

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, click "Go to BA Resources" at the bottom of the screen, and then the "New/Revised Medicare Advantage Medical Policies" tab.

New Medical Policies

Effective Aug. 1, 2025

<u>Policy No.</u>	<u>Policy Name</u>
112	marstacimab-hncq (Hypmavzi™)
113	concizumab-mtci (Alhemo®)
114	afamitresgene autoleucel (Tecelra®)
115	Topical Pain Patches
116	Laboratory Testing Investigational Services
118	Myoelectric Prosthetic and Orthotic Components for the Upper Limb
119	Functional Endoscopic Sinus Surgery for Chronic Rhinosinusitis

Effective Sept. 1, 2025

121	fosdenopterin (Nulibry™)
117	Irreversible Electroporation and Histotripsy
120	Category III CPT Codes
122	Injectable Bulking Agents for the Treatment of Urinary and Fecal Incontinence
123	Gender Affirming Surgery

Revised Medical Policies

Effective Aug. 1, 2025

010	Peroral Endoscopic Myotomy for Treatment of Esophageal Achalasia and Gastroparesis
022	Cardiac Computed Tomography (CCT) and Coronary Computed Tomography Angiography (CCTA)