



Subcutaneous Implantable Defibrillators

Clinical Coverage Criteria

Overview

An implantable defibrillator is a device designed to treat and diagnose life-threatening ventricular tachyarrhythmias. The implantable defibrillator consists of a pulse generator and electrodes for sensing and defibrillating. Studies and trials have shown these devices improve survival and reduce sudden cardiac death in patients with certain clinical symptoms and diagnoses.

Subcutaneous Implantable Defibrillators are considered to be less invasive than transvenous defibrillators as there are no leads placed in the heart or vasculature. Instead, an electrode is placed beneath the skin of the chest this allows the sensing of cardiac rhythms and delivery of shocks if necessary.

Policy

Fallon Health requires Prior Authorization for Subcutaneous Implantable Defibrillators. The below criteria must be met as supported by the treating provider(s) medical records:

The member must have a medical need for a standard defibrillator and **do not have** any of the following conditions:

- Symptomatic bradycardia
- Incessant ventricular tachycardia (VT)
- Spontaneous frequent recurring VT reliably terminated with anti-tachycardia pacing

Additionally coverage will be considered for members who have had previous endocarditis or infection associated with conventional implantable cardioverter-defibrillators.

Exclusions

- Any use of Implantable Defibrillators other than outlined above.

Codes

Code type	Code	Description
CPT	33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed
	33271	Insertion of subcutaneous implantable defibrillator electrode
	33272	Removal of subcutaneous implantable defibrillator electrode
	33273	Repositioning of previously implanted subcutaneous

References

1. CMS National Coverage Determination for Implantable Automatic Defibrillators (20.4). Effective October 1, 2003
2. Hayes Inc. Hayes Brief: Subcutaneous Implantable Cardioverter Defibrillator (S-ICD) for Prevention of Sudden Cardiac Death. Published March 30, 2017. Annual review completed April 25, 2019
3. Elliott Antman, Jean-Pierre Bassand, Werner Klein, et. al. Myocardial infarction redefined—a consensus document of The Joint European Society of Cardiology/American College of Cardiology committee for the redefinition of myocardial infarction. Volume 36, Issue 3, September 2000 DOI: 10.1016/S0735-1097(00)00804-4
4. Sakhi R, Yap SC, Michels M, Schinkel AFL, et. al. Evaluation of a novel automatic screening tool for determining eligibility for a subcutaneous implantable cardioverter-defibrillator. Int J Cardiol. 2018 Dec 1;272:97-101. doi: 10.1016/j.ijcard.2018.07.037.
5. Garside H, Leyva F, Hudsmith L, Marshall H, de Bono J. Eligibility for subcutaneous implantable cardioverter defibrillators in the adult congenital heart disease population. Pacing Clin Electrophysiol. 2019 Jan;42(1):65-70. doi: 10.1111/pace.13537. Epub 2018 Dec 4.

Policy History

Origination date: 09/01/2018
 Approval(s): Technology Assessment Committee: 08/22/2018 (adopted as new criteria), 09/10/2019 (updated references)

Not all services mentioned in this policy are covered for all products or employer groups. Coverage is based upon the terms of a member's particular benefit plan which may contain its own specific provisions for coverage and exclusions regardless of medical necessity. Please consult the product's Evidence of Coverage for exclusions or other benefit limitations applicable to this service or supply. If there is any discrepancy between this policy and a member's benefit plan, the provisions of the benefit plan will govern. However, applicable state mandates take precedence with respect to fully-insured plans and self-funded non-ERISA (e.g., government, school boards, church) plans. Unless otherwise specifically excluded, federal mandates will apply to all plans. For Medicare and Medicaid members, this policy will apply unless Medicare and Medicaid policies extend coverage beyond this policy.