

CHAPTER 3  
SECTION 5.2

## AUTOMATIC IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR (AICD)

Issue Date: January 26, 1987

Authority: [32 CFR 199.4\(d\)\(1\)](#)

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### I. PROCEDURE CODE RANGE

33212, 33222, 33242-33245

### II. DESCRIPTION

The automatic implantable cardioverter-defibrillator (AICD) is an electronic device which is implanted in patients identified as being at high risk for cardiac death due to ventricular arrhythmias. It is designed to monitor the heartbeat, recognize ventricular tachycardia or ventricular fibrillation, and deliver an electric shock to terminate the life-threatening arrhythmia. Two forms of the device exist (AICD-B, AICD-BR). Both forms have FDA approval.

### III. POLICY

Insertion of the automatic implantable cardioverter-defibrillator may be cost-shared, subject to the provisions of 32 CFR 199 and the provisions outlined below under "Policy Considerations".

IV. EFFECTIVE DATE            **January 24, 1986.**

### V. POLICY CONSIDERATIONS

A. Payment can be made for medically necessary services and supplies related to the implantation of the AICD or for the device for patients:

1. Who have survived cardiac arrest due to unstable ventricular tachyarrhythmia not associated with myocardial infarction, and in whom a sustained monomorphic ventricular tachycardia cannot be induced in the electrophysics laboratory.

2. Without previous cardiac arrest, experiencing recurrent ventricular tachyarrhythmias not associated with myocardial infarction.

3. In which ventricular tachycardia or fibrillation is unresponsive to conventional arrhythmic drug therapy or surgical therapy (except for those patients who are considered an unsuitable candidate for surgery).

4. Without other disease that would limit survival to less than six months.

B. All patients should have undergone a complete cardiologic evaluation, thorough electrophysiologic evaluation, which includes electrophysiological testing, prior to insertion of an AICD.

C. All claims for this procedure require, at least, a second level review before reimbursement can be allowed.

D. Repairs, adjustments, accessories necessary for the effective functioning of the device, and removal and replacement of the covered device, as well as associated surgical costs, may be cost-shared without redevelopment for the above criteria.

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