

Upcoming Policies for Review

These policies are currently scheduled for review. We invite your feedback.

We encourage you to <u>email us</u> any comments or suggestions you may have related to a particular policy or policies on this list.

Please submit your feedback by May 3, 2025

| Policy # | Policy Title |
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| 1.01.27 | Electrical and Electromagnetic Stimulation for the Treatment of Arthritis |
| 1.01.30 | Artificial Pancreas Device Systems |
| 1.01.506 | Adjustable Cranial Orthoses for Positional Plagiocephaly and Craniosynostoses |
| 1.01.525 | Postsurgical Outpatient Use of Limb Compression Devices for Venous Thromboembolism Prophylaxis |
| 1.01.538 | Cooling Devices Used in the Outpatient Setting |
| 1.03.04 | Powered Exoskeleton for Ambulation in Patients with Lower Limb Disabilities |
| 1.04.502 | Myoelectric Prosthetic and Orthotic Components for the Upper Limb |
| 1.04.503 | Microprocessor-Controlled and Powered Prostheses and Orthoses for the Lower Limb |
| 5.01.42 | Gene Therapies for Thalassemia |
| 5.01.574 | Pharmacotherapy of Spinal Muscular Atrophy (SMA) |
| 5.01.595 | Injectable Clostridial Collagenase for Fibroproliferative Disorders |
| 5.01.640 | Pharmacologic Treatment of Sickle Cell Disease |
| 7.01.587 | Open and Thoracoscopic Approaches to Treat Atrial Fibrillation and Atrial Flutter (Maze and Related Procedures) |
| 8.03.01 | Functional Neuromuscular Electrical Stimulation |