OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES)

Non-Discrimination Statement and Multi-Language Interpreter Services information are located at the end of this document.

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member’s specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

This Medical Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.

The section identified as “Description” defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as “Criteria” defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

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OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES) (cont.)

**Description:**

**Maze Procedure:**
The classic Cox maze III procedure is a surgical treatment for atrial fibrillation or flutter that has not responded to medical antiarrhythmic therapies. Small sequential atrial incisions are made, causing scar tissue to form and interrupt the aberrant atrial conduction pathways. The incisions are strategically placed to form a specific channel in an attempt to direct the electrical signals through a controlled path, or maze, to the ventricles. The maze procedure may be performed in conjunction with other cardiac surgery, such as valve repair or replacement. The classic Cox maze III procedure is performed on a non-beating heart during cardiopulmonary bypass. Simplification of the maze procedure (modified maze) has evolved using different ablation tools such as microwave, cryotherapy, ultrasound and radiofrequency (RF) energy sources to create the atrial lesions instead of the traditional incisional technique.

**Minimally Invasive (Thoracoscopic) Techniques or Modified Maze:**
Less invasive, transthoracic, endoscopic and off-pump procedures to treat drug-resistant atrial fibrillation have been investigated. Alternative surgical approaches include mini-thoracotomy and total thoracoscopic with video assistance. Open thoracotomy and mini-thoracotomy employ cardiopulmonary bypass and open heart surgery, while thoracoscopic approaches do not enter the heart and use epicardial ablation lesion sets performed on a beating heart. RF energy is most commonly applied. Other types of energy sources such as cryoablation and high-intensity ultrasound have also been used. Minimally invasive procedures may be referred to as modified maze.

**Hybrid Techniques:**
Hybrid ablation utilizes both thoracoscopic and percutaneous approaches in the same individual. Ablation is performed on the outer surface of the heart (epicardial) via the thoracoscopic approach and on the inner surface of the heart (endocardial) via the percutaneous approach. The rationale for doing a hybrid procedure is that a combination of both techniques may result in more complete ablation.

The hybrid approach first involves thoracoscopy with epicardial ablation. Following this procedure, an electrophysiologic study is performed percutaneously followed by endocardial ablation as directed by the results of electrophysiology. Most commonly, the electrophysiology study and endocardial ablation are done immediately after the thoracoscopy as part of a single procedure. However, some hybrid approaches perform the electrophysiology study, and endocardial ablation as directed by the electrophysiology study, on a separate day.
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Criteria:

- Maze or modified maze procedure for treatment of symptomatic atrial fibrillation or flutter performed on a non-beating heart during cardiopulmonary bypass with concomitant cardiac surgery is considered **medically necessary**.

- Maze or modified maze procedure for treatment of atrial fibrillation or flutter performed on a non-beating heart during cardiopulmonary bypass without concomitant cardiac surgery is considered **not medically necessary**.

- Minimally invasive, off-pump maze procedures (i.e., modified maze procedures), including those done via mini-thoracotomy, for treatment of atrial fibrillation or flutter are considered experimental or investigational based upon:
  1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
  2. Insufficient evidence to support improvement of the net health outcome, and
  3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives, and
  4. Insufficient evidence to support improvement outside the investigational setting.

- Hybrid ablation for the treatment of atrial fibrillation or flutter is considered experimental or investigational based upon:
  1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
  2. Insufficient evidence to support improvement of the net health outcome, and
  3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives, and
  4. Insufficient evidence to support improvement outside the investigational setting.
OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES) (cont.)

Resources:

Literature reviewed 06/19/18. We do not include marketing materials, poster boards and non-published literature in our review.

The BCBS Association Medical Policy Reference Manual (MPRM) policy is included in our guideline review. References cited in the MPRM policy are not duplicated on this guideline.


5. Edgerton JR. Stand Alone Surgical Ablation Minimally Invasive Pulmonary Vein Isolation and Partial Autonomic Denervation for Surgical Treatment of Atrial Fibrillation.


OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES) (cont.)

Resources: (cont.)


OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES) (cont.)

**Resources:** (cont.)


Non-Discrimination Statement:

Blue Cross Blue Shield of Arizona (BCBSAZ) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BCBSAZ provides appropriate free aids and services, such as qualified interpreters and written information in other formats, to people with disabilities to communicate effectively with us. BCBSAZ also provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, call (602) 864-4884 for Spanish and (877) 475-4799 for all other languages and other aids and services.

If you believe that BCBSAZ has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: BCBSAZ’s Civil Rights Coordinator, Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, (602) 864-2288, TTY/TDD (602) 864-4823, crc@azblue.com. You can file a grievance in person or by mail or email. If you need help filing a grievance BCBSAZ’s Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1–800–368–1019, 800–537–7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/index.html

Multi-Language Interpreter Services:

Spanish: Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue Cross Blue Shield of Arizona, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 602-864-4884.

Navajo: Díí kweé atah níiníigíí Blue Cross Blue Shield of Arizona haada yít’éego bíná’ídílídigo éí doodago Háída bijá aniyeedííi t’áadóo le’é’é yína’ídílídigo beehaz’aáníi hólo díí t’áá hazaad’éhí háká a’doowolgo bee haz’á doo báah ilíngóó. Atá’ halné’égiíi koj’é’ bich’é’ hodilíníí 877-475-4799.

Chinese: 如果您，或是您正協助的對象，有關於美國項目之相關問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 在此插入數字 877-475-4799。

Vietnamese: Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue Cross Blue Shield of Arizona quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một người dịch viên, xin gọi 877-475-4799.

Arabic: إن كان لديك أو لدى شخص تساعده أسئلة بخصوص خاصية Blue Cross Blue Shield of Arizona، لديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أي تكلفة. للتحدث مع مترجم اتصل ب 877-475-4799.
OPEN AND THORACOSCOPIC APPROACHES TO TREAT ATRIAL FIBRILLATION AND ATRIAL FLUTTER (MAZE AND RELATED PROCEDURES) (cont.)

Multi-Language Interpreter Services: (cont.)

Tagalog: Kung ikaw, o ang ibang tulong sa Blue Cross Blue Shield of Arizona, may karapatang tinutulungan ng isang tagasalin, tumawag sa 877-475-4799.

Korean: 안약 귀하 또는 귀하와 동행 있는 어떤 사람이 Blue Cross Blue Shield of Arizona에 관해서 질문이 있으면 귀하의 도움과 정보를 제공하기 위함으로서 비용 부담없이 연락을 할 수 있는 권리가 있습니다. 그렇게 동덕사와 매니지하기 위해서는 877-475-4799로 전화하시십시오.

French: Si vous, ou quelqu’un que vous êtes en train d’aider, a des questions à propos de Blue Cross Blue Shield of Arizona, vous avez le droit d’obtenir de l’aide et l’information dans votre langue à aucun coût. Pour parler à un interprète, appelez 877-475-4799.

German: Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue Cross Blue Shield of Arizona haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 877-475-4799 an.

Russian: Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue Cross Blue Shield of Arizona, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 877-475-4799.

Japanese: ご本人様、またはお客様の身の回りの方でも、Blue Cross Blue Shield of Arizonaにおいてご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳とお話される場合、877-475-4799 までお電話ください。

Farsi: آگاه شما یا کسی که شما به آن کمک می‌کنید، سوالات مربوط به Blue Cross Blue Shield of Arizona را مطرح کرده‌اید، به شما خدمات رایگان دریافت نمایید 877-475-4799.

Assyrian: یارمه، یا کسی که شما به او کمک می‌کنید، سوالات مربوط به Blue Cross Blue Shield of Arizona را مطرح کرده‌اید، به شما خدمات رایگان دریافت نمایید 877-475-4799.

Serbo-Croatian: Ukoliko Vi ili neko kome Vi pomažete ima pitanje o Blue Cross Blue Shield of Arizona, imate pravo da besplatno dobijete pomoć i informacije na Vašem jeziku. Da biste razgovarali sa prevodiocem, nazovite 877-475-4799.

Thai: หากคุณหรือคนที่ช่วยเหลือคุณมีคำถามเกี่ยวกับ Blue Cross Blue Shield of Arizona คุณมีสิทธิ์ใช้บริการช่วยเหลือและข้อมูลภาษาของคุณได้โดยไม่เสียค่าใช้จ่าย โปรดโทรมาที่ 877-475-4799.