

# Medical Coverage Policy |

## Peripheral Artery Disease



**EFFECTIVE DATE:** 04|01|2001  
**POLICY LAST UPDATED:** 08|06|2013

### OVERVIEW

The policy documents monitored rehabilitative exercise for patients with peripheral arterial disease has not been proven to be better than regular unmonitored exercise.

### PRIOR AUTHORIZATION

Prior authorization review is not required.

### POLICY STATEMENT

#### BlueCHiP for Medicare:

Unless these services are listed by our plan as a covered service, services are not medically necessary according to the standards of Original Medicare.

#### Commercial products:

Peripheral Arterial Disease (PAD) Rehabilitative exercise is considered not medically necessary as there is insufficient peer reviewed, scientifically controlled studies in the literature which demonstrate better outcomes of such programs over exercise without supervision.

### MEDICAL CRITERIA

Not applicable.

### BACKGROUND

Peripheral Arterial Disease (PAD) Rehabilitative exercise consists of a series of sessions, each session lasting 45-60 minutes. A motorized treadmill or a track is used to permit each patient to achieve symptom limited claudication. Sessions are supervised by an exercise physiologist or nurse. The supervising provider monitors the individual patient's claudication threshold and other cardiovascular limitations for an adjustment of workload. During the supervised rehabilitative program, the development of new arrhythmias, symptoms that might suggest angina, or the continued inability of the patient to progress to an adequate level of exercise, may require physician review and examination of the patient.

### COVERAGE

#### BlueCHiP for Medicare |

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber agreement for applicable not medically necessary services.

#### Commercial |

### CODING

The following CPT code is not medically necessary for BlueCHiP for Medicare and Commercial products.

**93668** Peripheral arterial disease (PAD) rehabilitation, per session

## RELATED POLICIES

Not applicable.

## PUBLISHED

Provider Update	Sep 2013
Provider Update	May 2012
Provider Update	Jun 2011
Provider Update	Jun 2010
Provider Update	Jul 2009
Policy Update	May 2008
Policy Update	Jun 2007

## REFERENCES

Ciaccia JM. Benefits of a structured peripheral arterial vascular rehabilitation program. *Journal of Vascular Nursing*;1993;11(1):1-4.

Gardner AW, Poehlman ET. Exercise Rehabilitation Programs for the Treatment of Claudication Pain. *JAMA*;1995;(274)12:975-980.

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McDermott MM, Liu K, Ferrucci L, Criqui MH et al. *Physical Performance in Peripheral Arterial Disease: A Slower Rate of Decline in Patients Who Walk More*.

*Annals of Internal Medicine*; 2006(January);144:10-20.

McDermott MM, Ades P, Guralnik JM, et al. Treadmill Exercise and Resistance Training in Patients With Peripheral Arterial Disease With and Without Intermittent Claudication: A Randomized Controlled Trial. *JAMA*;2009;301(2):165-174.

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