

Notification of Policy Revisions Effective May 21, 2012 (Posted June 1, 2012)

Medical Policy	Revision
Dermabrasion	One criteria obtained from LCD added under Indications for Coverage- "Correction of defects resulting from traumatic injury, surgery or disease" Added LCD L31784 to the reference section
Observation Services	Under Indications for Coverage- modified initial criteria to be consistent with LCD language. Criteria previously stated- "The patient is clinically unstable for discharge" Criteria now states- The patient arrives at the facility with an unstable medical condition (generally via the Emergency Department)
Orthognathic Surgery	Under Indications for Coverage-Removed language under section D.1-"Difficulty swallowing and/or choking, or ability to chew only soft or liquid foods" because it is not a Medicare indication. Added language to provide guidance of coverage when the surgery is performed to correct airway dysfunction.
Psychological Evaluations Covered as a Medical Benefit	No criteria changes to the policy
Temporomandibular Joint Surgery	No criteria changes to the policy
Vagus Nerve Stimulator (VNS) for Epilepsy	Added a description of the procedure obtained from a CMS LCD No changes to the criteria

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<p>Oxygen and Oxygen Supplements</p>	<p>Indications for Coverage section</p> <ul style="list-style-type: none"> • Added "...for member with significant hypoxemia..." to Group I Blood gas reference. • Inserted criteria for Group III blood gas criteria • Inserted language to note the change in coverage of oxygen therapy for the treatment of cluster headaches. CMS covers oxygen for this treatment when member is enrolled in a CMS approved clinical trial. • Revised travel coverage with new subtitle "Relocation and Travel section and added language to reflect CMS coverage process. • New section and criteria for coverage added- Polysomnography and Home Sleep Tests. <p>When Coverage Will Not Be Approved- Added the following:</p> <ul style="list-style-type: none"> • Group III blood gas • Treatment of cluster headaches after January 4, 2011 • Purchased oxygen • Oxygen services furnished by an airline <p>Special Notes</p> <ul style="list-style-type: none"> • Added language- For initial coverage, the blood gas study must be the most recent study obtained within 30 days prior to the date the physician signed the orders. • For chronic use, deleted the following language to ensure the policy is consistent with the LCD- "After the initial 36-month rental period has expired, the oxygen equipment converts to purchase. " • Added language to support process of not requiring the submission of qualifying oxygen saturation for newly enrolled members who previously received oxygen approval from Original Medicare or a Medicare Advantage plan. • Added a statement on reasonable useful lifetime (RUL) which is consistent with the LCD. • Added language for what is required when the oxygen study is obtained during exercise.