



**To:** IPA Administrators, Medical Directors, BH Providers  
**From:** IEHP – Provider Relations  
**Date:** August 27, 2021  
**Subject:** **UM Authorization Guidelines Updates - Revised/Retired/Reviewed with No Changes**

IEHP’s Utilization Management Subcommittee has approved the following authorization guideline updates/changes, effective **August 11, 2021:**

Guideline #	Guideline Title	Degree of Change	Updates/Changes
UM_OTH 13	Transitional Care Medicine (TCM)	Revised Minor	<ul style="list-style-type: none"> <li>Reference checked and updated.</li> </ul>
UM_SUR 06	Natural Orifice Transluminal Endoscopic Surgery	Revised Substantial	<ul style="list-style-type: none"> <li>Minimal access surgery in which endoscope is introduced through an orifice. Considered investigational and experimental</li> <li>Medicare now covers transoral incisionless fundoplication (TIF) only for               <ul style="list-style-type: none"> <li>chronic (&gt;6 mos) symptomatic GERD not responsive to PPIs</li> <li>GERD symptoms affecting the Member’s quality of life (using GERD HRQL questionnaire and scoring)</li> <li>with hiatal hernia ≤ 2 cm</li> </ul> </li> <li>For Medi-Cal and all other indications for Medicare, NOTES continues to be investigational and experimental (not covered)</li> </ul>
UM_OTH 21	Chimeric Antigen Receptor T Cell (CAR-T) Therapy	Revised Substantial	<ul style="list-style-type: none"> <li>Updated coverage to include:               <ul style="list-style-type: none"> <li>Breyanzi® (lisocabtagene maraleucel) indicated for the treatment of adult patients with relapsed or refractory (R/R) large B-cell lymphoma after two or more lines of systematic therapy, Abecma® (idecabtagene vicleucel) indicated for the treatment of adult patients with R/R multiple myeloma after four or more prior lines of therapy</li> </ul> </li> </ul>

UM_OTH 20	Spravato (esketamine)	Revised Substantial	<ul style="list-style-type: none"> <li>• HCPCS codes for prolonged office visits required for monitoring after Spravato administration.</li> <li>• Verification of approval of a request for Spravato.</li> </ul>
UM_BH 06	Criteria for Multidisciplinary Diagnostic Treatment	Revised Substantial	<ul style="list-style-type: none"> <li>• Clarifies the elements of a comprehensive diagnostic evaluation (CDE) conducted by a multidisciplinary team</li> <li>• Clarifies the elements of a psychological diagnostic evaluation (PDE) conducted by a psychologist</li> <li>• Clarifies the criteria used to determine whether a Member requires a less complex diagnostic evaluation (PDE) or a more complex diagnostic evaluation (CDE)</li> </ul>
UM_PA1 05	Pain Management Center of Excellence	Revised Minor	<ul style="list-style-type: none"> <li>• Establishes criteria necessary for referral to a multidisciplinary program at a Pain Management Center of Excellence specializing in the treatment of chronic, non-malignant pain</li> <li>• Retaining our current UM Subcommittee Guideline for both Medicare and Medi-Cal lines of business</li> </ul>
UM_NEU 02	Genicular Nerve Neurotomy	Retired	<ul style="list-style-type: none"> <li>• IEHP's UM Subcommittee Genicular Nerve Neurotomy guideline considers this treatment for pain due to Osteoarthritis of the knee joint to be experimental and investigational, and therefore not approvable</li> <li>• Apollo Guideline SM330 is similar to current UM Subcommittee Guideline.</li> <li>• Retired current UM Subcommittee Guideline and replaced with Apollo's SM330 Genicular Nerve Procedures for Knee Pain for both Medicare and Medi-Cal lines of business</li> </ul>
UM_SUR 10	Bronchial Thermoplasty	No Change	<ul style="list-style-type: none"> <li>• Reviewed with no changes</li> </ul>

You may access these and all other authorization guidelines through IEHP Provider Portal at:

[www.iehp.org](http://www.iehp.org) > For Providers > Provider Resources > Utilization Management Criteria

As a reminder, all communications sent by IEHP can also be found on the Provider Portal at:

[www.iehp.org](http://www.iehp.org) > For Providers > Plan Updates > Correspondence

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054 or (866) 223-4347.