Managed Care Operations Memorandum
Technology Assessment Group
MCOPS Memo # 03/2018-004

DATE: March 16, 2018

SUBJECT: Technology Assessment Group (TAG) Coverage Decisions

TO: Physical Health HealthChoices Managed Care Organizations (PH-MCOs) – Statewide

FROM: Laurie Rock, Director, Bureau of Managed Care Operations, Office of Medical Assistance Programs

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Purpose:

To provide PH-MCOs coverage updates on new technologies as discussed in regular TAG meetings.

Background:

The TAG workgroup meets quarterly on the 2nd Friday of February, May, August and November to discuss issues revolving around new technologies and technologies or services that were previously considered to be a program exception. During this meeting, decisions are made as to whether or not certain technologies will be covered and how they will be covered. TAG's decisions are as follows:

- Option # 1:   Approved - Will be added to the Fee Schedule
- Option # 2:   Approved as Medically Effective- will require Program Exception
- Option # 3:   Approved with (or denied due to) Limited/Minimal Evidence of Effectiveness-will require Program Exception
- Option # 4:   Denied- Experimental/Investigational

Discussion:

Below are the updated list of codes/descriptions discussed at the TAG Meeting and the decisions that were made:

HCPCS/CPT Code	Description	Decision
64999	NeuroStim System (NSS-2) Bridge Electro Auricular Device and Electro Acupuncture Device for Opioid Withdrawal	Option # 4

19294	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with partial mastectomy (List separately in addition to code for primary procedure)	Option # 4
32994	Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, including imaging guidance when performed, unilateral; cryoablation	Option # 4

This memo is not intended to replace any existing Prior Authorization Review Processes currently being utilized; it is for informational/internal purposes only.

Next Steps:

N/A

Obsolete:

N/A

Attachment:

N/A