



MASSACHUSETTS

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Medical Policy

Intravitreal Angiogenesis Inhibitors for Choroidal Vascular Conditions

Table of Contents

- [Policy: Commercial](#)
- [Coding Information](#)
- [Information Pertaining to All Policies](#)
- [Policy: Medicare](#)
- [Description](#)
- [References](#)
- [Authorization Information](#)
- [Policy History](#)

Policy Number: 343

BCBSA Reference Number: 9.03.24A

NCD/LCD: N/A

Related Policies

- Epiretinal Radiation Therapy for Age-Related Macular Degeneration, #610
- Photodynamic Therapy for Choroidal Neovascularization, #599
- Transpupillary Thermotherapy for Treatment of Choroidal Neovascularization, #600

Policy

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

Anti-vascular endothelial growth factor therapies (anti-VEGF), ie., pegaptanib (Macugen®*), ranibizumab (Lucentis™*), bevacizumab (Avastin™), and aflibercept (Eylea™*) for the treatment of neovascular (wet) age-related macular degeneration may be **MEDICALLY NECESSARY**.

Anti-vascular endothelial growth factor therapies (anti-VEGF) are **MEDICALLY NECESSARY** for Choroidal neovascularization due to the following conditions:

- Angioid streaks,
- Central serous chorioretinopathy,
- Choroidal rupture or trauma,
- Idiopathic choroidal neovascularization,
- Multifocal choroiditis,
- Pathologic myopia,
- Presumed ocular histoplasmosis syndrome, and
- Uveitis.

Anti-vascular endothelial growth factor therapies (anti-VEGF) are **INVESTIGATIONAL** for the treatment of chorioretinal scars.

*FDA-approved indication

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)	<ul style="list-style-type: none"> • Prior authorization for commercial managed care members is required for this service when it is obtained through a home infusion company. • Prior authorization is required when these drugs are purchased by the physician and administered in the office. • Home infusion providers should use form #430 Home Infusion Therapy Prior Authorization Form.
Commercial PPO and Indemnity	<ul style="list-style-type: none"> • Prior authorization for commercial PPO members is required for this service when it is obtained through a home infusion company. • Prior authorization is not required when these drugs are purchased by the physician and administered in the office in accordance with this medical policy. • Home infusion providers should use form #430 Home Infusion Therapy Prior Authorization Form.
Medicare HMO BlueSM	No
Medicare PPO BlueSM	No

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.

The following codes are included below for informational purposes only; this is not an all-inclusive list.

The above medical necessity criteria **MUST be met for the following codes to be covered for Commercial Members: Managed Care (HMO and POS), PPO, Indemnity, Medicare HMO Blue and Medicare PPO Blue:**

CPT Codes

CPT codes:	Code Description
67028	Intravitreal injection of a pharmacologic agent

HCPCS Codes

HCPCS codes:	Code Description
C9257	Injection, bevacizumab, 0.25 mg
J0178	Injection, aflibercept, 1 mg
J2503	Injection, pegaptanib sodium, 0.3 mg
J2778	Injection, ranibizumab, 0.1 mg

J9035	Injection, bevacizumab, 10 mg
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Description

Vascular endothelial growth factor has been implicated in the pathogenesis of a variety of ocular vascular conditions characterized by choroidal neovascularization (CNV) and macular edema.

Neovascular age related macular degeneration (AMD) is characterized by CNV which is the growth of abnormal choroidal blood vessels beneath the macula. This abnormal vascular growth causes severe loss of vision and is responsible for most of the loss of vision caused by AMD. Angiostatic agents block a stage in the vascular growth pathway leading to new blood vessel formation (angiogenesis) and therefore are disease modifying by inhibiting the development of newly formed vessels. Angiogenesis inhibitors are also being evaluated for the treatment of other disorders of choroidal circulation, including central serous chorioretinopathy pathologic myopia, presumed ocular histoplasmosis syndrome, angioid streaks, idiopathic CNV, uveitis, choroidal rupture or trauma, and chorioretinal scars.

Examples of angiogenesis inhibiting drugs for treating choroidal vascular conditions are Pegaptanib (Macugen®) from Eyetech and Pfizer, ranibizumab (Lucentis™), and Bevacizumab (Avastin®) from Genentech. All other angiogenesis inhibiting drugs for treating choroidal vascular conditions are considered investigational regardless of the commercial name, the manufacturer, or FDA approval status except as noted in the policy statement.

Summary

The available literature from randomized controlled trials supports the use of anti-VEGF therapies (ranibizumab, bevacizumab, pegaptanib, aflibercept) as monotherapy for the treatment of CNV associated with AMD. The use of anti-VEGF therapies for CNV secondary to other relatively rare disorders of choroidal circulation (angioid streaks, central serous chorioretinopathy, choroidal rupture or trauma, idiopathic choroidal neovascularization, multifocal choroiditis, pathologic myopia, presumed ocular histoplasmosis syndrome, and uveitis) is supported by a few small randomized trials, numerous case series, and clinical input. Therefore, anti-VEGF therapies (ranibizumab, bevacizumab, pegaptanib aflibercept) may be considered medically necessary for CNV associated with these conditions. Anti-VEGF therapies are considered investigational for the treatment of chorioretinal scars.

Policy History

Date	Action
12/2019	Clarified coding information
3/2018	Prior authorization table clarified. 3/23/2018
8/2016	Clarified coding information.
5/2015	New references added from BCBSA National medical policy.
7/2014	Updated Coding section with ICD10 procedure and diagnosis codes, effective 10/2015.
5/2014	New references from BCBSA National medical policy.
5/2013	New references from BCBSA National medical policy.
2/2013	BCBSA National medical policy review. New medically necessary indications described. Effective 2/4/2013.
11/2011-4/2012	Medical policy ICD 10 remediation: Formatting, editing and coding updates. No changes to policy statements.
1/1/2012	New policy, effective (01/01/2012), describing covered and non-covered indication.

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](#)

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