

## Medical Policy Update

We develop and revise medical policies in response to changing medical technology. Benefit determinations are made based on the medical policy in effect at the time of the provision of services. Please review the following medical policies, all of which can be found on our Blue Advantage Resource Page at [www.lablue.com/providers](http://www.lablue.com/providers), click "Go to BA Resources" at the bottom of the screen, then the "New/Revised Medicare Advantage Medical Policies" tab.

### New Medical Policies

Effective June 1, 2026

Policy No.	Policy Name
MA-208	Corneal Collagen Cross-linking
MA-209	Pharmacotherapy for Pompe Disease

Effective July 1, 2026

MA-210	Total Artificial Hearts and Percutaneous Ventricular Assist Devices
MA-211	Amniotic Membrane and Amniotic Fluid
MA-212	Bioengineered Skin and Soft Tissue Substitutes
MA-213	Tocilizumab intravenous Products
MA-214	Bevacizumab Products
MA-215	Nasal Swell Body Ablation Reduction in the Treatment of NasalObstruction
MA-216	Wireless Capsule for the Evaluation of Suspected Gastric and IntestinalMotility Disorders
MA-217	Surgical Treatment of Snoring and Obstructive Sleep Apnea Syndrome

Effective Aug. 1, 2026

MA-219	Rituximab Products
MA-220	Laser Interstitial Thermal Therapy for Neurological Conditions
MA-221	Vein Embolization as a Treatment for Pelvic Congestion Syndrome and Varicocele
MA-222	Occipital Nerve Stimulators

### Revised Medical Policies

Effective Aug. 1, 2026

Policy No.	Policy Name
MA-116	Laboratory Testing Investigational Services