Local Coverage Determination (LCD): Duplex scan for erectile dysfunction (L33816)

Contractor Information

<table>
<thead>
<tr>
<th>Contractor Name</th>
<th>Contract Type</th>
<th>Contract Number</th>
<th>Jurisdiction</th>
<th>State(s)</th>
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<tr>
<td>First Coast Service Options, Inc.</td>
<td>A and B MAC</td>
<td>09102 - MAC B</td>
<td>J - N</td>
<td>Florida</td>
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<td>First Coast Service Options, Inc.</td>
<td>A and B MAC</td>
<td>09202 - MAC B</td>
<td>J - N</td>
<td>Puerto Rico</td>
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<td>First Coast Service Options, Inc.</td>
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<td>09302 - MAC B</td>
<td>J - N</td>
<td>Virgin Islands</td>
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LCD Information

Document Information

<table>
<thead>
<tr>
<th>LCD ID</th>
<th>L33816</th>
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<tbody>
<tr>
<td>Original ICD-9 LCD ID</td>
<td>L30870</td>
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LCD Title
Duplex scan for erectile dysfunction

Proposed LCD in Comment Period
N/A

Source Proposed LCD
N/A

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A duplex scan (also known as duplex ultrasonography) is a simple, painless, non-invasive examination that uses sound waves to take images of the blood vessels and blood flow. It allows detailed assessment of the major veins and arteries.

Duplex scan is used to evaluate blood flow, venous leak, signs of artherosclerosis, and scarring or calcification of erectile tissue. Erection is induced by injecting prostaglandin, a hormone-like stimulator produced in the body. Ultrasound is then used to visualize vascular dilation and measure penile blood pressure (which may also be measured with a special cuff). Measurements are compared to those taken when the penis is flaccid. Duplex scan of the penile vessels is a diagnostic study. It should not be used for routine monitoring in a rehabilitation protocol or post-operative follow-up protocol.

Indications

Duplex scan of the penile vessels will be considered medically reasonable and necessary for

- The treatment failure of erectile dysfunction in patients who have sustained a documented groin, pelvic or vascular injury where a vascular etiology for impotence is suspected.
- The differentiation of ischemic priapism from non ischemic priapism for determining appropriate medical management.
- Patients with a lifetime history erectile dysfunction.
- For assisting in determining whether the cause of erectile dysfunction is psychogenic or vascular in origin.
- Peyronie’s Disease

Limitations

Duplex scan of the penile vessels will be considered not medically reasonable and necessary:

- when not preceded by pharmacological/medicinal treatment
- when performed as a routine procedure
- when the outcome is not contributory to a plan of treatment

Training and Education

All non-invasive vascular diagnostic studies must be: (1) performed by a qualified physician, or (2) performed under the general supervision of a qualified physician by a technologist who has demonstrated minimum entry level competency by being credentialed in vascular technology, and/or (3) performed in a laboratory accredited in vascular technology.

Examples of certification in vascular technology for non-physician personnel include:

- Registered Vascular Technologist (RVT) credential
- Registered Vascular Specialist (RVS) credential

These credentials must be provided by nationally recognized credentialing organizations such as:
• The American Registry of Diagnostic Medical Sonographers (ARDMS) which provides RDMS and RVT credentials

• The Cardiovascular Credentialing International (CCI) which provides RVS credential

Appropriate nationally recognized laboratory accreditation bodies include:

• Intersocietal Commission for the Accreditation of Vascular Laboratories (ICAVL)

• American College of Radiology (ACR)

General Supervision means the procedure is furnished under the physician’s overall direction and control, but the physician’s presence is not required during the performance of the procedure. Under general supervision, the training of the nonphysician personnel who actually performs the diagnostic procedure and the maintenance of the necessary equipment and supplies are the continuing responsibility of the physician.

Coding Information

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

999x  Not Applicable

Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

N/A

CPT/HCPCS Codes

Group 1 Paragraph:
N/A

Group 1 Codes:

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<th>Description</th>
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<tr>
<td>93980</td>
<td>DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF PENILE VESSELS; COMPLETE STUDY</td>
</tr>
<tr>
<td>93981</td>
<td>DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF PENILE VESSELS; FOLLOW-UP OR LIMITED STUDY</td>
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ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph:
N/A

Group 1 Codes:

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<th>ICD-10 Codes</th>
<th>Description</th>
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<tr>
<td>F52.21</td>
<td>Male erectile disorder</td>
</tr>
<tr>
<td>F52.8</td>
<td>Other sexual dysfunction not due to a substance or known physiological condition</td>
</tr>
<tr>
<td>N48.30 - N48.39</td>
<td>Priapism, unspecified - Other priapism</td>
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### ICD-10 Codes

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<tr>
<th>ICD-10 Code</th>
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<tbody>
<tr>
<td>N48.6</td>
<td>Induration penis plastica</td>
</tr>
<tr>
<td>N50.1</td>
<td>Vascular disorders of male genital organs</td>
</tr>
<tr>
<td>N52.01 - N52.9</td>
<td>Erectile dysfunction due to arterial insufficiency - Male erectile dysfunction, unspecified</td>
</tr>
<tr>
<td>S35.8X1A - S35.8X9S</td>
<td>Laceration of other blood vessels at abdomen, lower back and pelvis level, initial encounter - Unspecified injury of other blood vessels at abdomen, lower back and pelvis level, sequela</td>
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</tbody>
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### ICD-10 Codes that DO NOT Support Medical Necessity

ICD-10 Additional Information

N/A

### General Information

**Associated Information**

**Documentation Requirements**

The medical record should include a thorough patient history and physical examination which includes sexual history, a history of medications which can cause erectile dysfunction, past medical history including the identification of medical conditions that can contribute to impotence, psychological risk factors, conflicts with partner associated with increased anxiety and tension.

Duplex scan of the penis performed due to erectile dysfunction should include documentation which supports all of the following:

- Penile response to pharmacotesting is suboptimal or unchanged PRIOR to the performance of the duplex scan
- Failure of treatment modality for erectile dysfunction
- The outcome of the duplex scan will be contributory to the decision making process and/or provide additional information relevant to the patient’s care

**Utilization Guidelines**

It is expected that these services would be performed as indicated by current medical literature and/or standards of practice. When services are performed in excess of established parameters, they may be subject to medical review.

Studies ordered for routine monitoring will not be covered.

**Sources of Information and Basis for Decision**

American Urological Association clinical guidelines. Management of erectile dysfunction ('05/Updated'06)


Abstract

Revision History Information

<table>
<thead>
<tr>
<th>Revision History Date</th>
<th>Revision History Number</th>
<th>Revision History Explanation</th>
<th>Reason(s) for Change</th>
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<tr>
<td>10/01/2016</td>
<td>R1</td>
<td>Based on CR 9677 (Annual 2017 ICD-10-CM Update), the LCD was revised; The following ICD-10 codes were added to these code ranges in the ICD-10 Codes that Support Medical Necessity field: N52.35 was added to code range N52.01 - N52.9 in Group 1 N52.36 was added to code range N52.01 - N52.9 in Group 1 N52.37 was added to code range N52.01 - N52.9 in Group 1</td>
<td>• Revisions Due To ICD-10-CM Code Changes</td>
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Associated Documents

Attachments
N/A

Related Local Coverage Documents
N/A

Related National Coverage Documents
N/A

Keywords

N/A