

## March 2020 UnitedHealthcare Network Bulletin Articles & The Empire Plan

The following articles are included in the March 2020 issue of UnitedHealthcare's *Network Bulletin*. The table below denotes which articles apply to The Empire Plan and/or our Empire Plan Network providers. To access *Network Bulletin*, sign on to UHCprovider.com and select "News and Network Bulletin" in the "Resource Library" section (or select News and Network Bulletin in Quick Links at the bottom of the home page). Be sure to read the applicable articles and direct any questions you may have regarding Empire Plan impact to your Empire Plan network representative.

[UHCprovider.com](#) → [MENU](#) → [Resource Library](#) → [News and Network Bulletin](#) → [Network Bulletin](#) → [March 2020 Network Bulletin](#)

Network Bulletin: Article Topic	Applies to The Empire Plan?
<b>Front &amp; Center</b>	
Electronic Payment Solutions Rolling Out in 2020	YES
Your Area of Expertise	YES
Additions to Cancer Therapy Pathways	No
Update to 2019–2021 Credentialing Plan	YES
Region One VA CCN Urgent Care Benefit	No
Prior Authorization and Notification Requirement Updates	No
Avella to Provide Infertility Medications	No
New Look Coming Soon to UHCCareConnect	Informational
Pharmacy Update	No
Specialty Medical Injectable Drug Program Updates	YES
<a href="#">UnitedHealthcare Commercial Medical Policy Update Bulletin: March 2020</a>	See Specific Policy
<b>MEDICAL POLICY</b>	
Abnormal Uterine Bleeding and Uterine Fibroids Revised Apr. 1, 2020	YES
Attended Polysomnography for Evaluation of Sleep Disorders Revised Apr. 1, 2020	No
Bariatric Surgery Revised May 1, 2020	YES
Cardiac Event Monitoring Updated Apr. 1, 2020	YES
Continuous Glucose Monitoring and Insulin Delivery for Managing Diabetes Revised Apr. 1, 2020	YES
Cytological Examination of Breast Fluids for Cancer Screening or Diagnosis Updated Apr. 1, 2020	YES
Elbow Replacement Surgery (Arthroplasty) Updated Apr. 1, 2020	No
Electrical and Ultrasound Bone Growth Stimulators Updated Apr. 1, 2020	YES
Electroencephalographic (EEG) Monitoring and Video Recording Revised Apr. 1, 2020	No
Hip Resurfacing and Replacement Surgery (Arthroplasty) Revised Apr. 1, 2020	No
Hysterectomy for Benign Conditions Revised Apr. 1, 2020	No
Implanted Electrical Stimulator for Spinal Cord Updated Apr. 1, 2020	No
Knee Replacement Surgery (Arthroplasty), Total and Partial Revised Apr. 1, 2020	No
Lower Extremity Vascular Angiography Revised Apr. 1, 2020	No
Obstructive Sleep Apnea Treatment Updated Apr. 1, 2020	YES
Pneumatic Compression Devices Updated Apr. 1, 2020	YES
Prolotherapy and Platelet Rich Plasma Therapies Updated Apr. 1, 2020	YES
Shoulder Replacement Surgery (Arthroplasty) Updated Apr. 1, 2020	No
Surgical Treatment for Spine Pain Revised Apr. 1, 2020	YES
Temporomandibular Joint Disorders Updated Apr. 1, 2020	YES
<b>MEDICAL BENEFIT DRUG POLICY</b>	
Botulinum Toxins A and B Revised Apr. 1, 2020	YES
Denosumab (Prolia® & Xgeva®) Updated Mar. 1, 2020	YES
Exondys 51® (Eteplirsen) Revised Apr. 1, 2020	YES
Intravenous Iron Replacement Therapy (Feraheme® & Injectafer®) New Apr. 1, 2020	YES
Ketalar (Ketamine) and Spravato™ (Esketamine) Revised Apr. 1, 2020	YES
Oncology Medication Clinical Coverage Revised Apr. 1, 2020	YES
Rituximab (Rituxan®, Ruxience™, & Truxima®) Revised Apr. 1, 2020	YES
Vyondys 53™ (Golodirsen) New Apr. 1, 2020	YES
<b>COVERAGE DETERMINATION GUIDELINE (CDG)</b>	
Blepharoplasty, Blepharoptosis, and Brow Ptosis Repair Updated Apr. 1, 2020	YES
Gynecomastia Treatment Updated Apr. 1, 2020	YES
Habilitative Services and Outpatient Rehabilitation Therapy Updated Apr. 1, 2020	YES
Orthognathic (Jaw) Surgery Updated Apr. 1, 2020	YES

Network Bulletin: Article Topic	Applies to The Empire Plan?
Panniculectomy and Body Contouring Procedures Updated Apr. 1, 2020	YES
Rhinoplasty and Other Nasal Surgeries Updated Apr. 1, 2020	YES
<b>UTILIZATION REVIEW GUIDELINE (URG)</b>	
Chemotherapy Observation or Inpatient Hospitalization Revised Apr. 1, 2020	No
Provider Administered Drugs – Site of Care Revised May 1, 2020	No
<i>Oxford Policy Update Bulletin</i>	No
<i>UnitedHealthcare West Benefit Interpretation Policy Update Bulletin</i>	No
<i>UnitedHealthcare West Medical Management Guideline Update Bulletin</i>	No
<i>Community Plan Medical Policy Update Bulletin</i>	No
<i>Medicare Advantage Coverage Summary Update Bulletin</i>	No
<i>Medicare Advantage Policy Guideline Update Bulletin</i>	No
<i>Dental Policy Update Bulletin</i>	No
<b>UnitedHealthcare Commercial</b>	
Appeal Overturns to Be Notified by PRA	No
Specialty Pharmacy Update — Markets Out of Scope	No
Prescription Drug List Updates	No
<i>UnitedHealthcare Commercial Reimbursement Policy Updates</i>	<i>See Specific Policy</i>
Reminder: Clinical Laboratory Improvement Amendments (CLIA) ID Requirement Policy, Professional Effective Aug. 1, 2016	YES
Revised Policy: Physical Medicine and Rehabilitation — Speech Therapy, Professional Effective Feb. 24, 2020	YES
<b>UnitedHealthcare Community Plan ~This section does not apply to The Empire Plan~</b>	
<b>UnitedHealthcare Medicare Advantage ~This section does not apply to The Empire Plan~</b>	
<b>UnitedHealthcare Affiliates</b>	
New Member ID Cards for UnitedHealthcare Oxford Commercial Plans	No
Prior Authorization and Site of Service Reviews	No