



Transplant Overview by Prior Authorization Approval or Denial 2nd Quarter 2020

LOB	Date Approval/Disapproval	Provider Specialty	Procedure	Diagnosis	Approval	Criteria
BC	5/21/2020	Transplant	Lung	COPD--Severe Emphysema	Yes	Medical Policy
BC	6/3/2020	Transplant	Autologous	Multiple Myeloma	Yes	Medical Policy
BC	6/9/2020	Transplant	Liver	Cirrhosis secondary to NASH	Yes	Medical Policy
BC	6/12/2020	Transplant	Allogeneic	T Cell Lymphoblastic Leukemia	Yes	Medical Policy
BC	6/15/2020	Transplant	Allogeneic	Acute Myeloid Leukemia	Yes	Medical Policy
BC	6/16/2020	Transplant	Liver	Heptocellular Carcinoma/HCV/Cirrhosis	Yes	Medical Policy
BC	6/18/2020	Transplant	Liver	Cirrhosis/NASH	Yes	Medical Policy
BC	6/22/2020	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
BC	6/22/2020	Transplant	Allogeneic	Acute Myeloid Leukemia	Yes	Medical Policy
BC	6/29/2020	Transplant	CAR-T Therapy	Follicular Lymphoma transformed to DLBCL	Yes	Medical Policy
BC	6/30/2020	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
BC	5/8/2020	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy
BC	5/8/2020	Transplant	Tandem Autologous	Multiple Myeloma	Yes	Medical Policy