**Policy Name:** Subcutaneous Implantable Cardioverter-Defibrillator (S-ICD)  
**Effective Date:** 7/19/17

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**Important Information – Please Read Before Using This Policy**

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare and Minnesota Health Care Programs, this policy will apply unless those programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

**Coverage Policy**
Subcutaneous implantable cardioverter-defibrillator is COVERED.

**Description**
The subcutaneous implantable cardioverter-defibrillator (S-ICD) is designed to monitor and treat cardiac arrhythmias (abnormal heartbeat) and to reduce the risks of sudden cardiac arrest (SCA) and sudden cardiac death (SCD).

The S-ICD is a new generation ICD that does not require transvenous insertion (through a vein and into the heart); the wire electrode is instead placed under the skin above the sternum. The electrode is attached to a generator which is inserted under the skin and implanted outside the rib cage. When the device detects a life-threatening heart arrhythmia, it delivers a shock via the electrode to the subcutaneous tissue of the chest in order to restore the heart’s normal rhythm. This is less invasive and differs from the standard implantable defibrillator electrode wire that is inserted in a vein and directly into the heart. One other difference is that the S-ICD does not have pacemaker capabilities because it lacks heart electrodes. The S-ICD is usually inserted using local anesthesia with sedation and requires an overnight hospitalization.

**FDA Approval**
The Subcutaneous Implantable Defibrillator (S-ICD®) System (original submission by Cameron Health Inc., Boston Scientific Corp. acquired in June 2012) received PMA approval September 2012.

**Prior Authorization**
Prior authorization is not applicable.
Coding Considerations
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes
- 33270 – Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed
- 33271 – Insertion of subcutaneous implantable defibrillator electrode
- 33273 – Repositioning of previously implanted subcutaneous implantable defibrillator electrode
- 93260 – Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; implantable subcutaneous lead defibrillator system
- 93261 – Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording an disconnection per patient encounter; implantable subcutaneous lead defibrillator system
- 93644 – Electrophysiological evaluation of subcutaneous implantable defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)

Original Effective Date: 8/1/2015
Re-Review Date(s): 7/17/2017
3/2/2020 – administrative update; format

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