GUIDELINES
This policy does not certify benefits or authorization of benefits, which is designated by each individual policyholder contract. Paramount applies coding edits to all medical claims through coding logic software to evaluate the accuracy and adherence to accepted national standards. This guideline is solely for explaining correct procedure reporting and does not imply coverage and reimbursement.

DESCRIPTION
The Peristeen Anal Irrigation System (Coloplast Corp., Minneapolis, MN) is designed to minimize the likelihood of involuntary bowel leakage or constipation. The device introduces water into the colon via a rectal catheter. Within the rectal catheter, an incorporated inflatable balloon is intended to assist in holding the catheter in place, thereby promoting adequate evacuation of the contents of the lower colon. The water stimulates the bowel and flushes out the stool over approximately 10 to 30 minutes. The device is designed to be used routinely (daily or every other day). The manufacturer suggests that it may take 4 to 12 weeks to establish a regular routine of use. Parameters that may be adjusted for individuals include the volume of water used, the frequency of irrigation, and the amount of air pumped into the balloon.

The system consists of a single-use irrigation catheter that incorporates an inflatable balloon to keep the catheter in place during the procedure and retain the water that flows into the colon. The rectal catheter is non-sterile, intended for single-use, and packaged and labeled accordingly. The other components may be used multiple times.

The Peristeen Anal Irrigation System is a prescriptive device and should only be prescribed by a licensed physician for patients at least two years of age with neurogenic bowel dysfunction who suffer from fecal incontinence, chronic constipation, and/or time-consuming bowel management procedures. However, substantial questions about comparative effectiveness and safety remain. Although studies reported no serious complications, postmarketing safety data include reports of bowel perforations related to use of the Peristeen system in adults and children.

POLICY
The Peristeen Anal Irrigation System (A4459) is non-covered.

HMO, PPO, Individual Marketplace, Elite, Advantage
Paramount considers the use of a manual pump enema system (e.g., Peristeen Anal Irrigation System) to not be medically necessary. Manual pump enema systems do not meet either the Durable Medical Equipment (DME) benefit or the Prosthetic Benefit criteria.

Unlisted procedure code E1399 is considered incorrect coding for a manual pump enema system such as the Peristeen Anal Irrigation System.

CODING/BILLING INFORMATION
The appearance of a code in this section does not necessarily indicate coverage. Codes that are covered may have selection criteria that must be met. Payment for supplies may be included in payment for other services rendered.

<table>
<thead>
<tr>
<th>HCPCS CODE</th>
<th>Description</th>
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<tbody>
<tr>
<td>A4459</td>
<td>Manual pump enema system, includes balloon, catheter and all accessories, reusable, any type</td>
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</table>

TAWG REVIEW DATES: 09/22/2017

REVISION HISTORY EXPLANATION
09/22/17: Policy created to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG).

REFERENCES/RESOURCES
Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
Ohio Department of Medicaid [http://jfs.ohio.gov/](http://jfs.ohio.gov/)