



# AmeriHealth Caritas™

## New Hampshire

**To:** AmeriHealth Caritas New Hampshire Providers  
**Date:** March 17, 2022  
**Subject:** Endovascular treatment for intermittent claudication policy

**Summary: Certain requests for endovascular revascularization for treatment of intermittent claudication are considered medically necessary but require prior authorization.**

Endovascular revascularization for treatment of intermittent claudication is clinically proven and, therefore, medically necessary for members with peripheral artery disease when all of the following criteria are met (Conte, 2015; Gerhard-Herman, 2017):

- Significant functional or lifestyle-limiting disability.
- Hemodynamically significant aortoiliac occlusive disease, femoropopliteal disease, or multivessel tibial disease with a stenosis of at least 50%.
- Failure of at least 12 weeks of guideline-directed pharmacotherapy or exercise therapy, or both, to control symptoms.
- Documented discontinuation of smoking and other tobacco use.
- There is a reasonable likelihood of symptomatic improvement with endovascular treatment.
- The benefits of treatment outweigh the potential risks.

Prior authorization must be obtained before performing endovascular revascularization when the above criteria are present.

For any determinations of medical necessity for medications, refer to the applicable state-approved pharmacy policy.

### Limitations

All other uses for endovascular revascularization for members with intermittent claudication are investigational/not clinically proven, and therefore, not medically necessary, as their effectiveness has not been established, including, but not limited to (Conte, 2015; Gerhard-Herman, 2017):

- Treatment of asymptomatic disease, regardless of hemodynamic measures or imaging findings demonstrating presence of disease.
- Treatment of isolated infrapopliteal artery disease.
- Treatment done solely to prevent progression to chronic limb ischemia.



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### Alternative covered services

- Guideline-directed risk reduction measures (e.g., diet and smoking cessation).
- Pharmacotherapy (antiplatelet drugs, statins, or medications to lower blood pressure).
- Supervised exercise therapy.
- Home-based exercise therapy.
- Open surgical revascularization.

### Questions:

If you have any questions regarding a prior authorization request submitted for AmeriHealth Caritas New Hampshire, please call Provider Services at **1-888-765-6394**.

### References

Conte MS, Pomposelli FB, Clair DG, et al. Society for Vascular Surgery practice guidelines for atherosclerotic occlusive disease of the lower extremities: Management of asymptomatic disease and claudication. *J Vasc Surg*. 2015;61(3 Suppl):2s-41s. Doi: 10.1016/j.jvs.2014.12.009.

Gerhard-Herman MD, Gornik HL, Barrett C, et al. 2016 AHA/ACC guideline on the management of patients with lower extremity peripheral artery disease: Executive summary: A report of the American College of Cardiology/American Heart Association Task Force on clinical practice guidelines. *Circulation*. 2017;135(12):e686-e725. Doi: 10.1161/cir.0000000000000470.

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