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SHP Fetal Surgeries In Utero

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MCG Health
Ambulatory Care
26th Edition

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Coverage

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See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.

Application to Products

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Policy is applicable to all products.

Authorization Requirements

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Pre-certification by the Plan is required.

Description of Item or Service

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Fetal surgeries in utero uses minimally invasive techniques or open repairs to operate on a fetus (unborn baby) in the uterus with a malformation, or specific birth defects.

Exceptions and Limitations

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- There is insufficient scientific evidence to support the medical necessity of the following Fetal Surgeries In Utero as they are not shown to improve health outcomes upon technology review:
 - Amniotic band syndrome
 - Aqueductal stenosis (i.e., hydrocephalus)
 - Cleft lip and/or cleft palate
 - Congenital heart defects (e.g. mitral valve dysplasia)
 - In utero fetal gene therapy
 - In utero fetal stem cell transplantation
- There is insufficient scientific evidence to support the medical necessity of this procedure for uses other than those listed in the clinical indications for procedure section.

Clinical Indications for Procedure

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- Fetal surgery in utero is considered medically necessary for **1 or more** of the following :
 - Ablation of anastomotic vessels in acardiac twins
 - Treatment of congenital diaphragmatic hernia(CDH) using fetoscopic endoluminal tracheal occlusion (FETO) with **ALL** of the following :
 - Fetus has a poor congenital diaphragmatic hernia prognosis
 - Fetus has an Isolated left congenital diaphragmatic hernia
 - Fetus shows evidence of an observed/expected lung area to head circumference ratio (o/e LHR) <25 percent
 - Fetus has a normal microarray
 - Fetus is a singleton pregnancy
 - Mother does not have a short cervix
 - Fetus is between 27 + 0 to 29 + 6 weeks gestation
 - Repair of myelomeningocele with **ALL** of the following:
 - Fetus is a singleton pregnancy
 - Fetus has a myelomeningocele with the upper boundary of the lesion located between T1 and S1 vertebrae
 - Fetus shows evidence of a hindbrain herniation
 - Fetus is between 19 + 0 to 25 + 9 weeks gestation
 - Fetus has a normal fetal karyotype
 - Fetus and mother have **ALL** of the following:
 - Fetus has no anomalies unrelated to the myelomeningocele
 - Fetus does not have fetal kyphosis
 - Pregnancy is negative for placental abruption
 - Mother does not have a short cervix (less than or equal to 15 mm)
 - Mother has not had a previous pre-term birth
 - Mother's body mass index (BMI) is less than 35
 - Mother has not had a prior hysterotomy in the upper uterine segment
 - Mother and fetus have no contraindications to surgery
 - Resection of malformed pulmonary tissue, or placement of a thoraco-amniotic shunt as a treatment of **1 or more** of the following:
 - Congenital cystic adenomatoid malformation
 - Extralobar pulmonary sequestration
 - Sacrococcygeal teratoma removal
 - Twin-twin transfusion syndrome (TTTS) with **ALL** of the following:
 - Condition has been clinically and ultrasonographically confirmed as severe
 - Twins are less than 26 weeks gestation
 - Twins are monozygotic
 - Vesico-amniotic shunting as a treatment of urinary tract obstruction
- Fetal Surgeries In Utero are **NOT COVERED** for **ANY** of the following:
 - Amniotic band syndrome
 - Aqueductal stenosis (i.e., hydrocephalus)
 - Cleft lip and/or cleft palate
 - Congenital heart defects (e.g. mitral valve dysplasia)
 - In utero fetal gene therapy
 - In utero fetal stem cell transplantation

Document History

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- Revised Dates:
 - 2022: February
 - 2021: February
 - 2020: March
 - 2019: October
 - 2015: January
 - 2013: December
 - 2012: January
 - 2011: February, July
 - 2009: January

- Reviewed Dates:
 - 2023: February
 - 2018: December
 - 2017: December
 - 2016: January
 - 2014: January
 - 2010: January
- Effective Date: March 2008

Coding Information

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- CPT/HCPCS codes covered if policy criteria is met:
 - CPT 59076 - Fetal shunt placement, including ultrasound guidance
 - CPT 59897 - Unlisted fetal invasive procedure, including ultrasound guidance
 - HCPCS S2400 - Repair, congenital diaphragmatic hernia in the fetus using temporary tracheal occlusion, procedure performed in utero
 - HCPCS S2401 - Repair, urinary tract obstruction in the fetus, procedure performed in utero
 - HCPCS S2402 - Repair, congenital cystic adenomatoid malformation in the fetus, procedure performed in utero
 - HCPCS S2403 - Repair, extralobar pulmonary sequestration in the fetus, procedure performed in utero
 - HCPCS S2404 - Repair, myelomeningocele in the fetus, procedure performed in utero
 - HCPCS S2405 - Repair of sacrococcygeal teratoma in the fetus, procedure performed in utero
 - HCPCS S2409 - Repair congenital malformation of fetus, procedure performed in utero, not otherwise classified
 - HCPCS S2411 - Fetoscopic laser therapy for treatment of twin-to-twin transfusion
- CPT/HCPCS codes considered not medically necessary per this Policy:
 - NONE

References

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References used include but are not limited to the following:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; Uptodate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

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Fetal Surgery for Congenital Diaphragmatic Hernia - Annual Review: Aug 16, 2022. (n.d.). Retrieved Dec 20, 2022, from Hayes 2: <https://evidence.hayesinc.com/report/dir.inutero2520>

Fetal Surgery for Myelomeningocele - Annual Review: Jul 26, 2022. (n.d.). Retrieved Dec 20, 2022, from HAYES: <https://evidence.hayesinc.com/report/dir.inut463>

Myelomeningocele (spina bifida): Management and outcome. (2022, Jan 26). Retrieved Dec 20, 2022, from UpToDate: https://www.uptodate.com/contents/myelomeningocele-spina-bifida-management-and-outcome?search=Fetal%20Surgery&source=search_result&selectedTitle=1~73&usage_type=default&display_rank=1

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Techniques of Fetal Intervention. (2022). Retrieved Dec 20, 2022, from UCSF Fetal Treatment Center: <https://fetus.ucsf.edu/techniques-fetal-intervention/>

Codes

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CPT® : 59076, 59897
HCPCS: S2400

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