



Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

Preview questionnaire:

Endovascular intervention, peripheral artery

For Medicare Plus BlueSM, BCN commercial and BCN AdvantageSM

Eff. Jan. 1, 2022

Endovascular intervention, peripheral artery

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit 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 we cannot authorize it, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We may retrospectively monitor compliance with this authorization requirement.

Applicable procedure codes: *0238T, *34101, *34111, *34151, *34201, *34203, *37184, *37220, *37221, *37222, *37224, *37225, *37226, *37227, *37228, *37229, *37230, *37231

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

Q Does the patient have ACUTE limb ischemia as identified by absence of a pulse distal to the identified occlusion with absent or weak arterial signal by doppler, ankle-brachial index of 0.4 or less AND ONE or MORE of the following in the affected extremity (A-E)? A. Sudden onset of pain B. Numbness C. Coldness D. Weakness E. Discoloration

A

Possible answers: Yes No N/A

Q Does the patient have vein graft stenosis identified by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography)?

A

Possible answers: Yes No N/A

Preview questionnaire:

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Q Does the patient have in-stent or recurring stenosis identified by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography) with claudication (cramping pain in the leg caused by exercise such as walking) AND ONE or MORE of the following (A-G)? A. Resting ankle-brachial index (ABI) 0.9 or less B. ABI greater than 1.4 and toe-brachial index 0.7 or less C. Exercise or hyperemic ABI of 0.9 or less D. Exercise ABI more than a 20 percent decrease from baseline and delayed recovery E. Exercise ABI of at least a 30 mmHg decrease from baseline and delayed recovery F. Resting toe pressure of 50 mmHG or less G. Transmetatarsal or ankle pulse volume recording (PVR) amplitude of 5 mm or less

A

Possible answers: Yes No N/A

Q Does the patient have in-stent or recurring stenosis identified by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography) with at least ONE of these symptoms: Rest pain; OR nonhealing ulcer or wound on the lower leg or foot for at least two weeks; OR gangrene or impending gangrene of foot or toe AND ONE or MORE of the following (A-H)? A. Resting ankle-brachial index (ABI) 0.9 or less B. ABI greater than 1.4 and toe-brachial index 0.7 or less C. Exercise or hyperemic ABI of 0.9 or less D. Exercise ABI more than a 20 percent decrease from baseline and delayed recovery E. Exercise ABI of at least a 30 mmHg decrease from baseline and delayed recovery F. Resting toe pressure of 50 mmHG or less G. Transmetatarsal or ankle pulse volume recording (PVR) amplitude of 5 mm or less H. Transcutaneous Po₂ of 30 mmHg (4.0 kPa) or less

A

Possible answers: Yes No N/A

Q Does the patient have occlusion or stenosis of at least 50 percent by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography) and have ONE OR MORE of the following? A. 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) B. Gangrene or impending gangrene of the foot or toe C. Nonhealing ulcer or wound of the lower leg or foot for at least two weeks

A

Possible answers: Yes No N/A

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

A

Possible answers: Yes No N/A

Q Does the patient have occlusion or stenosis of at least 50 percent identified by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography) AND ONE of the following (A-D)? A. Common iliac arterial lesion B. External iliac arterial lesion C. Femoral arterial lesion D. Popliteal arterial lesion

A

Possible answers: Yes No N/A

Q Does the patient have PAIN IN THE EXTREMITIES that interferes with mobility related activities of daily living AND at least one of the following (A-G)? A. Resting ankle-brachial index (ABI) 0.9 or less B. ABI greater than 1.4 and toe-brachial index 0.7 or less C. Exercise or hyperemic ABI of 0.9 or less D. Exercise ABI more than a 20 percent decrease from baseline and delayed recovery E. Exercise ABI of at least a 30 mmHg decrease from baseline and delayed recovery F. Resting toe pressure of 50 mmHG or less G. Transmetatarsal or ankle pulse volume recording (PVR) amplitude of 5 mm or less

A

Possible answers: Yes No N/A

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

A

Possible answers: Yes No N/A

Q Does the patient have occlusion or stenosis of at least 50 percent identified by imaging (such as duplex ultrasound, Doppler, CTA, MRA or angiography) AND a tibial arterial lesion?

A

Possible answers: Yes No N/A