



MASSACHUSETTS

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Medical Policy

Ultrafiltration in Decompensated Heart Failure

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Policy Number: 542

BCBSA Reference Number: 2.02.22

NCD/LCD: NA

Related Policies

None

Policy

Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity Medicare HMO BlueSM and Medicare PPO BlueSM Members

Ultrafiltration in patients with decompensated heart failure is [INVESTIGATIONAL](#).

Prior Authorization Information

Pre-service approval is required for all inpatient services for all products.

See below for situations where prior authorization may be required or may not be required for outpatient services.

Yes indicates that prior authorization is required.

No indicates that prior authorization is not required.

N/A indicates that this service is primarily performed in an inpatient setting.

	Outpatient
Commercial Managed Care (HMO and POS)	This is not a covered service.
Commercial PPO and Indemnity	This is not a covered service.
Medicare HMO BlueSM	This is not a covered service.
Medicare PPO BlueSM	This is not a covered service.

CPT Codes / HCPCS Codes / ICD Codes

Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.

Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.

CPT Codes

There is no specific CPT code for this service.

Description

Congestive heart failure is a relatively common problem and frequently results in hospitalizations and readmissions. Ultrafiltration (also referred to as aquapheresis) is a technique being evaluated for removal of excess fluid from patients with volume overload and heart failure. It removes fluid from the blood by using pressure differentials with dialysis equipment or similar filtration devices.

Ultrafiltration may offer the potential for greater and more expeditious volume and sodium removal compared with conventional therapies. Ultrafiltration is generally used for those with decompensated heart failure whose fluid overload is unresponsive to medical management.

An example of an ultrafiltration device for decompensated heart failure is the Aquadex™ FlexFlow™ System from CHF Solutions. All ultrafiltration devices for decompensated heart failure are considered investigational regardless of the commercial name, the manufacturer, or FDA approval status.

Summary

The quality of the evidence on the use of ultrafiltration in patients with decompensated heart failure remains limited. The published clinical trials involve small numbers of patients and report short-term to intermediate outcomes. Ninety-day readmission appears to be reduced in the ultrafiltration group in one study, but otherwise no studies to date address long-term mortality or morbidity, or quality-of-life outcomes. Therefore, given the uncertain impact on health outcomes, this procedure is considered investigational.

Policy History

Date	Action
6/2017	New references added from BCBSA National medical policy.
7/2016	New references added from BCBSA National medical policy.
8/2015	New references added from BCBSA National medical policy.
9/2014	New references added from BCBSA National medical policy.
8/2013	New references from BCBSA National medical policy.
11/2011-4/2012	Medical policy ICD 10 remediation: Formatting, editing and coding updates. No changes to policy statements.
4/2011	Reviewed - Medical Policy Group – Cardiology and Pulmonology. No changes to policy statements.
10/20/2010	New medical policy effective 10/ 20/2010 describing ongoing non-coverage.

Information Pertaining to All Blue Cross Blue Shield Medical Policies

Click on any of the following terms to access the relevant information:

[Medical Policy Terms of Use](#)

[Managed Care Guidelines](#)

[Indemnity/PPO Guidelines](#)

[Clinical Exception Process](#)

[Medical Technology Assessment Guidelines](#)

References

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