

Preview questionnaire: Endovascular intervention, peripheral artery

For BCN HMOSM (commercial) and BCN AdvantageSM members
For Blue Cross Medicare Plus BlueSM PPO members

Endovascular intervention, peripheral artery

Services must meet medical necessity criteria. Submit prior authorization requests through the e-referral system. The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

If all questions are answered, e-referral will either approve or pend the case. If the case pends and the plan cannot authorize it, the plan will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. Compliance with this prior authorization requirement will be monitored retrospectively.

Applicable procedure codes: *0238T, *37220, *37221, *37224, *37225, *37226, *37227, *37228, *37229, *37230, *37231

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See below for the questions you'll encounter for this procedure in the e-referral system.

- 1.*The Endovascular Intervention, Peripheral Artery Questionnaire is required [Questionnaire Assessment](#).
- 2.Please attach any clinical information you would like BCBSM to consider for this request from the patients medical record up in the Case Communication field.

You must answer each question by choosing either Yes, No, Not Applicable or another appropriate option.

Endovascular Intervention, Peripheral Artery

Answering the question(s) below will provide additional information needed to process your request.

Q Does the patient have ACUTE limb ischemia as identified by absence of a pulse distal to the identified occlusion AND TWO or MORE of the following in the affected extremity? Sudden onset of pain. Numbness. Coldness. Weakness.

A Possible answers: Yes No N/A

Q Does the patient have vein graft stenosis identified by imaging? Note: Imaging may include duplex ultrasound, doppler, CTA, MRA and angiography.

A Possible answers: Yes No N/A

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See below for the questions you'll encounter for this procedure in the e-referral system. (cont'd.)

You must answer each question by choosing either Yes, No, Not Applicable or another appropriate option.

Q Does the patient have stenosis by imaging and have ONE OR MORE of the following? Claudication (cramping pain in the leg caused by exercise such as walking) that interferes with mobility related activities of daily living. Rest pain (continuous burning pain of the lower leg or feet that is aggravated after reclining or elevating the leg and relieved by sitting or standing). Gangrene or impending gangrene of the foot or toe. Nonhealing ulcer or wound of the lower leg or foot. Note: Imaging may include duplex ultrasound, doppler, CTA, MRA and angiography.

A Possible answers: Yes No N/A

Q Does the patient have ONE OR MORE of the following? Resting ankle-brachial index (ABI) 0.9 or less. ABI greater than 1.4 and toe-brachial index less than 0.7. Exercise or hyperemic ABI of 0.9 or less. Exercise ABI more than a 20 percent decrease from baseline and delayed recovery. Exercise ABI of at least a 30 mmHg decrease from baseline and delayed recovery. Resting toe pressure of 50 mmHg or less. Transmetatarsal or ankle pulse volume recording (PVR) amplitude of 5mm or less. Transcutaneous Po₂ of 30 mmHg (4.0 kPa) or less.

A Possible answers: Yes No N/A

Q Does the patient have continued symptoms after treatment with ALL of the following? Supervised exercise sessions of 30 to 60 minutes 3 times per week for a minimum of 3 months (12 weeks). Smoking cessation or reduction for at least 12 weeks (or the patient is a nonsmoker). Medication management (Cilostazol or Pentoxifylline) for at least 12 weeks (unless contraindicated or not tolerated). Cholesterol management for at least 12 weeks.

A Possible answers: Yes No N/A

Q Does the patient have stenosis identified by imaging and have EITHER common iliac arterial lesion OR external iliac arterial lesion AND pain of the extremities that interferes with mobility related to activities of daily living? Note: Imaging may include duplex ultrasound, doppler, CTA, MRA and angiography.

A Possible answers: Yes No N/A

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Q Does the patient have stenosis identified by imaging and have EITHER femoral arterial lesion OR popliteal arterial lesion AND pain of the extremities that interferes with mobility related to activities of daily living? Note: Imaging may include duplex ultrasound, doppler, CTA, MRA and angiography.

A

Possible answers: Yes No N/A