Medical Policy
Original Effective Date: 06-27-07
Revised Date: 07-31-2019
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X-STOP® Interspinous Process Decompression (IPD) System
MPM 25.0

Disclaimer
Refer to the member’s specific benefit plan and Schedule of Benefits to determine coverage. This may not be a benefit on all plans or the plan may have broader or more limited benefits than those listed in this Medical Policy.

Description
The X-STOP® Interspinous Process Decompression (IPD®) System is a surgical method to treat lumbar spinal stenosis that includes neurogenic intermittent claudication, and does not respond to conservative, nonoperative treatment. Lumbar spinal stenosis usually develops due to changes in the intervertebral disks, spinal joints, and/or spinal ligaments; these changes can compress spinal nerves and cause neurogenic intermittent claudication. X-STOP is a titanium implant that fits between the spinous processes of the lumbar spine to reduce the spinal extension and thereby prevent motions that induce back pain.

Coverage Determination/ Clinical Indications
Prior Authorization is required. Logon to Pres Online to submit a request: https://ds.phs.org/preslogin/index.jsp

This procedure is not covered by CMS within Jurisdiction H. XStop is considered experimental/investigational and therefore is not a covered benefit.

Presbyterian uses MCG Criteria # A-0494. Due to contractual restrictions, providers may not access the MCG website but can obtain a current copy of the criteria from the Prior Authorization staff.

Coding
The coding listed in this medical policy is for reference only. Covered and non-covered codes are within this list.


<table>
<thead>
<tr>
<th>CPT Codes</th>
<th>Description – Non-covered</th>
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<tbody>
<tr>
<td>22869</td>
<td>Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; single level</td>
</tr>
<tr>
<td>22870</td>
<td>Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second level</td>
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</tbody>
</table>

Not every Presbyterian health plan contains the same benefits. Please refer to the member’s specific benefit plan and Schedule of Benefits to determine coverage. [MPMPPC051001]
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ICD-10 Diagnosis

<table>
<thead>
<tr>
<th>ICD10- Codes</th>
<th>Description</th>
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<td></td>
<td>Spinal stenosis, lumbar region with neurogenic claudication.</td>
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Approval Signatures:
Clinical Quality & Utilization Mgmt. Committee: Howard Epstein MD
Medical Director: Norman White MD

Approval Date: July 31, 2019

Publication History:
07-31-19: Annual Review. Accessed MCG A-0494. Current role remains uncertain, no change to policy. Acknowledged coverage information by CMS, LCD L34006, which is not for Jurisdiction H

This Medical Policy is intended to represent clinical guidelines describing medical appropriateness and is developed to assist Presbyterian Health Plan and Presbyterian Insurance Company, Inc. (Presbyterian) Health Services staff and Presbyterian medical directors in determination of coverage. The Medical Policy is not a treatment guide and should not be used as such.

For those instances where a member does not meet the criteria described in these guidelines, additional information supporting medical necessity is welcome and may be utilized by the medical director in reviewing the case. Please note that all Presbyterian Medical Policies are available online at: Click here for Medical Policies

Web links:
At any time during your visit to this policy and find the source material web links has been updated, retired or superseded, PHP is not responsible for the continued viability of websites listed in this policy.

When PHP follows a particular guidelines such as LCDs, NCDs, MCG, NCCN etc., for the purposes of determining coverage; it is expected providers maintain or have access to appropriate documentation when requested to support coverage. See the References section to view the source materials used to develop this resource document.