



Clinical Utilization Management Guidelines

Highmark Blue Cross Blue Shield (Highmark BCBS) partners with Wellpoint companies to administer certain services to Medicaid Managed Care (MMC), Health and Recovery Plan (HARP), and Child Health Plus (CHPlus) members. Please note, this information is specific to the MMC, HARP, and CHPlus programs only.

Attached is a list of the *Clinical Utilization Management (UM)* Guidelines Highmark BCBSWNY has adopted.

The full list of *Medical Policies* and *Clinical UM Guidelines* are publicly available on the [Medical Policy and Clinical UM Guideline subsidiary website](#). Their purpose is to help you provide quality care by reducing inappropriate use of medical resources.

MCG Care Guidelines are used for:

- Medical necessity review for medical and behavioral health inpatient review.
- Inpatient site of service appropriateness.
- Inpatient rehabilitation and skilled nursing facility review.
- Outpatient based service or procedure where there is not an established *Medical Policy* or *Clinical UM Guideline*.

In addition, Level of Care for Alcohol and Drug Treatment Referral 3.0[®] is used for substance abuse services according to state requirements.

Medicaid state contracts, regulatory guidance, CMS requirements and our *Medical Policy/Clinical UM Guidelines* supersede MCG Care Guidelines.

Note: We make determinations of medical necessity on a case-by-case basis in accordance with the definition of medical necessity that is contained within the Medicaid state contract, regulatory guidance, CMS requirements or in our *Medical Necessity Criteria Policy ADMIN.0004*.

If the request does not meet established criteria guidelines, it will be referred to the licensed physician reviewer with the appropriate clinical expertise to make a decision.

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Wellpoint Partnership Plan, LLC provides management services for Highmark Blue Cross Blue Shield's managed Medicaid.

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The *Clinical Utilization Management Guidelines (CUMG)* below, that are indicated as *new*, were adopted by the Medical Operations Committee for Highmark BCBS members on September 28, 2023.

To view a guideline, visit <https://providerpublic.mybcbswny.com/western-new-york-provider/medical-policies-and-clinical-guidelines>.

| CUMG number | CUMG title | New item |
|--------------------|---|-----------------|
| CG-ADMIN-01 | Clinical Utilization Management (UM) Guideline for Pre-Payment Review Medical Necessity Determinations When No Other Clinical UM Guideline Exists | |
| CG-ANC-03 | Acupuncture | |
| CG-ANC-04 | Ambulance Services: Air and Water | |
| CG-ANC-05 | Ambulance Services: Ground; Emergent | |
| CG-ANC-06 | Ambulance Services: Ground; Nonemergent | |
| CG-ANC-07 | Inpatient Interfacility Transfers | |
| CG-ANC-08 | Mobile Device-Based Health Management Applications | |
| CG-BEH-02 | Adaptive Behavioral Treatment | |
| CG-DME-03 | Neuromuscular Stimulation in the Treatment of Muscle Atrophy | |
| CG-DME-04 | Electrical Nerve Stimulation, Transcutaneous, Percutaneous | |
| CG-DME-05 | Cervical Traction Devices for Home Use | |
| CG-DME-06 | Compression Devices for Lymphedema | |
| CG-DME-07 | Augmentative and Alternative Communication (AAC) Devices with Digitized or Synthesized Speech Output | |
| CG-DME-08 | Infant Home Apnea Monitors | |
| CG-DME-09 | Continuous Local Delivery of Analgesia to Operative Sites using an Elastomeric Infusion Pump During the Postoperative Period | |
| CG-DME-10 | Durable Medical Equipment | |
| CG-DME-12 | Home Phototherapy Devices for Neonatal Hyperbilirubinemia | |
| CG-DME-13 | Lower Limb Prosthesis | |
| CG-DME-15 | Hospital Beds and Accessories | |
| CG-DME-16 | Pressure Reducing Support Systems Groups 1, 2 and 3 | |

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| CUMG number | CUMG title | New item |
|--------------------|---|-----------------|
| CG-DME-18 | Home Oxygen Therapy | |
| CG-DME-19 | Therapeutic Shoes, Inserts or Modifications for Individuals with Diabetes | |
| CG-DME-20 | Orthopedic Footwear | |
| CG-DME-21 | External Infusion Pumps for the Administration of Drugs in the Home or Residential Care Settings | |
| CG-DME-22 | Ankle-Foot & Knee-Ankle-Foot Orthoses | |
| CG-DME-23 | Lifting Devices for Use in the Home | |
| CG-DME-24 | Wheeled Mobility Devices: Manual Wheelchairs — Standard, Heavy Duty and Lightweight | |
| CG-DME-25 | Seat Lift Mechanisms | |
| CG-DME-26 | Back-Up Ventilators in the Home Setting | |
| CG-DME-30 | Prothrombin Time Self-Monitoring Devices | |
| CG-DME-31 | Powered Wheeled Mobility Devices | |
| CG-DME-33 | Wheeled Mobility Devices: Manual Wheelchairs — Ultra Lightweight | |
| CG-DME-34 | Wheeled Mobility Devices: Wheelchair Accessories | |
| CG-DME-35 | Electric Breast Pumps | |
| CG-DME-36 | Pediatric Gait Trainers | |
| CG-DME-37 | Air Conduction Hearing Aids | |
| CG-DME-39 | Dynamic Low-Load Prolonged-Duration Stretch Devices | |
| CG-DME-40 | Noninvasive Electrical Bone Growth Stimulation of the Appendicular Skeleton | |
| CG-DME-41 | Ultraviolet Light Therapy Delivery Devices for Home Use | |
| CG-DME-42 | Nonimplantable Insulin Infusion and Blood Glucose Monitoring Devices | |
| CG-DME-43 | High Frequency Chest Compression Devices for Airway Clearance | |
| CG-DME-44 | Electric Tumor Treatment Field (TTF) | |
| CG-DME-45 | Ultrasound Bone Growth Stimulation | |
| CG-DME-46 | Pneumatic Compression Devices for Prevention of Deep Vein Thrombosis of the Extremities in the Home Setting | |
| CG-DME-47 | Noninvasive Home Ventilator Therapy for Respiratory Failure | |
| CG-DME-48 | Vacuum Assisted Wound Therapy in the Outpatient Setting | |
| CG-DME-49 | Standing Frames | |
| CG-GENE-04 | Molecular Marker Evaluation of Thyroid Nodules | |
| CG-GENE-10 | Chromosomal Microarray Analysis (CMA) for Developmental Delay, Autism Spectrum Disorder, Intellectual Disability (Intellectual Developmental Disorder) and Congenital Anomalies | |

| CUMG number | CUMG title | New item |
|--------------------|---|-----------------|
| CG-GENE-11 | Genotype Testing for Individual Genetic Polymorphisms to Determine Drug-Metabolizer Status | |
| CG-GENE-13 | Genetic Testing for Inherited Diseases | |
| CG-GENE-14 | Gene Mutation Testing for Solid Tumor Cancer Susceptibility and Management | |
| CG-GENE-15 | Genetic Testing for Lynch Syndrome, Familial Adenomatous Polyposis (FAP), Attenuated FAP and MYH-associated Polyposis | |
| CG-GENE-16 | BRCA Testing for Breast and/or Ovarian Cancer Syndrome | |
| CG-GENE-18 | Genetic Testing for TP53 Mutations | |
| CG-GENE-19 | Detection and Quantification of Tumor DNA Using Next Generation Sequencing in Lymphoid Cancers | |
| CG-GENE-21 | Cell-Free Fetal DNA-Based Prenatal Testing | |
| CG-GENE-22 | Gene Expression Profiling for Managing Breast Cancer Treatment | |
| CG-LAB-03 | Tropism Testing for HIV Management | |
| CG-LAB-09 | Drug Testing or Screening in the Context of Substance Use Disorder and Chronic Pain | |
| CG-LAB-10 | Zika Virus Testing | |
| CG-LAB-11 | Screening for Vitamin D Deficiency in Average Risk Individuals | |
| CG-LAB-12 | Testing for Oral and Esophageal Cancer | |
| CG-LAB-13 | Skin Nerve Fiber Density Testing | |
| CG-LAB-14 | Respiratory Viral Panel Testing in the Outpatient Setting | |
| CG-LAB-15 | Red Blood Cell Folic Acid Testing | |
| CG-LAB-16 | Serum Amylase Testing | |
| CG-LAB-17 | Molecular Gastrointestinal Pathogen Panel (GI PP) Testing for Infectious Diarrhea in the Outpatient Setting | |
| CG-LAB-19 | Laboratory Evaluation of Vitamin B12 | |
| CG-LAB-20 | Thyroid Testing | |
| CG-LAB-21 | Serum Iron Testing | |
| CG-LAB-22 | Nucleic Acid Amplification Tests Using Algorithmic Analysis for the Diagnosis of Bacterial Vaginosis | |
| CG-LAB-24 | Outpatient Urine Culture | |
| CG-LAB-25 | Outpatient Glycated Hemoglobin and Protein Testing | |
| CG-LAB-26 | Outpatient Alpha-Fetoprotein Testing | |
| CG-LAB-27 | Human Chorionic Gonadotropin Testing | |
| CG-LAB-28 | Prostate Specific Antigen Testing | |
| CG-LAB-29 | Gamma Glutamyl Transferase Testing | |
| CG-LAB-30 | Outpatient Laboratory-based Blood Glucose Testing | |
| CG-MED-02 | Esophageal pH Monitoring | |
| CG-MED-05 | Ketogenic Diet for Treatment of Intractable Seizures | |
| CG-MED-08 | Home Enteral Nutrition | |

| CUMG number | CUMG title | New item |
|--------------------|---|-----------------|
| CG-MED-19 | Custodial Care | |
| CG-MED-21 | Anesthesia Services and Moderate ("Conscious") Sedation | |
| CG-MED-23 | Home Health | |
| CG-MED-24 | Electromyography and Nerve Conduction Studies | |
| CG-MED-26 | Neonatal Levels of Care | |
| CG-MED-28 | Iontophoresis | |
| CG-MED-34 | Monitored Anesthesia Care for Gastrointestinal Endoscopic Procedures | |
| CG-MED-35 | Retinal Telescreening Systems | |
| CG-MED-37 | Intensive Programs for Pediatric Feeding Disorders | |
| CG-MED-38 | Inpatient admission for Radiation Therapy for Cervical or Thyroid Cancer | |
| CG-MED-39 | Bone Mineral Density Testing Measurement | |
| CG-MED-40 | External Ambulatory Event Monitors to Detect Cardiac Arrhythmias | |
| CG-MED-41 | Moderate to Deep Anesthesia Services for Dental Surgery in the Facility Setting | |
| CG-MED-42 | Maternity Ultrasound in the Outpatient Setting | |
| CG-MED-45 | Transrectal Ultrasonography | |
| CG-MED-46 | Electroencephalography and Video Electroencephalographic Monitoring | |
| CG-MED-47 | Fundus Photography | |
| CG-MED-48 | Scrotal Ultrasound | |
| CG-MED-49 | Auditory Brainstem Responses (ABRs) and Evoked Otoacoustic Emissions (OAEs) for Hearing Disorders | |
| CG-MED-50 | Visual, Somatosensory and Motor Evoked Potentials | |
| CG-MED-51 | Three-Dimensional (3-D) Rendering of Imaging Studies | |
| CG-MED-52 | Allergy Immunotherapy (Subcutaneous) | |
| CG-MED-53 | Cervical Cancer Screening Using Cytology and Human Papillomavirus Testing | |
| CG-MED-54 | Strapping | |
| CG-MED-55 | Site of Care: Advanced Radiologic Imaging | |
| CG-MED-56 | Non-Obstetrical Transvaginal Ultrasonography | |
| CG-MED-57 | Cardiac Stress Testing with Electrocardiogram | |
| CG-MED-59 | Upper Gastrointestinal Endoscopy in Adults | |
| CG-MED-61 | Preoperative Testing for Low-Risk Invasive Procedures and Surgeries | |
| CG-MED-62 | Resting Electrocardiogram Screening in Adults | |
| CG-MED-64 | Transcatheter Ablation of Arrhythmogenic Foci in the Pulmonary Veins | |
| CG-MED-65 | Manipulation Under Anesthesia | |

| CUMG number | CUMG title | New item |
|--------------------|--|-----------------|
| CG-MED-66 | Cryopreservation of Oocytes or Ovarian Tissue | |
| CG-MED-68 | Therapeutic Apheresis | |
| CG-MED-69 | Inhaled Nitric Oxide | |
| CG-MED-70 | Wireless Capsule Endoscopy for Gastrointestinal Image and the Patency Capsule | |
| CG-MED-71 | Chronic Wound Care in the Home or Outpatient Setting | |
| CG-MED-72 | Hyperthermia for Cancer Therapy | |
| CG-MED-73 | Hyperbaric Oxygen Therapy (Systemic/Topical) | |
| CG-MED-74 | Implantable Ambulatory Event Monitors and Mobile Cardiac Telemetry | |
| CG-MED-76 | Magnetic Source Imaging and Magnetoencephalography | |
| CG-MED-78 | Anesthesia Services for Interventional Pain Management Procedures | |
| CG-MED-79 | Diaphragmatic/Phrenic Nerve Stimulation and Diaphragm Pacing Systems | |
| CG-MED-81 | High Intensity Focused Ultrasound (HIFU) for Oncologic Indications | |
| CG-MED-83 | Site of Care: Specialty Pharmaceuticals | |
| CG-MED-84 | Non-Obstetric Gynecologic Duplex Ultrasonography of the Abdomen and Pelvis in the Outpatient Setting | |
| CG-MED-85 | Posterior Segment Optical Coherence Tomography | |
| CG-MED-86 | Enhanced External Counterpulsation in the Outpatient Setting | |
| CG-MED-88 | Preimplantation Genetic Diagnosis Testing | |
| CG-MED-89 | Home Parenteral Nutrition | |
| CG-MED-90 | Chelation Therapy | |
| CG-MED-91 | Remote Therapeutic and Physiologic Monitoring Services | |
| CG-MED-92 | Foot Care Services | |
| CG-MED-93 | Navigational Bronchoscopy | |
| CG-MED-95 | Transanal Irrigation | New |
| CG-OR-PR-02 | Prefabricated and Prophylactic Knee Braces | |
| CG-OR-PR-03 | Custom-made Knee Braces | |
| CG-OR-PR-04 | Cranial Remodeling Bands and Helmets (Cranial Orthotics) | |
| CG-OR-PR-05 | Myoelectric Upper Extremity Prosthesis Devices | |
| CG-OR-PR-06 | Spinal Orthoses: Thoracic-Lumber-Sacral (TLSO), Lumbar-Sacral (LSO), and Lumber | |
| CG-OR-PR-08 | Microprocessor Controlled Lower Limb Prosthesis | New |
| CG-OR-PR-09 | Microprocessor Controlled Knee-Ankle-Foot Orthosis | New |
| CG-REHAB-02 | Outpatient Cardiac Rehabilitation | |
| CG-REHAB-03 | Pulmonary Rehabilitation | |
| CG-REHAB-07 | Skilled Nursing and Skilled Rehabilitation Services (Outpatient) | |
| CG-REHAB-08 | Private Duty Nursing in the Home Setting | |

| CUMG number | CUMG title | New item |
|--------------------|--|-----------------|
| CG-REHAB-10 | Level of Care: Outpatient Physical Therapy, Occupational Therapy and Speech-Language Pathology Services | |
| CG-REHAB-12 | Rehabilitative and Habilitative Services in the Home Setting: Physical Medicine/Physical Therapy, Occupational Therapy and Speech-Language Pathology | |
| CG-SURG-01 | Colonoscopy | |
| CG-SURG-03 | Blepharoplasty, Blepharoptosis Repair and Brow Lift | |
| CG-SURG-05 | Maze Procedure | |
| CG-SURG-07 | Vertical Expandable Prosthetic Titanium Rib | |
| CG-SURG-08 | Sacral Nerve Stimulation as a Treatment of Neurogenic Bladder Secondary to Spinal Cord Injury | |
| CG-SURG-09 | Temporomandibular Disorders | |
| CG-SURG-10 | Ambulatory or Outpatient Surgery Center Procedures | |
| CG-SURG-11 | Surgical Treatment for Dupuytren's Contracture | |
| CG-SURG-12 | Penile Prosthesis Implantation | |
| CG-SURG-15 | Endometrial Ablation | |
| CG-SURG-17 | Trigger Point Injections | |
| CG-SURG-18 | Septoplasty | |
| CG-SURG-24 | Functional Endoscopic Sinus Surgery (FESS) | |
| CG-SURG-25 | Injection Treatment for Morton's Neuroma | |
| CG-SURG-28 | Transcatheter Uterine Artery Embolization | |
| CG-SURG-29 | Lumbar Discography | |
| CG-SURG-30 | Tonsillectomy for Children with or without Adenoidectomy | |
| CG-SURG-31 | Treatment of Keloids and Scar Revision | |
| CG-SURG-34 | Diagnostic Infertility Surgery | |
| CG-SURG-35 | Intracytoplasmic Sperm Injection (ICSI) | |
| CG-SURG-36 | Adenoidectomy | |
| CG-SURG-37 | Destruction of Pre-Malignant Skin Lesions | |
| CG-SURG-40 | Cataract Removal Surgery for Adults | |
| CG-SURG-41 | Surgical Strabismus Correction | |
| CG-SURG-46 | Myringotomy and Tympanostomy Tube Insertion | |
| CG-SURG-49 | Endovascular Techniques (Percutaneous or Open Exposure) for Arterial Revascularization of the Lower Extremities | |
| CG-SURG-50 | Assistant Surgeons | |
| CG-SURG-51 | Outpatient Cystourethroscopy | |
| CG-SURG-52 | Site of Care: Hospital-Based Ambulatory Surgical Procedures and Endoscopic Services | |
| CG-SURG-55 | Cardiac Electrophysiological Studies (EPS) and Catheter Ablation | |
| CG-SURG-56 | Diagnostic Fiberoptic Flexible Laryngoscopy | |
| CG-SURG-57 | Diagnostic Nasal Endoscopy | |

| CUMG number | CUMG title | New item |
|--------------------|--|-----------------|
| CG-SURG-58 | Radioactive Seed Localization of Nonpalpable Breast Lesions | |
| CG-SURG-59 | Vena Cava Filters | |
| CG-SURG-61 | Cryosurgical or Radiofrequency Ablation to Treat Solid Tumors Outside the Liver | |
| CG-SURG-63 | Cardiac Resynchronization Therapy with or without an Implantable Cardioverter Defibrillator for the Treatment of Heart Failure | |
| CG-SURG-70 | Gastric Electrical Stimulation | |
| CG-SURG-71 | Reduction Mammoplasty | |
| CG-SURG-72 | Endothelial Keratoplasty | |
| CG-SURG-73 | Balloon Sinus Ostial Dilation | |
| CG-SURG-75 | Transanal Endoscopic Microsurgical (TEM) Excision of Rectal Lesions | |
| CG-SURG-76 | Carotid, Vertebral and Intracranial Artery Stent Placement with or without Angioplasty | |
| CG-SURG-77 | Refractive Surgery | |
| CG-SURG-78 | Locoregional and Surgical Techniques for Treating Primary and Metastatic Liver Malignancies | |
| CG-SURG-79 | Implantable Infusion Pumps | |
| CG-SURG-81 | Cochlear Implants and Auditory Brainstem Implants | |
| CG-SURG-82 | Bone-Anchored and Bone Conduction Hearing Aids | |
| CG-SURG-83 | Bariatric Surgery and Other Treatments for Clinically Severe Obesity | |
| CG-SURG-84 | Mandibular/Maxillary (Orthognathic) Surgery | |
| CG-SURG-86 | Endovascular/Endoluminal Repair of Aortic Aneurysms, Aortoiliac Disease, Aortic Dissection and Aortic Transection | |
| CG-SURG-87 | Nasal Surgery for the Treatment of Obstructive Sleep Apnea and Snoring | |
| CG-SURG-88 | Mastectomy for Gynecomastia | |
| CG-SURG-89 | Radiofrequency Neurolysis and Pulsed Radiofrequency Therapy for Trigeminal Neuralgia | |
| CG-SURG-90 | Mohs Micrographic Surgery | |
| CG-SURG-91 | Minimally Invasive Ablative Procedures for Epilepsy | |
| CG-SURG-92 | Paraesophageal Hernia Repair | |
| CG-SURG-93 | Angiographic Evaluation and Endovascular Intervention for Dialysis Access Circuit Dysfunction | |
| CG-SURG-94 | Keratoprosthesis | |
| CG-SURG-95 | Sacral Nerve Stimulation and Percutaneous Tibial Nerve Stimulation for Urinary and Fecal Incontinence; Urinary Retention | |
| CG-SURG-96 | Intraocular Telescope | |

| CUMG number | CUMG title | New item |
|--------------------|---|-----------------|
| CG-SURG-97 | Cardioverter Defibrillators | |
| CG-SURG-98 | Prostate Biopsy using MRI Fusion Techniques | |
| CG-SURG-99 | Panniculectomy and Abdominoplasty | |
| CG-SURG-100 | Laser Trabeculoplasty and Laser Peripheral Iridotomy | |
| CG-SURG-101 | Ablative Techniques as a Treatment for Barrett's Esophagus | |
| CG-SURG-102 | Alcohol Septal Ablation for Treatment of Hypertrophic Cardiomyopathy | |
| CG-SURG-103 | Penile Circumcision | |
| CG-SURG-104 | Intraoperative Neurophysiological Monitoring | |
| CG-SURG-105 | Corneal Collagen Cross-Linking | |
| CG-SURG-106 | Venous Angioplasty with or without Stent Placement or Venous Stenting Alone | |
| CG-SURG-108 | Stereotactic Radiofrequency Pallidotomy | |
| CG-SURG-111 | Open Sacroiliac Joint Fusion | |
| CG-SURG-112 | Carpal Tunnel Decompression Surgery | |
| CG-SURG-113 | Tonsillectomy with or without Adenoidectomy for Adults | |
| CG-SURG-114 | Ophthalmic use of Nd: YAG Laser for Posterior Capsulotomy | |
| CG-SURG-115 | Mechanical Embolectomy for Treatment of Stroke | |
| CG-SURG-116 | Surgical Treatment of Hyperhidrosis | |
| CG-SURG-117 | Balloon Dilation of the Eustachian Tubes | |
| CG-THER-RAD-07 | Intravascular Brachytherapy (Coronary and Non-Coronary) | |
| CG-TRANS-02 | Kidney Transplantation | |
| CG-TRANS-03 | Donor Lymphocyte Infusion for Hematologic Malignancies after Allogeneic Hematopoietic Progenitor Cell Transplantation | |



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