



Medical and Behavioral Health Policy

Section: Medicine Policy Number: II-73

Effective Date: 10/23/2013

Blue Cross and Blue Shield of Minnesota medical policies do not imply that members should not receive specific services based on the recommendation of their provider. These policies govern coverage and not clinical practice. Providers are responsible for medical advice and treatment of patients. Members with specific health care needs should consult an appropriate health care professional.

LEFT ATRIAL APPENDAGE OCCLUDER DEVICES

Description:

Patients with atrial fibrillation have an increased risk of thrombus formation and stroke. In non-rheumatic atrial fibrillation, most thrombi form in the left atrial appendage (LAA), a small sac-like structure connected to the left atrium between the left upper pulmonary vein and the left ventricle. Patients with atrial fibrillation who are considered to be at high risk for thromboemolic stroke are generally treated with anticoagulants such as warfarin. However, for patients in whom anticoagulation therapy is not indicated or not tolerated, obliteration of the LAA may be considered. One approach is surgical removal or exclusion of the LAA through either an open or thorascopic approach. Occlusion of the LAA using percutaneous occluder devices is another approach that has been proposed.

Several devices have been studied for LAA occlusion, including but not limited to the Watchman® LAA system, the Cardioblate® closure device, the Amplatzer™ cardiac plug, the Amplatzer™ Amulet™ LAA occluder, and the PLAATO® system. These devices are implanted using percutaneous, catheter-based methods. Currently, no device has been approved by the U.S. Food and Drug Administration (FDA) for percutaneous occlusion of the LAA.

The Watchman® LAA system consists of a self-expanding nitinol occluder device with a thin polyester membrane covering the atrial-facing surface and barb-tipped wires for attachment to the endocardium, and a catheter system to deliver the device. The membrane prevents thrombi from entering the circulation and the surface encourages tissue incorporation into the device.

Policy: The use of left atrial appendage occluder devices is **INVESTIGATIVE**

due to the lack of clinical evidence demonstrating improvement in

health outcomes.

Coverage: Blue Cross and Blue Shield of Minnesota medical policies apply

generally to all Blue Cross and Blue Plus plans and products. Benefit plans vary in coverage and some plans may not provide coverage for certain services addressed in the medical policies.

Medicaid products and some self-insured plans may have additional policies and prior authorization requirements. Receipt of benefits is subject to all terms and conditions of the member's summary plan description (SPD). As applicable, review the provisions relating to a specific coverage determination, including exclusions and limitations. Blue Cross reserves the right to revise, update and/or add to its medical policies at any time without notice.

For Medicare NCD and/or Medicare LCD, please consult CMS or National Government Services websites.

Refer to the Pre-Certification/Pre-Authorization section of the Medical Behavioral Health Policy Manual for the full list of services, procedures, prescription drugs, and medical devices that require Precertification/Pre-Authorization. Note that services with specific coverage criteria may be reviewed retrospectively to determine if criteria are being met. Retrospective denial of claims may result if criteria are not met.

Left atrial appendage occluder devices are investigational devices which are only available through clinical trials and which have not been cleared for marketing by the U. S. Food and Drug Administration (FDA).

Coding:

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.

ICD-9 Procedure:

37.90 Insertion of left atrial appendage device

ICD-10 Procedure:

02H73DZ Insertion of Intraluminal Device into Left Atrium, Percutaneous Approach

02H74DZ Insertion of Intraluminal Device into Left Atrium, Percutaneous Endoscopic Approach

02U73JZ Supplement Left Atrium with Synthetic Substitute, Percutaneous Approach

02U74JZ Supplement Left Atrium with Synthetic Substitute, Percutaneous Endoscopic Approach

Policy History: Developed April 11, 2007

Most recent history:

Reviewed October 13, 2010 Reviewed October 12, 2011 Reviewed October 10, 2012 Reviewed October 9, 2013

Cross Reference:

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