must be completed and documented in the medical record.
- If neuropsychological testing is being requested to differentiate depression from organic brain dysfunction, a behavioral health specialist should be contacted prior to testing.
- The specialties of Psychiatrist and Psychiatriist were added to the list of practitioners who may request the test.

Penile Implants for Erectile Dysfunction (New)

- See the Erectile Dysfunction policy description above.
- This policy was created to avoid confusion regarding different prior authorization requirements for Erectile Dysfunction vs. Penile Implants for Erectile Dysfunction.

Pet Scan Whole Body

- The policy follows InterQual criteria and has been updated to reflect changes in Medicare coverage.
- A Medicare Variation was added to include a coverage summary with two categories for initial treatment strategy and subsequent treatment strategy.

Please refer to the coding section on the policies to identify any code changes (e.g., new, deleted) or codes no longer requiring prior authorization for a specific policy.
