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, Medicaid and MinnesotaCare members, this policy will apply unless these 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
Transcatheter closure of atrial septal defect (ASD), ventricular septal defect (VSD), and patent ductus arteriosus (PDA) is **COVERED** when:

a. The device has received FDA approval, and
b. The FDA-approved indications for the specific device are met.

All other devices and indications, including but not limited to off-label use of FDA approved devices and closure of patent foramen ovale (PFO), are investigative and therefore **NOT COVERED**.

Description
Transcatheter closure devices are permanent implantable devices designed to close defects between the chambers of the heart or a patent ductus arteriosus. Most of these defects are congenital, but can occur after a myocardial infarction or can result from surgical repair of other congenital heart defects (e.g. fenestrated Fontan). Developed as less invasive alternatives to open heart surgery, the devices are implanted in a cardiac catheterization laboratory, through catheters inserted into a leg vein and advanced to the heart where the device is implanted into the defect.

FDA Approval
Transcatheter closure devices require FDA pre-market approval. Examples of FDA approved devices include, but are not limited to:

A. Amplatzer PFO Occluder (St. Jude Medical, Plymouth, MN), approved on October 28, 2016 for closure of PFO in patients who have been “carefully evaluated by a neurologist and cardiologist to rule out other known causes of stroke and help ensure that PFO closure with the device is likely to assist in reducing the risk of a recurrent stroke.”

B. The Amplatzer® Septal Occluder (ASO) and the Amplatzer® Exchange System (AGA Medical Corp., Golden Valley, MN), approved in December 2001 for the occlusion of ASD in the secundum position and in patients who require closure of a fenestration following a fenestrated Fontan procedure.

C. Amplatzer® Duct Occluder (AGA Medical Corp., Golden Valley, MN) approved in May 2003 for the nonsurgical closure of PDA (AGA Medical Corp., Golden Valley, MN).

E. Amplatzer® Muscular VSD Occluder (AGA Medical Corp., Golden Valley, MN). Approved September 2007 for closure of complex ventricular septal defects of a sufficient size to warrant closure. The patient must also be considered at high risk for surgical closure based either on the anatomy of the defect or the patient's overall medical condition.

F. CardioSEAL® Septal Occlusion System with Qwik Load™ (NMT Medical, Boston, MA), approved in December 2001 for use in patients with complex ventricular septal defects (VSD) of significant size to warrant closure and who are considered to be high risk for standard transatrial or transarterial surgical closure based on anatomical conditions and/or overall medical condition. High-risk anatomical factors for transatrial or transarterial surgical closure include patients requiring a left ventriculotomy or an extensive right ventriculotomy, with a failed previous VSD closure, with multiple apical and/or anterior muscular VSDs ("swiss cheese septum"), or with posterior apical VSDs covered by trabeculae.


H. Nit-Occlud® PDA (pfm medical, Inc., Carlsbad, CA) approved on August 16, 2013 for percutaneous transcatheter closure of small to moderate size PDA with a minimum angiographic diameter less than 4 millimeters.

I. Starflex Septal Occluder (NMT Medical, Inc., Boston, MA), approved in March 2009 for use in patients with complex ventricular septal defect of a significant size to warrant closure, but that based on location, cannot be closed with standard transatrial or transarterial approaches. This device replaces the CardioSEAL Septal Occlusion System above.

Prior Authorization
Services with specific coverage criteria may be reviewed retrospectively to determine if criteria are being met. Retrospective denial may result if criteria are not met.

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
- 93580 - Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant
- 93581 - Percutaneous transcatheter closure of a congenital ventricular septal defect with implant
- 93582 - Percutaneous transcatheter closure of patent ductus arteriosus

HCPC Code:
C1817 - Septal defect implant system, intracardiac
Medica Coverage Policy

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