Medical Coverage Policy

Transpupillary Thermotherapy for Treatment of Choroidal Neovascularization

☐ Device/Equipment  ☐ Drug  ☐ Medical  ☐ Surgery  ☒ Test  ☐ Other

Effective Date:  2/17/2010  Policy Last Updated:  3/20/2012

☐ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

☒ Prospective review is not required.

Description:
Choroidal neovascularization (CNV) is a common cause of adult-onset blindness, most commonly associated with age-related macular degeneration (AMD). Two distinctively different forms of degeneration occurs. The first, called the atrophic, areolar or dry form, evolves slowly. Atrophic AMD is the most common form of degeneration and is often a precursor of the second form, the more devastating exudative neovascular form, also referred to as disciform or wet degeneration. The wet form is distinguished from the atrophic form by serous or hemorrhagic detachment of the retinal pigment epithelium and the development of choroidal neovascularization (CNV), sometimes called neovascular membranes. Risk of developing severe irreversible loss of vision is greatly increased by the presence of CNV.

There is ongoing research interest in the use of transpupillary thermotherapy to treat subfoveal choroidal neovascularization with an “occult” angiographic pattern. Transpupillary thermotherapy (TTT) is a technique in which heat is delivered to the choroid and retinal pigment epithelium through the pupil using a modified diode laser. This laser technique contrasts with the laser used in standard photocoagulation therapy, in that TTT uses a lower power laser for more prolonged periods of time and is designed to gently heat the choroidal lesion, thus limiting damage to the overlying retinal pigment epithelium.

The minimal published literature regarding transpupillary thermotherapy is inadequate to permit scientific conclusions regarding the safety and long-term efficacy of this procedure.

Preferred Practice Patterns (practice guidelines) on photodynamic therapy from the American Academy of Ophthalmology (AAO) indicate that there is insufficient evidence to guide treatment recommendations for transpupillary thermal therapy.

Medical Criteria:
Not applicable.

Policy:
Transpupillary thermotherapy for the treatment of choroidal neovascularization is non-covered as it has not been FDA approved.
Coverage:
Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement, for health care services not covered (contract exclusion) which have not been finally approved by the FDA or other governing body.

Codes:
For destruction of localized lesion of choroid by transpupillary thermography use 67299

Also Known As:
NA

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Provider Update, April 2009
Provider Update, October 2010
Provider Update, June 2012

References:

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