

# Cardio Policy:

## Abdominal Aortography with Bilateral Iliofemoral Lower Extremity Runoff

<b>POLICY NUMBER</b> UM CARDIO_1170	<b>SUBJECT</b> Abdominal Aortography with Bilateral Iliofemoral Lower Extremity Runoff		<b>DEPT/PROGRAM</b> UM Dept	<b>PAGE 1 OF 4</b>
<b>DATES COMMITTEE REVIEWED</b> 09/09/11, 01/09/13, 08/22/13, 06/30/14, 08/12/15, 10/10/17, 03/08/19, 05/08/19, 12/11/19, 06/10/20, 05/12/21, 10/13/21, 11/09/21, 10/12/22, 02/01/23, 05/10/23, 12/20/23	<b>APPROVAL DATE</b> December 20, 2023	<b>EFFECTIVE DATE</b> December 22, 2023	<b>COMMITTEE APPROVAL DATES</b> 09/09/11, 01/09/13, 08/22/13, 06/30/14, 08/12/15, 10/10/17, 03/08/19, 05/08/19, 12/11/19, 06/10/20, 05/12/21, 10/13/21, 11/09/21, 10/12/22, 02/01/23, 05/10/23, 12/20/23	
<b>PRIMARY BUSINESS OWNER: UM</b>		<b>COMMITTEE/BOARD APPROVAL</b> Utilization Management Committee		
<b>URAC STANDARDS</b> HUM v8: UM 1-2; UM 2-1	<b>NCQA STANDARDS</b> UM 2		<b>ADDITIONAL AREAS OF IMPACT</b>	
<b>CMS REQUIREMENTS</b>	<b>STATE/FEDERAL REQUIREMENTS</b>		<b>APPLICABLE LINES OF BUSINESS</b> Commercial, Exchange, Medicaid	

### I. PURPOSE

Indications for determining medical necessity for Abdominal Aortography with Bilateral Iliofemoral Lower Extremity Runoff.

### II. DEFINITIONS

Abdominal aortography is performed to identify vessel narrowing in patients with leg claudication or cramps, caused by reduced blood flow down the legs and to the feet. This is done routinely through the femoral artery but can also be performed through the brachial or axillary (arm) artery. Any stenosis found may be treated with percutaneous interventions.

An appropriate diagnostic or therapeutic procedure is one in which the expected clinical benefit exceeds the risks or negative consequences of the procedure by a sufficiently wide margin such that the procedure is generally considered acceptable or reasonable care. The ultimate objective of AUC is to improve patient care and health outcomes in a cost-effective manner but is not intended to ignore ambiguity and nuance intrinsic to clinical decision making.

Appropriate Care- Median Score 7-9

May be Appropriate Care- Median Score 4-6

Rarely Appropriate Care- Median Score 1-3

Guideline directed medical therapy (GDMT) are outlined by joint American College of Cardiology (ACC)/American Heart Association (AHA) in cardiovascular clinical practice guidelines as Class I recommendation. These are maximally tolerated medications for a cardiovascular condition, when

prescribed, have shown to improve healthcare outcomes such as survival along with significant reduction in major adverse cardiovascular events and hospitalization. For all recommended drug treatment regimens, the prescriber should confirm the dosage with product insert material and carefully evaluate for contraindications and interactions<sup>1,2,4,6,7</sup>

### III. POLICY

**Patients should be on maximally tolerated GDMT.**

**Indications for approving a request for medical necessity are:**

- A. Significant disability despite medical therapy (GDMT) with documentation of outflow or inflow peripheral arterial disease by prior non-invasive study and further study is needed by angiography with the intent of subsequent intervention **(AUC Score 9)**<sup>1,2,3,4,5,6,7,8,9,10,11</sup>
- B. Following: **[(AUC Score 9)]**<sup>1,2,3,4</sup>
  - 1. detection of aneurysm and other primary vascular abnormalities that require further investigation for effective treatment
  - 2. the detection of occlusive disease, including evaluation for acute or chronic intestinal ischemia
  - 3. stabilization of GI hemorrhage as an outpatient/elective procedure

Decisions regarding the potential utility of invasive therapeutic interventions (percutaneous or surgical) in patients with lower extremity peripheral arterial disease should be made with a complete anatomic assessment of the affected arterial territory, including imaging of the occlusive lesion, as well as arterial inflow and outflow with angiography or a combination of angiography and noninvasive vascular techniques.

Noninvasive imaging modalities, including MRA, CTA, and color flow duplex imaging, may be used in advance of invasive imaging to develop an individualized diagnostic strategic plan, including assistance in selection of access sites, identification of significant lesions, and determination of the need for invasive evaluation.

Diagnostic peripheral angiography performed at the time of an interventional procedure is separately reportable if at least one indication for medical necessity for a stand-alone lower extremity is met **AND** one of the following is also met:

- A. No prior catheter-based angiographic study is available, and a full diagnostic study is performed, and the decision to intervene is based on the diagnostic study, or
- B. A prior study is available, but as documented in the medical record:
  - 1. the patient's condition with respect to the clinical indication has changed since the prior study; or
  - 2. there is inadequate visualization of the anatomy or pathology; or
  - 3. there is a clinical change during the interventional procedure that requires new evaluation outside the target area of intervention.

#### **Limitations**

- A. Requests for services that are part of a surveillance protocol for patients who are involved in a clinical trial are considered out of scope (OOS) for New Century Health and cannot be reviewed.

- B. Before proceeding with bypass surgery for a patient with symptomatic PAD the following must be considered: Predicted or observed lack of adequate response to maximally tolerated GDMT<sup>1,2,3,5,7,8</sup>

#### IV. PROCEDURE

- A. To review a request for medical necessity, the following items must be submitted for review:
  - 1. Progress note that prompted request
  - 2. ABI/PVR/Arterial Duplex/CTA /MRA legs report
- B. Primary codes appropriate for this service: 36200, 36245- 36248, 75625, 75630, 75710, 75716, 75726, G0278

#### V. APPROVAL AUTHORITY

- A. Review – Utilization Management Department
- B. Final Approval – Utilization Management Committee

#### VI. ATTACHMENTS

- A. None

#### VII. REFERENCES

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