

Medical Coverage Policy | Ovarian and Internal Iliac
Vein Embolization as a Treatment of Pelvic Congestion
Syndrome



EFFECTIVE DATE: 12|01|2014
POLICY LAST UPDATED: 10|01|2020

OVERVIEW

Pelvic congestion syndrome is characterized by chronic pelvic pain that often is aggravated by standing; diagnostic criteria for this condition are not well-defined. Embolization of the ovarian and internal iliac veins has been proposed as a treatment for patients who fail medical therapy with analgesics.

MEDICAL CRITERIA

Not applicable.

PRIOR AUTHORIZATION

Not applicable.

POLICY STATEMENT

BlueCHiP for Medicare

Embolization of the ovarian vein and internal iliac veins is considered not covered as a treatment of pelvic congestion syndrome as the evidence is insufficient to determine the effects of the technology on health outcomes.

Commercial Products

Embolization of the ovarian vein and internal iliac veins is considered not medically necessary as a treatment of pelvic congestion syndrome as the evidence is insufficient to determine the effects of the technology on health outcomes.

COVERAGE

Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Book, Evidence of Coverage or Subscriber Agreement for applicable not medically necessary/not covered benefits/coverage.

BACKGROUND

Pelvic congestion syndrome is characterized by chronic pelvic pain that is often aggravated by standing; diagnostic criteria for this condition are not well-defined. Embolization of the ovarian and internal iliac veins has been proposed as a treatment for patients who fail medical therapy.

For individuals who have pelvic congestion syndrome who receive ovarian and/or internal iliac vein embolization, the evidence includes case series and a systematic review. Relevant outcomes are symptoms and treatment-related morbidity. According to a systematic review of case series data, approximately 80% of patients have reported some degree of symptom relief 12 months after ovarian and/or internal iliac vein embolization. It is difficult to draw conclusions from these data because of a lack of a placebo control or comparative data from alternative interventions. Moreover, definitions of pelvic congestion syndrome vary, making it challenging to clearly define a patient population with symptoms arising from pelvic congestion. Randomized controlled trials using well-defined eligibility criteria are needed. The evidence is insufficient to determine the effects of the technology on health outcomes, thus the treatment is considered not medically necessary.

CODING

The following CPT code is not covered for BlueCHiP for Medicare and not medically necessary for commercial products when filed with the diagnosis codes listed below:

37241 Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary complete the intervention; venous, other than hemorrhage (e.g., congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)

ICD-10 code N94.89

RELATED POLICIES

None

PUBLISHED

Provider Update, November 2020

Provider Update, November 2019

Provider Update, February 2019

Provider Update, October 2017

Provider Update, November 2016

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