



Trillium Medicaid Clinical Policies Update

Effective December 1, 2024, Trillium Community Health Plan will be retiring the following Medicaid clinical policies. You can find all active Medicaid clinical policies on our [Policies & Criteria webpage](#). (Note: After December 1, the below policies will no longer be posted on our website.)

Thank you for your partnership in helping our members stay healthy. If you have any questions, please contact your Provider Engagement Representative.

Policy Number	Policy Title	Justification
CP.MP.92	Acupuncture	OHA Guideline ACUPUNCTURE is being applied.
CP.MP.26	Articular Cartilage Defect Repairs	Codes reviewed by NIA, NIA has own criteria.
CP.MP.37	Bariatric Surgery	OHA Guideline BARIATRIC SURGERY is being applied.
CP.MP.93	Bone-Anchored Hearing Aid	OHA Guideline BONE ANCHORED HEARING AIDS is being applied.
CP.MP.203	Diaphragmatic/Phrenic Nerve Stimulation	OHA Guideline PHRENIC NERVE STIMULATION is being applied.
CP.MP.114	Disc Decompression Procedures	OHA Guideline SURGICAL INTERVENTIONS FOR CONDITIONS OF THE BACK AND SPINE OTHER THAN SCOLIOSIS is being applied.
CP.MP.115	Discography	Codes fall under INTERVENTIONS THAT ARE UNPROVEN per OHA
CP.MP.50	Drugs of Abuse: Definitive Testing	OHA Guideline DIAGNOSTIC GUIDELINE D23, URINE DRUG TESTING is being applied.
CP.MP.137	Fecal Incontinence Treatments	OHA Guideline FECAL INCONTINENCE is being applied.
CP.MP.40	Gastric Electrical Stimulation	OHA Guideline GASTRIC ELECTRICAL STIMULATION is being applied.
CP.MP.209	Gastrointestinal Pathogen Nucleic Acid Detection Panel Testing	Codes do not require pre authorization currently.

Policy Number	Policy Title	Justification
CP.MP.132	Heart-Lung Transplant	OHA Guideline SOLID ORGAN TRANSPLANTS is being applied.
CP.MP.184	Home Ventilators	OAR 410-122-0210 Ventilators is being applied.
CP.MP.62	Hyperhidrosis Treatments	OHA Guideline HIDRADENITIS SUPPURATIVA is being applied.
CP.MP.58	Intestinal and Multivisceral Transplant	OHA Guideline SOLID ORGAN TRANSPLANTS is being applied.
CP.MP.71	Long Term Care Placement	LTC placement is managed through the state, not CCO.
CP.MP.24	Multiple Sleep Latency Testing	OHA Guideline DIAGNOSTIC TESTING FOR OBSTRUCTIVE SLEEP APNEA (OSA) is being applied.
CP.MP.48	Neuromuscular and Peroneal Nerve Electrical Stimulation (NMES)	OAR 410-122-0515 Neuromuscular Electrical Stimulator (NMES) is being applied.
CP.MP.194	Osteogenic Stimulation	OAR 410-122-0510 Osteogenesis Stimulator is being applied.
CP.MP.120	Pediatric Liver Transplant	OHA Guideline SOLID ORGAN TRANSPLANTS is being applied.
CP.MP.49	Physical, Occupational, and Speech Therapy Services	OHA Guideline REHABILITATIVE AND HABILITATIVE THERAPIES is being applied.
CP.MP.51	Reduction Mammoplasty and Gynecomastia Surgery	OHA Guideline BREAST REDUCTION SURGERY FOR SYMPTOMATIC MACROMASTIA is being applied.
CP.MP.210	Repair of Nasal Valve Compromise	OHA Guideline SINUS SURGERY, SEPTOPLASTY, or RHINOPLASTY is being applied.
CP.MP.126	Sacroiliac Joint Fusion	OHA Guidelines SACROILIAC JOINT INJECTIONS AND SACROILIAC JOINT FUSION are being applied.

Policy Number	Policy Title	Justification
CP.MP.166	Sacroiliac Joint Interventions for Pain Management	OHA Guidelines SACROILIAC JOINT INJECTIONS AND SACROILIAC JOINT FUSION are being applied.
CP.MP.146	Sclerotherapy and Chemical Endovenous Ablation for Varicose Veins and Other Symptomatic Venous Disorders	OHA Guideline TREATMENT OF CHRONIC LOWER EXTREMITY VENOUS DISEASE is being applied.
CP.MP.165	Selective Nerve Root Blocks and Transforaminal Epidural Steroid Injections	Codes fall under line 173 UNPROVEN or BELOW THE FUNDING LINE per OHA.
CP.MP.185	Skin and Soft Tissue Substitutes for Chronic Wounds	OHA Guidelines SKIN SUBSTITUTES FOR CHRONIC SKIN ULCERS and TREATMENT OF CHRONIC LOWER EXTREMITY VENOUS DISEASE are being applied.
CP.MP.117	Spinal Cord, Peripheral Nerve, and Percutaneous Electrical Nerve Stimulation	OHA Guideline SPINAL CORD STIMULATOR THERAPY is being applied.
CP.MP.22	Stereotactic Body Radiation Therapy	OHA Guideline PATIENT-CENTERED CARE OF ADVANCED CANCER and OR.CP.MP.501 Applying National Comprehensive Cancer Network Guidelines are being applied.
CP.MP.162	Tandem Transplant	OHA Guideline SOLID ORGAN TRANSPLANTS is being applied.
CP.MP.127	Total Artificial Heart	Codes do not require pre authorization currently.
CP.MP.163	Total Parenteral Nutrition and Intradialytic Parenteral Nutrition	OHA Division 148 HOME ENTERAL/PARENTERAL NUTRITION AND IV SERVICES Rulebook is being applied.
CP.MP.169	Trigger Point Injections for Pain Management	Codes fall under line 173 UNPROVEN or BELOW THE FUNDING LINE per OHA.
CP.MP.99	Wheelchair Seating	OAR 410-122-0340 Wheelchair Options/Accessories is being applied.