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
Cutaneous vascular lesions are flat vascular malformations that tend to persist, or raised vascular lesions, known as hemangiomas that are generally raised and curled or curved that tend to regress.

Vascular birthmarks are commonly encountered in children and are classified as either hemangiomas or vascular malformations. Congenital hemangiomas are benign tumors of the vascular endothelium that appear at or shortly after birth. A superficial capillary, or strawberry, hemangioma accounts for approximately 50%-60% of cases. In contrast, vascular malformations are not neoplasms but permanent morphogenic abnormalities of capillaries, veins, arteries or lymphatic vessels. Flat lesions (vascular malformations) tend to persist, while raised lesions (hemangiomas) tend to regress.

Port-wine stains (PWS) lesions are congenital vascular malformation of the skin. PWS are a type of vascular lesion involving the superficial capillaries of the skin. PWS are chronic lesions characterized by enlarged and dilated venules and capillaries in the superficial dermis; the lesions can extend into deeper vessels of the dermis and subcutaneous tissues. It starts out pinkish or reddish and turns darker as the child grows. Early treatment is usually recommended in order to prevent enlargement, to improve the patient’s appearance, and to reduce the likelihood of medical complications.

The goals of pulsed dye laser (PDL) therapy for cutaneous vascular lesions, specifically PWS lesions and hemangiomas, are to remove, lighten, reduce in size, or cause regression of the lesions to relieve symptoms, to alleviate or prevent medical or psychological complications, and to improve cosmetic appearance. This is accomplished when the PDL emits a specific color or light wavelength that is preferential absorbed energy by the hemoglobin within the targeted vascular lesions, which causes the vessel thermal destruction while sparing the surrounding normal tissues.

Refinement of the technology includes a cryogen spray cooled (CSC) that involves the application of a cryogen spurt to the skin milliseconds prior to laser irradiation. This cools the epidermis thereby reducing thermal injury during treatment.

POLICY

**HMO, PPO, Individual Marketplace, Elite, Advantage**

Pulsed dye laser (PDL) therapy (17106, 17107, 17108) for treatment of cutaneous vascular lesions, Port-wine stains and Cutaneous hemangioma vascular malformations, do not require prior authorization when medically indicated criteria is met, effective 1/1/2020.

**HMO, PPO, Individual Marketplace, Elite, Advantage**

Coverage for the treatment of a cutaneous hemangioma, port wine stain, or other vascular lesion is dependent upon benefit plan language, may be subject to the provisions of a cosmetic and/or reconstructive benefit and may be governed by state mandates. Under many benefit plans, the treatment of a cutaneous hemangioma, port wine stain, or other vascular lesion is not covered when performed solely for the purpose of improving or altering appearance or self-esteem, or to treat psychological symptomatology or psychosocial complaints related to one’s appearance.

Please refer to the applicable benefit plan document to determine the terms, limitations and conditions of coverage.

When coverage is available for treatment, PDL therapy (17106, 17107, 17108) for treatment of cutaneous vascular lesions, as medically necessary for either of the following conditions:

1. Cutaneous hemangioma vascular malformation:
   a. Lesion is affecting a vital structure (e.g., nose, eyes, ears, lips, or larynx)
b. Lesion has the potential for functional impairment (e.g., obstruction of vital structures involved in respiration, vision, and/or feeding)

c. Lesion results in any of the following:
   - Bleeding
   - Pain
   - Ulceration
   - Infection
   - Repeated infection
   - Eating difficulty
   - Swallowing difficulty

d. Lesion is likely to leave permanent scars during involution

2. Port wine stain and either of the following indications:
   a. Lesion results in bleeding or painful nodules
   b. Lesion is located on the face, head, or neck
   c. Lesion is located on other areas (e.g., trunk, limbs) and a functional skin impairment related to the PDL (e.g., ulceration, recurrent bleeding, infection, restricted range of motion due to lesion) exists
   d. Lesion results in obstructed vision

Selective photothermolysis using PDL that do not meet the medical necessity criteria listed in this policy are considered cosmetic services, therefore, they are not eligible for reimbursement/coverage.

Treatment of cutaneous vascular lesions with pulsed dye lasers in combination with photodynamic therapy or topical angiogenesis inhibitors is considered investigational.

Paramount considers the use of the pulsed dye laser experimental and investigational for all other indications because of insufficient evidence in the peer-reviewed literature, including any of the following conditions (not an all-inclusive list):

- Active acne
- Angiokeratoma of the lower extremities
- Balanitis xerotica obliterans
- Basal cell carcinoma
- Cutaneous amyloidosis
- Cutaneous angiokeratomas
- Cutaneous leishmaniasis
- Cutaneous sarcoidosis
- Darier disease (also known as Darier-White disease or keratosis follicularis)
- Dyshidrotic eczema
- Dysphonia
- Glottic leukoplakia
- Granulation tissue
- Granuloma annulare
- Hailey-Hailey disease
- Hereditary hemorrhagic telangiectasia
- Hidradenitis suppurativa
- Hyper-vascularity of the perineum and genitalia
- Lymphangioma
- Microcystic lymphatic malformations
- Molluscum contagiosum
- Morphea (scleroderma of the skin)
- Nail psoriasis
- Onychomycosis
- Peri-implantitis
- Pilonidal disease
- Pityriasis rubra pilaris
- Xanthelasma palpebrum.

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.
CPT CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>17106</td>
<td>Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq cm</td>
</tr>
<tr>
<td>17107</td>
<td>Destruction of cutaneous vascular proliferative lesions (eg, laser technique); 10.0 to 50.0 sq cm</td>
</tr>
<tr>
<td>17108</td>
<td>Destruction of cutaneous vascular proliferative lesions (eg, laser technique); over 50.0 sq cm</td>
</tr>
</tbody>
</table>

REVISION HISTORY EXPLANATION
08/22/14: Policy created to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG).
08/20/15: Policy reviewed and updated to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG).
08/26/16: PPO now requires prior authorization. Policy reviewed and updated to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG).
09/22/17: Policy reviewed and updated to reflect most current clinical evidence per The Technology Assessment Working Group (TAWG).
11/22/19: Policy reviewed and updated to reflect most current clinical evidence. Administrative review and determination indicates that prior authorization will no longer be required when medical criteria is met, as of 1/1/2020.

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/
Industry Standard Review
Hayes, Inc.