

Transplant Overview by Prior Authorization Approval or Denial 1st Quarter 2024

LOB	Date Approval/Disapproval	Provider Specialty	Procedure	Diagnosis	Approval	Criteria
ВС	1/10/2024	Transplant	Lung	COPD	Yes	Medical Policy
ВС	1/10/2024	Transplant	Lung	COPD	Yes	Medical Policy
ВС	1/11/2024	Transplant	Autologous	Hodgkin Lymphoma	Yes	Medical Policy
ВС	1/11/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	1/18/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	1/24/2024	Transplant	Liver	Alcohol Liver Cirrhosis	Yes	Medical Policy
ВС	1/26/2024	Transplant	Allogeneic	Acute Lympocytic Leukemia	Yes	Medical Policy
ВС	1/29/2024	Transplant	Allogeneic	Myelodysplastic Syndrome	Yes	Medical Policy
ВС	1/30/2024	Transplant	Liver	Alcohol Liver Cirrhosis	Yes	Medical Policy
ВС	2/1/2024	Transplant	Liver	Cirrhosis	Yes	Medical Policy
ВС	2/1/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	2/12/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	2/12/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	2/19/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	2/19/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	2/19/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	2/20/2024	Transplant	Heart	Dilated Cardiomyopathy, Cardiogenic Shock	Yes	Medical Policy
ВС	2/22/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	2/22/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	2/23/2024	Transplant	Heart	Congestive Heart Failure	Yes	Medical Policy
ВС	2/26/2024	Transplant	Pancreas/Kidney	End Stage Renal Disease, Type 1 Diabetes	Yes	Medical Policy
ВС	3/1/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	3/1/2024	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy