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MEDICAL COVERAGE GUIDELINES	**ORIGINAL EFFECTIVE DATE: 03/19/13**
SECTION: SURGERY	**LAST REVIEW DATE: 03/05/14**
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	ARCHIVE DATE:

PANCREAS TRANSPLANTS

- **Pancreas Transplant Alone (PTA)**
- **Pancreas After Kidney Transplant (PAK)**
- **Simultaneous Pancreas and Kidney Transplant (SPK)**

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

Description:

Transplantation of a normal pancreas is a surgical treatment for individuals with insulin-dependent diabetes mellitus and severe secondary diabetic complications. Pancreas transplantation can restore glucose control and is intended to prevent, halt, or reverse the secondary complications from diabetes mellitus.

Pancreas Transplant Alone (PTA):
PTA may be performed on a diabetic individual without kidney failure who has severe disabling and potentially life-threatening diabetic complications. PTA has also been investigated in individuals following total pancreatectomy for chronic pancreatitis.

PANCREAS TRANSPLANTS (cont.)

Description: (cont.)

Pancreas After Kidney (PAK) Transplant:
PAK transplantation may be performed on a diabetic individual who has had a successful kidney transplant for renal failure but a pancreas graft was not simultaneously available. The subsequent pancreas transplant is likely to result in improved quality of life compared to a kidney transplant alone.

Simultaneous Pancreas and Kidney (SPK) Transplant:
Combined transplantation of a cadaveric pancreas and kidney may be performed on a diabetic individual with renal failure to allow freedom from dialysis and insulin dependency for individuals with both insulin dependent diabetes and renal failure.

Potential Contraindications Subject to the Judgment of the Transplant Center:

- Known current malignancy, including metastatic cancer
- Recent malignancy with high risk of recurrence
- Untreated systemic infection making immunosuppression unsafe, including chronic infection
- Other irreversible end-stage disease not attributed to kidney disease
- History of cancer with a moderate risk of recurrence
- Systemic disease that could be exacerbated by immunosuppression
- Psychosocial conditions or chemical dependency affecting ability to adhere to therapy

Criteria:

For pancreatic islet transplantation, see BCBSAZ Medical Coverage Guideline, "Pancreatic Islet Transplantation".

Pancreas transplants will be reviewed by the medical director(s) and/or clinical advisor(s).

A. Pancreas Transplantation:

Pancreas Transplant Alone (PTA):

- Pancreas transplant alone for the treatment of insulin dependent diabetes is considered ***medically necessary*** with documentation of **ALL** of the following:

  1. Severely disabling and potentially life-threatening complications due to hypoglycemia unawareness and labile diabetes
  2. Complications persist in spite of optimal medical management
  3. Individuals with type 2 diabetes must have BMI ≤ 32
  4. Pretransplantation Criteria **B** is met

PANCREAS TRANSPLANTS (cont.)

Criteria: (cont.)

Pancreas transplants will be reviewed by the medical director(s) and/or clinical advisor(s).

Pancreas After Kidney (PAK) Transplant:

- Pancreas transplant after a prior kidney transplant for the treatment of insulin dependent diabetes is considered ***medically necessary*** with documentation that pre-transplantation evaluation criterion is met.

Simultaneous Pancreas and Kidney (SPK) Transplant:

- Combined pancreas-kidney transplant for the treatment insulin dependent diabetes with uremia is considered ***medically necessary*** with documentation that pre-transplantation evaluation criterion is met.

Pancreas Re-Transplant:

- Pancreas re-transplant after a failed primary pancreas transplant is considered ***medically necessary*** with documentation that pre-transplantation evaluation criterion is met.

- Pancreas retransplant after a failed primary pancreas transplant is considered ***medically necessary*** in individuals who meet criteria for pancreas transplantation.

B. Pre-Transplantation Evaluation:

- Pre-transplantation evaluation with documentation of **ALL** of the following:

  1. Psychosocial screen with documentation of **ALL** of the following:

     - Drug/alcohol screen with documentation of **ONE** of the following:
       - No drug/alcohol abuse by history
       - Drug and alcohol free for a period greater than or equal to 6 months

     - Behavioral health disorder screening with documentation of **ONE** of the following:
       - No behavioral health disorder by history
       - Behavioral health disorder treated

     - Adequate social/family support

PANCREAS TRANSPLANTS (cont.)

Resources:

Resources prior to 03/19/13 may be requested from the BCBSAZ Medical Policy and Technology Research Department.

1. 7.03.02 BCBS Association Medical Policy Reference Manual. Allogeneic Pancreas Transplant. Re-issue date 02/13/2014; issue date 12/01/1996.