

# Automated External Defibrillators (AEDs)

LOB(s): ⊠ Commercial	State(s): ⊠ Idaho	🛛 Montana 🖾 Oregon	🛛 Washington	Other:
🛛 Medicare				
🖾 Medicaid	🛛 Oregon	Washington		

## **Enterprise Policy**

PacificSource is committed to assessing and applying current regulatory standards, widely-used treatment guidelines, and evidenced-based clinical literature when developing clinical criteria for coverage determination. Each policy contains a list of sources (references) that serves as the summary of evidence used in the development and adoption of the criteria. The evidence was considered to ensure the criteria provide clinical benefits that promote patient safety and/or access to appropriate care. Each clinical policy is reviewed, updated as needed, and readopted, at least annually, to reflect changes in regulation, new evidence, and advancements in healthcare.

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, PacificSource Community Health Plans, and PacificSource Community Solutions in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determinations are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage.

## Background

Cardiovascular mortality as a consequence of ventricular fibrillation (VF) or ventricular tachycardia (VT) continues to be a major health problem despite advances in the overall management of cardiovascular disease. Sudden cardiac death kills approximately 400,000 people per year. About 10 to 15% of individuals who experience life threatening VT or VF recover, usually with an external cardiac defibrillator. These survivors have various therapeutic options such as anti-arrhythmic drugs, radiofrequency or surgical ablation of VT focus, or implantable cardioverter-defibrillators (ICDs). Available literature indicates ICDs are now widely used for the secondary prevention of sudden cardiac death due to VF or VT.

Automated external defibrillators (AED) are portable electronic devices that allow minimally trained individuals to provide electric shock to prevent death due to sudden cardiac arrest. These devices monitor heart rhythm and can, if needed, deliver an electric shock to the chest wall much like a traditional (paddle) defibrillator in a hospital.

### **Commercial**

#### Prior authorization is required

#### I. Automated External Defibrillator (AED)

PacificSource considers an Automated External Defibrillator medically necessary when **ALL** of the following criteria is met:

- A. Member is 1-8 years of age AND less than 25kg (55lbs)
- **B.** Pediatric Cardiologist documentation stating Implantable Cardioverter Defibrillator (ICD) is warranted but contraindicated
- **C.** Pediatric Cardiologist documentation stating member is not a candidate for a wearable cardioverter / defibrillator

#### Medicaid

PacificSource Community Solutions follows the hierarchical process detailed in the "Clinical Criteria Used in UM Decisions" policy when determining coverage for Automated Externa Defibrillators (AEDs). PCS evaluates services based on the relevant coverage guidelines, limitations, and restrictions specified in the OHP Prioritized List of Health Services and its guidelines, as well as any applicable Oregon Administrative Rules (OARs).

PacificSource follows the "Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)" criteria for members under 21 and Young Adults with Special Health Care Needs (YSHCN).

#### **Medicare**

PacificSource Medicare follows CMS guidelines and criteria. In the absence of CMS guidelines and criteria, PacificSource Medicare will follow internal policy for determination of coverage and medical necessity.

#### Experimental/Investigational/Unproven

PacificSource considers AED's to be experimental, investigational and/or unproven for all other indications.

## **Coding Information**

The following list of codes are for informational purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

E0617 External defibrillator with integrated electrocardiogram analysis

CPT® codes, descriptions and materials are copyrighted by the American Medical Association (AMA).

HCPCS® codes, descriptions and materials are copyrighted by Centers for Medicare and Medicaid Services (CMS).

## **Related Policies**

Clinical Criteria Used in UM Decisions

## References

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Sharieff, W., & Kaulback, K. (2007). Assessing automated external defibrillators in preventing deaths from sudden cardiac arrest: an economic evaluation. International journal of technology assessment in health care, 23(3), 362–367. <u>https://doi.org/10.1017/s0266462307070523</u>

Oregon Administrative Rules (OARs). Oregon Health Authority. Health Systems: Medical Assistance Programs – Chapter 410.

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## Appendix

Policy Number:				
Effective: 7/1/2024	Next review:	5/1/2026		
Policy type: Enterprise				
Author(s):				
Depts.: Health Services				
Applicable regulation(s): OARs 410-120-1200, 410-122-0080, 410-141-3820, 410-141-3825, 410-151-0001, 410-151-0002, and 410-151-0003				
Commercial OPs: 6/2025				
Government OPs: 6/2025				