Medical Policy

Esophageal pH Monitoring

<table>
<thead>
<tr>
<th>Type: Medical Necessity/Not Medical Necessity</th>
<th>Policy Specific Section: Medicine</th>
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Original Policy Date: January 1, 1990

Effective Date: June 28, 2013

Definitions of Decision Determinations

Medically Necessary: A treatment, procedure or drug is medically necessary only when it has been established as safe and effective for the particular symptoms or diagnosis, is not investigational or experimental, is not being provided primarily for the convenience of the patient or the provider, and is provided at the most appropriate level to treat the condition.

Investigational/Experimental: A treatment, procedure or drug is investigational when it has not been recognized as safe and effective for use in treating the particular condition in accordance with generally accepted professional medical standards. This includes services where approval by the federal or state governmental is required prior to use, but has not yet been granted.

Split Evaluation: Blue Shield of California / Blue Shield of California Life & Health Insurance Company (Blue Shield) policy review can result in a Split Evaluation, where a treatment, procedure or drug will be considered to be investigational for certain indications or conditions, but will be deemed safe and effective for other indications or conditions, and therefore potentially medically necessary in those instances.

Description

Gastroesophageal reflux disease (GERD) is characterized by pain and mucosal inflammation caused by prolonged esophageal exposure to gastric acid. Esophageal pH monitoring using wired or wireless devices can record the pH of the lower esophagus for a period of one to several days.
These devices may aid in the diagnosis of GERD in patients who have an uncertain diagnosis after clinical evaluation and endoscopy.

Policy

Esophageal pH monitoring using a wireless or catheter-based system may be considered medically necessary for any of the following clinical indications in adults and children or adolescents able to report symptoms*:

- Documentation of abnormal acid exposure in endoscopy-negative patients being considered for surgical antireflux repair
- Evaluation of patients after antireflux surgery who are suspected of having ongoing abnormal reflux
- Evaluation of patients with either normal or equivocal endoscopic findings and reflux symptoms that are refractory to proton pump inhibitor therapy
- Evaluation of refractory reflux in patients with chest pain after cardiac evaluation and after a 1-month trial of proton pump inhibitor therapy
- Evaluation of suspected otolaryngologic manifestations of gastroesophageal reflux disease (GERD) (i.e., laryngitis, pharyngitis, chronic cough) that have failed to respond to at least 4 weeks of proton pump inhibitor therapy
- Evaluation of concomitant GERD in an adult-onset, nonallergic asthmatic suspected of having reflux-induced asthma

24-hour catheter-based esophageal pH monitoring may be considered medically necessary in infants or children who are unable to report or describe symptoms of reflux with any of the following symptoms:

- Unexplained apnea
- Bradycardia
- Refractory coughing or wheezing, stridor, or recurrent choking (aspiration)
- Persistent or recurrent laryngitis
- Recurrent pneumonia

Catheter-based impedance-pH monitoring is considered not medically necessary.

*Esophageal pH monitoring systems should be used in accordance with FDA-approved indications and age ranges.

Policy Guideline

Coding

**Wireless Monitoring:**

- 91035: Esophagus, gastroesophageal reflux test; with mucosal attached telemetry pH electrode placement, recording, analysis, and interpretation
Catheter-Based Monitoring:
- 91034: Esophagus, gastroesophageal reflux test; with nasal catheter pH electrode(s) placement, recording, analysis and interpretation

Catheter-Based Impedance-pH Monitoring:
- 91037: Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation
- 91038: Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation; prolonged (greater than 1 hour, up to 24 hours)

### Documentation Required for Clinical Review

<table>
<thead>
<tr>
<th>Documentation Required for Clinical Review</th>
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<tbody>
<tr>
<td>• History and physical and/or consultation notes including:</td>
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<tr>
<td>o Diagnoses and symptoms</td>
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<tr>
<td>o Reason for procedure</td>
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<tr>
<td>o Prior treatment and response</td>
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<tr>
<td>• Endoscopy report(s) (if applicable)</td>
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<td>• Imaging reports</td>
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The materials provided to you are guidelines used by this plan to authorize, modify, or deny care for persons with similar illness or conditions. Specific care and treatment may vary depending on individual need and the benefits covered under your contract. These Policies are subject to change as new information becomes available.