MedStar Health, Inc.
POLICY AND PROCEDURE MANUAL

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PA.096.MH – Esophagogastroduodenoscopy

This policy applies to the following lines of business:
- ✓ MedStar Employee (Select)
- ✓ MedStar CareFirst PPO

MedStar Health considers an **Esophagogastroduodenoscopy (EGD)** medically necessary for the following indications:

<u>For a repeat endoscopy within 12 months, one of the following must be true:</u>

1. Patient has new or recurrent alarm symptoms:
   - o Dysphagia or odynophagia
   - o bleeding
   - o persistent vomiting of unknown cause

Or

2. Patient has one of the following esophageal diagnoses and any one of the following conditions:
   a. Barrett's Esophagus (BE) with or without esophageal dysplasia:
      - After a diagnosis of BE, one repeat endoscopy may be performed in six months. Following that, surveillance should be at three to five year intervals.
      - After biopsy confirmed low grade dysplasia (LGD), one repeat EGD may be performed in six months. Following that, annual surveillance EGD with biopsies is recommended.
      - After biopsy confirmed high grade esophageal dysplasia (HGD) in patients not immediately treated, unfit or unwilling to undergo ablative or operative therapy, endoscopic surveillance with biopsies may be considered every three months for the first year, every six months the following year, and annually thereafter.

   Or

   b. Previous endoscopy showed severe erosive esophagitis. Patient has documented compliance with eight weeks of a Proton Pump Inhibitors (PPI) therapy. One repeat endoscopy is to assess extent of healing of esophagitis and determine if dysplasia is present which may have been masked by the acute inflammation.

i. In absence of BE, repeat endoscopy after this initial follow-up examination is not indicated

Or

c. Patient has known esophageal stricture and symptoms suggest recurrence in need of dilation.

Or

d. Patient has esophageal cancer:
   - Endoscopic evaluation, including endoscopic ultrasound or endoscopic fine needle aspiration (FNA) can be used for staging a newly diagnosed esophageal cancer, or restaging after neoadjuvant chemoradiation.
   - Endoscopic provision of curative or palliative treatment of esophageal cancer or high grade dysplasia.

Or

e. Patient has esophageal varices.

Or

3. Patient has one of the following gastric or ulcer diagnoses and one of the following conditions:
   a. H. pylori associated MALT lymphoma, treated with antibiotics, for purposes of re-biopsy to evaluate response, every one to three months until a histologic complete response and then every six months for two years.

   Or

   b. Selected esophageal, gastric, or stomal ulcers if patient remains symptomatic despite an appropriate course of medical therapy or patient with gastric ulcer without clear etiology who did not undergo biopsy at the index EGD unless healing has been demonstrated.

   Or

   c. One repeat EGD at six months for follow-up in patients with FAP only in cases where gastric adenomas or adenomas of the duodenum were demonstrated.

Or

4. One repeat EGD/ endoscopic ultrasound can be performed by a different provider for purposes of obtaining a second opinion.

Repeat endoscopic ultrasounds for any medical reason other than the indications listed in the policy will be evaluated on a case by case basis.

Limitations

1. Only one EGD will be covered in a 12 month period without prior authorization. Repeat EGD within 12 months requires prior authorization.
2. Repeat EGD is not indicated and not covered for any of the following conditions:
   a. Surveillance of malignancy in members with gastric atrophy, pernicious anemia, treated achalasia, or prior gastric operation

b. Surveillance of healed benign disease such as esophagitis, gastric or duodenal ulcer
c. Surveillance during chronic repeated dilations of benign strictures unless there is a change in status

Background

Endoscopic examinations may be used to evaluate symptoms, identify anatomic abnormalities, to obtain biopsies, or are employed for therapeutic reasons. Most often the procedure is performed by a fiberoptic endoscope (including video endoscopy), a flexible tube containing light transmitting glass fibers that return a magnified image directly or by video.

An Esophagogastroduodenescopy (EGD) is an endoscopic test that examines the lining of the esophagus, stomach and first part of the small intestine for the diagnosis and/or treatment of a variety of GI diseases.

Codes:

CPT Codes	
Code	Description
43191	Esophagosocpy, rigid, transoral; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)
43192	with directed submucosal injection (s), any substance
43193	with biopsy, single or multiple
43194	with removal of foreign body
43195	with balloon dilation (less than 30 mm diameter)
43196	with insertion of guide wire followed by dilation over guide wire
43197	Esophagoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)
43198	with biopsy, single or multiple
43200	Esophagoscopy, flexible, transoral, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
43201	with directed submucosal injection (s), any substance
43202	with biopsy, single or multiple`

43204	with injection sclerosis of esophageal varices
43205	with band ligation of esophageal varices
43206	with optical endomicroscopy
43215	with removal of foreign body
43216	with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
43217	with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
43211	with endoscopic mucosal resection
43212	with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
43213	with dilation of esophagus, by balloon or dilator, retrograde (includes fluoroscopic guidance, when performed)
43214	with dilation of esophagus, with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)
43226	with insertion of guide wire followed by passage of dilator(s) over guide wire
43231	with endoscopic ultrasound examination
43232	with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)
43235	Esophagogastroduodenoscopy, flexible, transoral: diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
43236	with directed submucosal injection(s), any substance
43237	with endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures
43238	with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration /biopsy(s), esophagus (includes endoscopic ultrasound examination limited to the esophagus, stomach, or duodenum, and adjacent structures)
43239	with biopsy, single or multiple
43241	with insertion of intraluminal tube or catheter

43242	with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgically altered stomach where the jejunum is examined distal to the anastomosis)
43243	with injection sclerosis of esophageal/gastric varices
43248	with insertion of guide wire followed by dilation of esophagus over guide wire
43249	with balloon dilation of esophagus (less than 30 mm diameter)
*43233	with dilation of esophagus with balloon (less than 30 mm diameter) (includes fluoroscopic guidance when performed)
43250	with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery
43251	with removal of tumor(s), polyp(s), or other lesion(s) by snare technique
43252	with optical endomicroscopy
43253	with transendoscopic ultrasound-guided transmural injection of diagnostic or therapeutic substance(s) (e.g. anesthetic, neurolytic agent) or fiducial markers(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either duodenum or a surgically altered stomach where the jejunum is examined distal to the anastomosis)
43254	with endoscopic mucosal resection
43266	with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
43259	with endoscopic ultrasound examination, including the esophagus, stomach, and either the duodenum and/or jejunum as appropriate
43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)
76975	Gastrointestinal endoscopic ultrasound

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