Coverage Summary

Renal Services and Procedures

Policy Number: R-004  Products: UnitedHealthcare Medicare Advantage Plans  Original Approval Date: 07/16/2008

Approved by: UnitedHealthcare Medicare Benefit Interpretation Committee  Last Review Date: 09/18/2018

Related Medicare Advantage Policy Guidelines:

- Therapeutic Embolization (NCD 20.28)
- Treatment of Kidney Stones (NCD 230.1)

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I. COVERAGE

Coverage Statement: Renal services and procedures are covered when Medicare coverage criteria are met.

Guidelines/Notes:

1. Lithotripsy

   In addition to the traditional surgical/endoscopic techniques for the treatment of kidney stones, the following lithotripsy techniques are also covered:

   a. Extracorporeal Shock Wave Lithotripsy (ESWL) for use in the treatment of upper urinary tract kidney stones
b. Percutaneous lithotripsy (or nephrolithotomy) of kidney stones by ultrasound or by the related techniques of electrohydraulic or mechanical lithotripsy

c. Transurethral ureteroscopic lithotripsy for the treatment of urinary tract stones of the kidney or ureter

*See the NCD Treatment of Kidney Stones (230.1).* (Accessed September 4, 2018)

2. **Therapeutic Embolization**

   Therapeutic embolization is covered when done for hemorrhage and for other conditions amenable to treatment by the procedure, when reasonable and necessary for the individual patient. Renal embolization for the treatment of renal adenocarcinoma continues to be covered, effective December 15, 1978, as one type of therapeutic embolization:

   a. Hemorrhage is covered and other conditions amenable to this treatment.

   b. Renal embolization for renal adenocarcinoma to:

      - Reduce tumor vascularity preoperatively;
      - Reduce tumor bulk in inoperable cases; or Palliate specific symptoms

   *See the NCD Therapeutic Embolization (20.28).* (Accessed September 4, 2018)

3. **Face-to-Face Kidney Disease Education (KDE)**

   Face to face Kidney Disease Education (KDE) services are covered for the following:

   - Patient diagnosed with Stage IV CKD, using the Modification of Diet in Renal Disease (MDRD) Study formula (severe decrease in GFR, GFR value of 15-29 mL/min/1.73 m²), and
   - Patient with a referral from the physician managing the patient’s kidney condition. The referral should be documented in the patient’s medical records.

   **Notes:**

   - **Qualified Persons**

     Medicare Part B covers KDE services provided by a ‘qualified person,’ meaning a:

     - Physician (as defined in Section 30 of the Medicare Benefit Policy Manual Chapter 15),
     - Physician assistant, nurse practitioner, or clinical nurse specialist (as defined in Sections 190, 200, and 210 of the Medicare Benefit Policy Manual Chapter 15),
     - Hospital, critical access hospital (CAH), skilled nursing facility (SNF), comprehensive outpatient rehabilitation facility (CORF), home health agency (HHA), or hospice, if the KDE services are provided in a rural area (using the actual geographic location core based statistical area (CBSA) to identify facilities located in rural areas), or
     - Hospital or CAH that is treated as being rural (was reclassified from urban to rural status per 42 CFR 412.103). (Accessed September 4, 2018)

     The “incident to” requirements at section 1861(s) (2) (A) of the Social Security Act (the Act) do not apply to KDE services. The following providers are not ‘qualified persons’ and are excluded from furnishing KDE services:

     - A hospital, CAH, SNF, CORF, HHA, or hospice located outside of a rural area (using the actual geographic location CBSA to identify facilities located outside of a rural area), unless the services are furnished by a hospital or CAH that is treated as being in a rural area; and
     - Renal dialysis facilities.

   - **Limitations for Coverage**

     - Medicare Part B covers KDE services up to six (6) sessions as a patient lifetime maximum.
A session is 1 hour. In order to bill for a session, a session must be at least 31 minutes in duration. A session that lasts at least 31 minutes, but less than 1 hour still constitutes 1 session.

- **On an individual basis or in group settings; if the services are provided in a group setting, a group consists of 2 to 20 individuals who not all need be UnitedHealthcare Medicare members.**

- **HCPCS Codes**

  Two HCPCS codes were created for this benefit and one or the other must be present, along with the ICD codes for chronic kidney disease, Stage IV (severe), in order for a claim to be processed and paid correctly. They are:

  - **G0420:** Face-to-face educational services related to the care of chronic kidney disease; individual, per session, per one hour
  - **G0421:** Face-to-face educational services related to the care of chronic kidney disease; group, per session, per one hour


  For claims processing instructions, see the Medicare Claims Processing Manual, Chapter 32, Section 20 - Billing Requirements for Coverage of Kidney Disease Patient Education Services. (Accessed September 4, 2018)

**II. DEFINITIONS**

**III. REFERENCES**

See above

**IV. REVISION HISTORY**

04/01/2019  Updated policy introduction; added language to clarify:

  - There are instances where [the Coverage Summary] may direct readers to a UnitedHealthcare Commercial Medical Policy, Medical Benefit Drug Policy, and/or Coverage Determination Guideline (CDG)
  
  - In the absence of a Medicare National Coverage Determination (NCD), Local Coverage Determination (LCD), or other Medicare coverage guidance, CMS allows a Medicare Advantage Organization (MAO) to create its own coverage determinations, using objective evidence-based rationale relying on authoritative evidence (Medicare IOM Pub. No. 100-16, Ch. 4, §90.5)

09/18/2018  Annual review with the following updates:

  Guideline 1 (Lithotripsy)

  - Deleted the following: “Treatment of kidney stones is covered with traditional surgery/endoscopy or lithotripsy techniques. Examples of covered lithotripsy techniques include”; and
  
  - Replaced with the following from the reference NCD for the Treatment of Kidney Stones (230.11): “In addition to the traditional surgical/endoscopic techniques for the treatment of kidney stones, the following lithotripsy techniques are also covered”
Definitions – deleted the definitions of the following as these are also defined in the reference NCD for Treatment of Kidneys Stones (230.11)

- Extracorporeal Shock Wave Lithotripsy (ESWL)
- Percutaneous Lithotripsy (or Nephrolithotomy)
- Transurethral Ureteroscopic Lithotripsy

09/19/2017  Annual review; no updates.

09/20/2016  Annual review with the following update:
Guideline 3 (Face to Face Kidney Education) - deleted reference to “ICD-9 code 585.4” in the Note section, under HCPCS codes

10/20/2015  Annual review; no updates.

10/21/2014  Annual review; updated the definitions of Extracorporeal Shock Wave Lithotripsy (ESWL), Percutaneous Lithotripsy (or Nephrolithotomy) and Transurethral Ureteroscopic Lithotripsy to include the reference link to the NCD Treatment of Kidney Stones (230.1).

10/24/2013  Annual review; no updates.

10/31/2012  Annual review; no updates.

10/13/2011  Annual review; no updates.

09/07/2010  Guidelines for Kidney Disease Education (KDE) Services updated to define the qualified persons.

08/24/2010  Policy updated to include the Medicare benefit coverage language for Kidney Disease Education (KDE) services.