

# UnitedHealthcare Community Plan of North Carolina Medical Policy Update Bulletin Quick View: May 2025



A list of recently approved, revised, and/or retired Medical Policies is provided below for your reference. For a comprehensive summary of the latest updates, refer to the Medical Policy Update Bulletin: May 2025.

## **Medical Policy Updates**

Policy Title	Status	Effective Date
Continuous Glucose Monitoring and Insulin Delivery for Managing Diabetes (for North Carolina Only)	Updated	May 1, 2025
Embolization of the Ovarian and Iliac Veins for Pelvic Congestion Syndrome	Updated	Jul. 1, 2025
Facet Joint and Medial Branch Block Injections for Spinal Pain (for North Carolina Only)	Updated	May 1, 2025
Home Hemodialysis (for North Carolina Only)	Updated	May 1, 2025
Lower Extremity Prosthetics (for North Carolina Only)	Updated	May 1, 2025
Mobility Devices, Options, and Accessories (for North Carolina Only)	Replaced	May 1, 2025
Orthognathic (Jaw) Surgery	Updated	May 1, 2025
Patient Lifts (for North Carolina Only)	Retired	May 1, 2025
Prostate Surgeries and Interventions (for North Carolina Only)	Revised	Jul. 1, 2025
Speech Generating Devices (for North Carolina Only)	Replaced	May 1, 2025
Transcatheter Procedures for Heart Valve Conditions	Revised	Jul. 1, 2025
Walkers (for North Carolina Only)	Updated	Jul. 1, 2025

### **General Information**

The inclusion of a health service (e.g., test, drug, device, or procedure) in this bulletin indicates only that UnitedHealthcare is adopting a new policy and/or updated, revised, replaced, or retired an existing policy; it does not imply that UnitedHealthcare provides coverage for the health service. Note that most benefit plan documents exclude from benefit coverage health services identified as investigational or unproven/not medically necessary. Physicians and other health care professionals may not seek or collect payment from a member for services not covered by the applicable benefit plan unless first obtaining the member's written consent, acknowledging that the service is not covered by the benefit plan and that they will be billed directly for the service.

**Note**: The absence of a policy does not automatically indicate or imply coverage. As always, coverage for a health service must be determined in accordance with the member's benefit plan and any applicable federal or state regulatory requirements. Additionally, UnitedHealthcare reserves the right to review the clinical evidence supporting the safety and effectiveness of a medical technology prior to rendering a coverage determination.

UnitedHealthcare respects the expertise of the physicians, health care professionals, and their staff who participate in our network. Our goal is to support you and your patients in making the most informed decisions regarding the choice of quality and cost-effective care, and to support practice staff with a simple and predictable administrative experience. The Medical Policy Update Bulletin was developed to share important information regarding changes to our Community Plan of North Carolina Medical Policies. When information in this bulletin conflicts with applicable state and/or federal law, UnitedHealthcare follows such applicable federal and/or state law.

#### **Policy Update Classifications** *New*

New clinical coverage criteria have been adopted for a health service (e.g., test, drug, device, or procedure)

#### Updated

An existing policy has been reviewed and changes have not been made to the clinical coverage criteria; however, items such as the clinical evidence, FDA information, and/or list(s) of applicable codes may have been updated

#### Revised

An existing policy has been reviewed and revisions have been made to the clinical coverage criteria

#### Replaced

An existing policy has been replaced with a new or different policy

#### Retired

The health service(s) addressed in the policy are no longer being managed or are considered to be proven/medically necessary and are therefore not excluded as unproven/not medically necessary services, unless coverage guidelines or criteria are otherwise documented in another policy



The complete library of UnitedHealthcare Community Plan of North Carolina Medical Policies is available at **UHCprovider.com/NC** > Community Plan (Medicaid) > Current Policies and Clinical Guidelines > Medical Policies.