OVERVIEW
This policy is a document that anastomosis of the extracranial-intracranial arteries is covered for all indications except atherosclerosis.

PRIOR AUTHORIZATION
Prior authorization is required for BlueCHiP for Medicare and recommended for Commercial Products.

POLICY STATEMENT
BlueCHiP for Medicare and Commercial:
Anastomosis of the extracranial-intracranial arteries are covered for all conditions other than atherosclerosis. For atherosclerosis, it is not medically necessary as current medical research does not yet support its safety and efficacy.

MEDICAL CRITERIA
Anastomosis of the extracranial-intracranial arteries are covered for all conditions other than atherosclerosis.

BACKGROUND

Intracranial atherosclerotic disease is the narrowing or obstruction of arteries within the skull that supply the brain. It is caused by atheromatous plaques in the innermost layer of the arterial wall, called the endothelium. Intracranial atherosclerotic disease can lead to transient ischemic attack (TIA), stroke or death, and is usually diagnosed in patients who have presented with a TIA or stroke. Intracranial atherosclerotic disease is usually treated with anticoagulant therapy (i.e., warfarin) or antiplatelet therapy (e.g., aspirin), together with medication to control risk factors for atherosclerosis.

Extracranial vascular disease refers to atherosclerosis, which is a hardening and narrowing of the walls of these vessels, due to deposits of fats that form plaques within the arteries. As the plaque deposits gradually enlarge, they interfere with blood flow. Atherosclerosis can affect any large-to-medium-sized artery in the body and cause serious health problems. It is especially dangerous in the extracranial arteries that supply the brain, as decreased blood flow to the brain can result in stroke. Minority of subjects with elevated LDL and cholesterol levels will develop clinical disease, and up to 50% of cases of coronary artery disease (CAD) occur in subjects with ‘normal’ levels of total and LDL cholesterol. Thus, there is considerable potential to improve the accuracy of current cardiovascular risk prediction models.

COVERAGE
Benefits may vary between groups/contracts. Please refer to the appropriate member certificate/subscriber agreement for applicable not medically necessary coverage.

CODING
BlueCHiP for Medicare and Commercial:

The following code is considered not medically necessary: when used for atherosclerosis.
61711

RELATED POLICIES
None

PUBLISHED
- Provider Update May 2013
- Provider Update May 2012
- Provider Update April 2011
- Provider Update May 2010
- Provider Update June 2008

REFERENCES


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