

MedStar Health, Inc.

POLICY AND PROCEDURE MANUAL

Policy Number: MP.103.MH
Last Review Date: 11/03/2016
Effective Date: 01/01/2017

MP.103.MH – Endovascular Repair/Stent for Abdominal Aortic Aneurysm (AAA)

This policy applies to the following lines of business:

- ✓ MedStar Employee (Select)
- ✓ MedStar MA – DSNP – CSNP
- ✓ MedStar CareFirst PPO

MedStar Health considers **Endovascular Repair/Stent for Abdominal Aortic Aneurysm (AAA)** and/or its major branches is considered medically necessary for members with aneurysms having morphology suitable to repair when any of the following indications are met:

1. Aneurysmal dilatation over 5 cm and is equal to or greater than twice the diameter of the non-dilated proximal segment
2. Any documented aneurysmal dilatation that has expanded in size by 0.5 cm or more in six months
3. Any symptomatic or ruptured aneurysm. The primary symptoms are tenderness on palpation and/or pain that may occur in the back, flank, groin, or abdomen. Other symptoms are related to compression of nearby structures such as veins or ureters
4. Any AAA with an aneurysmal iliac component.

NOTE: The above measurements should be obtained by computed tomography (CT) and represent the minor axis on the axial CT or any measurement perpendicular to the line of flow on a 3D reconstruction.

Limitations

1. Endovascular repair/stent for AAA and/or its major branches must be performed by a physician with credentialed experience in this technology
2. The endovascular graft must be FDA approved for the treatment of the aneurysm

Background

According to the Society of Interventional Radiology (SIR), the occurrence of AAAs have increased threefold in the past 30 years and now affects as many as 8% of the population over the age of 65. An AAA is caused by an enlarged area in the lower part of the aorta, the major blood vessel that supplies blood from the heart to the rest of the body. An aneurysm larger than 5 centimeters is usually considered for treatment to prevent rupture. Risk factors related to rupture include the size of the AAA diameter,

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the rate at which it has expanded, the patient age and smoking history. SIR reports that once an AAA has ruptured, the survival chances are low, resulting in death for 80-90% of all ruptured AAAs.

Endovascular aneurysm repair (EVAR) is used as an alternative to open surgery for the repair of ruptured and unruptured AAAs. The repair involves the placement of an endovascular graft within the abdominal aorta to reduce the pressure on the region. The placement is accomplished via a delivery system inserted through the femoral arteries to the aneurysms under fluoroscopic guidance. Once the graft is fixed to the aorta, the delivery system is then removed.

Codes:

CPT Codes / HCPCS Codes / ICD-10 Codes	
Code	Description
34800	Endovascular repair of infra renal abdominal aortic aneurysm or dissection; using aorta-aortic tube prosthesis
34802	Endovascular repair of infra renal abdominal aortic aneurysm or dissection; using modular bifurcated prosthesis (1 docking limb)
34803	Endovascular repair of infra renal abdominal aortic aneurysm or dissection; using modular bifurcated prosthesis (2 docking limbs)
34804	Endovascular repair of infra renal abdominal aortic aneurysm or dissection; using unibody bifurcated prosthesis
34805	Endovascular repair of infra renal abdominal aortic aneurysm or dissection; using aorto-iliac or aorto-unifemoral prosthesis
34808	Endovascular placement of iliac artery occlusion device
34812	Open femoral artery exposure for delivery of endovascular prosthesis, by groin incision, unilateral
34813	Placement of femoral-femoral prosthetic graft during endovascular aortic aneurysm repair
34820	Open iliac artery exposure for delivery of endovascular prosthesis or iliac occlusion during endovascular therapy, by abdominal or retroperitoneal incision, unilateral
34825	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, or dissection; initial vessel

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34826	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, or dissection; each additional vessel
34833	Open iliac exposure with creation of conduit for delivery of aortic or iliac endovascular prosthesis by arm incision, unilateral
34834	Open brachial artery exposure to assist in the deployment of aortic or iliac endovascular prosthesis by arm incision, unilateral
34841	Endovascular repair of visceral aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac, or renal artery)
34842	Endovascular repair of visceral aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
34843	Endovascular repair of visceral aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
34844	Endovascular repair of visceral aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
34845	Endovascular repair of visceral aorta and infrarenal abdominal aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone

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	angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac, or renal artery)
34846	Endovascular repair of visceral aorta and infrarenal abdominal aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
34847	Endovascular repair of visceral aorta and infrarenal abdominal aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
34848	Endovascular repair of visceral aorta and infrarenal abdominal aorta (e.g. aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac, and/or renal artery)
75952	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; radiological supervision and interpretation
75953	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal aortic or iliac artery aneurysm, pseudoaneurysm, or dissection, radiological supervision and interpretation

References

1. ACCF/AHA Guideline: 2010
 ACCF/AHA/AATS/ACR/ASA/SCA/SCAI/SIR/STS/SVM Guidelines for the Diagnosis and Management of Patients With Thoracic Aortic Disease. March 16, 2010. <http://circ.ahajournals.org/content/121/13/e266.full>.
2. Centers for Medicare and Medicaid Services (CMS). Local Coverage Article No. A53124: Endovascular Repair of Aortic Aneurysms. (Contractor: Novitas)

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Solutions) Revision Effective Date: 10/01/2015. https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=53124&ver=5&ContrId=320&ContrVer=1&CtrctrSelected=320*1&Date=&DocID=A53124&bc=hAAAAAgAAAAAA%3d%3d&

3. Hayes Medical Technology Directory. Endovascular Repair of Abdominal Aortic Aneurysms. Annual Review July 23, 2015.
4. National Institute for Health and Clinical Excellence (NICE). Technology Appraisal Guidance No. 167. Endovascular stent-grafts for the treatment of abdominal aortic aneurysms, Issue date: February 2009. Review date: January 2012 <http://www.nice.org.uk/guidance/TA167/chapter/1-guidance>
5. Society of Interventional Radiology: Abdominal Aortic Aneurysms-interventional radiologists treat abdominal aneurysms nonsurgically. © 2013. <http://www.sirweb.org/patients/abdominal-aortic-aneurysms/>
6. U.S. Food and Drug Administration (FDA). Premarket Approval (PMA): ANCURE/Aortoiliac Endograft System. Applicant: Guidant Cardiac and Vascular Surgery. PMA No. P990017/S030. Decision Date: April 24, 2002. <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpma/pma.cfm?id=17869> (supplement). <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpma/pma.cfm?id=6630> (original PMA. Applicant Boston Scientific Corp.) http://www.accessdata.fda.gov/cdrh_docs/pdf11/P110043A.pdf (PMA Approval letter)
7. U.S. Food and Drug Administration (FDA). Premarket Approval (PMA): AneuRx Stent Graft System. Applicant: Medtronic Vascular. PMA No. P990020. Decision Date: September 28, 1999. <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpma/pma.cfm?id=6631>

Disclaimer:

MedStar Health medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of MedStar Health and its affiliated managed care entities. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

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shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

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