IMPLANTABLE INFUSION PUMP
SUR707.008

COVERAGE:

An Implantable Infusion Pump (IIP) MAY BE ELIGIBLE FOR COVERAGE for the following conditions (only if the drug is FDA approved for both the condition and route of administration):

- Malignant conditions where efficiency has been established including:
  a) Primary liver cancer
  b) Metastatic Colorectal cancer with metastasis limited to the liver
  c) Head and/or neck cancer (intra-arterial infusion of chemotherapeutic agents)

- Severe, chronic intractable pain

- Chronic spastic conditions where less invasive therapies have been documented to be unsuccessful such as in patients who are unresponsive to or who cannot tolerate oral Baclofen therapy. In these cases, intrathecal Baclofen may be indicated.

An IIP is considered INVESTIGATIONAL for all other uses (e.g., heparin for thromboembolic disease or insulin for diabetes).

DESCRIPTION:

An IMPLANTABLE INFUSION PUMP (IIP) is intended to provide long-term continuous or intermittent drug infusion. Possible routes of administration include intravenous, intra-arterial, subcutaneous, intraperitoneal, intrathecal, epidural, and intraventricular. The IIP is surgically placed in a subcutaneous pocket under the infraclavicular (behind the clavicle) fossa (depressed area) or in the abdominal wall, and a catheter is threaded into the desired position. A drug is infused over an extended period of time, and the drug reservoir may be refilled as needed by an external needle injection through a self-sealing septum in the IIP. Bacteriostatic water or physiologic saline is often used to dilute drugs. A heparinized saline solution may also be used during an interruption of drug therapy to maintain catheter patency.

An alternative to an IIP is the placement of a subcutaneous access port with a disposable external infuser. The disposable external infuser, such as Travenol sets, may be utilized in an office based setting. The disposable external infusers are intended to provide shorter term drug administration via a Huber needle inserted in a Mediport which is placed simultaneously.

Maintenance of the system includes periodic replacement of the
disposable units on a monthly basis. Such external set-ups are more cost effective than the IP units only if the planned time span of treatment is one year or less.

RATIONALE:

None

PRICING:

Office chemotherapy includes all supplies necessary for administration, such as needles, cassettes, tubing, dressing supplies, heparin flush kits, etc. Chemotherapy agents, office visits, laboratory and radiological services can be billed separately from the chemotherapy administration.

DISCLAIMER:

State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, takes precedence over Medical Policy and must be considered first in determining coverage. The member’s contract benefits in effect on the date that services are rendered must be used. Any benefits are subject to the payment of premiums for the date on which services are rendered. Medical technology is constantly evolving, and we reserve the right to review and update Medical Policy periodically. HMO Blue Texas physicians who are contracted/affiliated with a capitated IPA/medical group must contact the IPA/medical group for information regarding HMO claims/reimbursement information and other general polices and procedures.

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