

Transplant Overview by Prior Authorization Approval or Denial 2nd Quarter 2024

LOB	Date Approval/Disapproval	Provider Specialty	Procedure	Diagnosis	Approval	Criteria
ВС	5/6/2024	Transplant	Allogeneic	Relapsed B-ALL	Yes	Medical Policy
ВС	5/9/2024	Transplant	Kidney	Chronic Kidney Disease	Yes	Medical Policy
ВС	5/10/2024	Transplant	Liver	Alcoholic Liver Cirrhosis	Yes	Medical Policy
ВС	5/13/2024	Transplant	CAR-T	Relapsed Multiple Myeloma	Yes	Medical Policy
ВС	5/14/2024	Transplant	Allogeneic	Refractory Acute Mylogenic Leukemia	Yes	Medical Policy
ВС	5/23/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	5/24/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	5/28/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	5/28/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	6/5/2024	Transplant	CAR-T	High-grade B-cell Lymphoma	Yes	Medical Policy
ВС	6/6/2024	Transplant	Kidney	Chronic Kidney Disease	Yes	Medical Policy
ВС	6/7/2024	Transplant	Allogeneic	Acute Myeloid Leukemia	Yes	Medical Policy
ВС	6/12/2024	Transplant	CAR-T	Multiple Myeloma	Yes	Medical Policy
ВС	6/12/2024	Transplant	CAR-T Therapy	Multiple Myeloma	Yes	Medical Policy
ВС	6/18/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy
ВС	6/19/2024	Transplant	CAR-T	Relapsed Multiple Myeloma	Yes	Medical Policy
ВС	6/25/2024	Transplant	Autologous	Multiple Myeloma	Yes	Medical Policy
ВС	6/28/2024	Transplant	Kidney	End Stage Renal Disease	Yes	Medical Policy