

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



**EFFECTIVE DATE:** 12|01|2014

**POLICY LAST UPDATED:** 08|23|2016

### 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.

### PRIOR AUTHORIZATION

No preauthorization is needed.

### POLICY STATEMENT

#### BlueCHiP for Medicare and Commercial Products

Embolization of the ovarian vein and internal iliac veins is considered not medically necessary as a treatment of pelvic congestion syndrome because the available literature regarding embolization therapy for the treatment of pelvic congestion syndrome consists of case series and is inadequate to draw clinical conclusions.

### MEDICAL CRITERIA

None

### 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.

### COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for limitations of benefits/coverage when services are not medically necessary.

### CODING

#### BlueCHiP for Medicare and Commercial Products

The following CPT code is not medically necessary 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 2016

Provider Update, April 2015

Provider Update, January 2015

### REFERENCES

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