Medica Coverage Policy

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<th>Policy Name:</th>
<th>Left Atrial Appendage Closure Devices</th>
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<td>Effective Date:</td>
<td>1/21/2019</td>
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**Important Information – Please Read Before Using This Policy**

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare and Minnesota Health Care Programs, this policy will apply unless those programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

**Coverage Policy**

Left atrial appendage closure devices are investigative and therefore **NOT COVERED**.

**Description**

Left atrial appendage (LAA) closure is a procedure of the heart intended to reduce the risk of stroke in patients with atrial fibrillation. Atrial fibrillation (AF) is a common heart rhythm problem, in which the heart beat is abnormally fast and irregular causing the atria (upper chambers of the heart) to contract abnormally and inefficiently. As a result, a blood clot can form in a part of the heart called the left atrial appendage (LAA), a small pouch on the left side of the heart. If the clot in the LAA detaches and travels through the bloodstream to the brain, it can result in a stroke. To reduce the chance of blood clots, patients with AF are often prescribed blood thinning medications. However, some patients with AF are unable or unwilling to take blood thinners due to bleeding and other side effects.

For patients with AF who are unable to tolerate blood thinning medications, closure of the LAA has been proposed as an alternative treatment to reduce the risk of stroke by preventing blood clots that form in the LAA from entering the bloodstream. The procedure can be performed as an open procedure when an open heart procedure is being done for another reason, or it can be done as a minimally invasive, percutaneous procedure. In the most common types of percutaneous LAA closure (e.g., WATCHMAN™ Device; AMPLATZER™ Vascular Plug), a catheter is threaded into the heart via the femoral artery near the groin or a small incision in the chest. After entering the heart, a closure device is threaded through the catheter into the LAA and expanded to trap any clots that might form, thus preventing them from entering the bloodstream. Another option is to suture the LAA closed (e.g., LARIAT Suture Delivery Device).

**FDA Approval**

Left atrial appendage (LAA) closure is a surgical procedure and, therefore, is not subject to FDA regulation. However, the devices designed for LAA occlusion are subject to FDA regulation. The following devices have received FDA marketing approval/clearance:

1. WATCHMAN™ Device (Boston Scientific)
2. AMPLATZER™ Vascular Plugs (St. Jude Medical)
3. LARIAT Suture Delivery Device (SentreHEART).
Other devices are under study and have not been approved for use in the U.S including, but not limited to, the Amplatzer Amulet (St. Jude Medical) and the WaveCrest® LAA Occlusion System (Coherex Medical).

**Prior Authorization**
Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

**Coding Considerations**
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

**CPT Codes:**
33340 - Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation

Original Effective Date: 2/1/2016

Re-Review Date(s): 12/1/2016 – administrative update – coding update
11/21/2018