

**Medicare Advantage Policy Manual** 

# Lung Volume Reduction Surgery (LVRS, or Reduction Pneumoplasty)

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#### IMPORTANT REMINDER

The Medicare Advantage Medical Policy manual is not intended to override the member Evidence of Coverage (EOC), which defines the insured's benefits, nor is it intended to dictate how providers are to practice medicine. Physicians and other health care providers are expected to exercise their medical judgment in providing the most appropriate care for the individual member.

The Medicare Advantage Medical Policies are designed to provide guidance regarding the decision-making process for the coverage or non-coverage of services or procedures in accordance with the member EOC and the Centers of Medicare and Medicaid Services (CMS) policies, when available. In the event of a conflict, applicable CMS policy or EOC language will take precedence over the Medicare Advantage Medical Policy. In the absence of CMS guidance for a requested service or procedure, the health plan may apply their Medical Policy Manual or MCG<sup>TM</sup> criteria, both of which are developed with an objective, evidence-based process using scientific evidence, current generally accepted standards of medical practice, and authoritative clinical practice guidelines.

Medicare and EOCs exclude from coverage, among other things, services or procedures considered to be investigational, cosmetic, or not medically necessary, and in some cases, providers may bill members for these non-covered services or procedures. Providers are encouraged to inform members in advance when they may be financially responsible for the cost of non-covered or excluded services.

#### DESCRIPTION

"Lung volume reduction surgery (LVRS) or reduction pneumoplasty, also referred to as lung shaving or lung contouring, is performed on patients with severe emphysema in order to allow the remaining compressed lung to expand, and thus, improve respiratory function." (NCD 240.1)

# MEDICARE ADVANTAGE POLICY CRITERIA CMS Coverage Manuals\* None

National Coverage Lung Volume Reduction Surgery (Reduction Pneumoplasty)

Determinations (NCDs)\* (240.1)

### **POLICY GUIDELINES**

#### **REQUIRED DOCUMENTATION**

The information below <u>must</u> be submitted for review to determine whether policy criteria are met. If any of these items are not submitted, it could impact our review and decision outcome:

- History and physical examination with diagnosis and signs/symptoms reported, as well as
  radiographic reports, pulmonary function test results, exercise tolerance test results, arterial
  blood gas levels. Documentation must also include cardiac and surgical assessment
  documentation and approval, as well as therapeutic program adherence, plasma cotinine
  levels and notes the member has been nonsmoking for 4 months prior to initial evaluation
  and continued throughout the evaluation for surgery; and
- Facility where services will be performed.

## **CROSS REFERENCES**

None

## **REFERENCES**

- Medicare Approved Facilities/Trials/Registries Website for <u>Lung Volume Reduction Surgery</u> (<u>LVRS</u>)
- 2. Medicare Claims Processing Manual, Chapter 3 Inpatient Hospital Billing, §100.7 Lung Volume Reduction Surgery

CODING		
Codes	Number	Description
CPT	32491	Removal of lung, other than pneumonectomy; with resection-plication of emphysematous lung(s) (bullous or non-bullous) for lung volume reduction, sternal split or transthoracic approach, includes any pleural procedure, when performed
	32672	Thoracoscopy, surgical; with resection-plication of emphysematous lung (bullous or non-bullous) for lung volume reduction (LVRS) unilateral includes any pleural procedure, when performed
HCPCS	G0302	Pre-operative pulmonary surgery services for preparation for LVRS, complete course of services, to include a minimum of 16 days of service
	G0303	Pre-operative pulmonary surgery services for preparation for LVRS, 10 to 15 days of service
	G0304	Pre-operative pulmonary surgery services for preparation for LVRS, 1 to 9 days of service
	G0305	Post-discharge pulmonary surgery services after LVRS, minimum of 6 days of service

\*IMPORTANT NOTE: Medicare Advantage medical policies use the most current Medicare references available at the time the policy was developed. Links to Medicare references will take viewers to external websites outside of the health plan's web control as these sites are not maintained by the health plan.