



TCAR ADDITIONAL REMBURSEMENT RESOURCES

This page provides additional resources to assist with coverage and reimbursement for the Transcarotid Artery Revascularization (TCAR) procedure.

Medicare (CMS) Coverage

Medicare covers TCAR under the [National Coverage Determination \(NCD\) 20.7 for Percutaneous Transluminal Angioplasty \(PTA\)](#) of the Carotid Artery Concurrent with Stenting, which was last updated on [October 11, 2023](#). This NCD covers carotid stenting procedures for traditional Medicare and Medicare Advantage beneficiaries under the following sections:

B3. Concurrent with Carotid Stent Placement in FDA-Approved Post-Approval Studies (e.g., [Vascular Quality Initiative TCAR Surveillance Project](#) or VQI TSP)

B4. Concurrent with Carotid Stent Placement

Traditional Medicare (also known as fee for service Medicare) does not require prior authorization for procedures.

Medicare Advantage plans are administered by private insurers and are required to cover TCAR in accordance with National Coverage Determination (NCD) 20.7. As Medicare Advantage organizations, they must follow all NCDs issued by the Centers for Medicare & Medicaid Services (CMS), including NCD 20.7, [Percutaneous Transluminal Angioplasty \(PTA\)](#). Per Chapter 4, Section 90 of the [Medicare Managed Care Manual](#), Medicare Advantage plans are obligated to comply with these determinations. While they may implement processes such as prior authorization or precertification, they may not apply coverage criteria that are more restrictive than those outlined in the applicable NCD.

Non-Medicare Coverage

Non-Medicare payers, such as private insurers, Medicaid, and the Veteran's Administration, have different coverage plans and policies. Contact the payer before the TCAR procedure to verify coverage and billing requirements for carotid artery stenting.

VQI TCAR Surveillance Project

[The Vascular Quality Initiative \(VQI\)](#) TCAR Surveillance Project (TSP) is an FDA-approved post-approval surveillance registry sponsored by the Society for Vascular Surgery Patient Safety Organization to monitor the safety and effectiveness of transcarotid stents in patients with symptomatic and asymptomatic carotid artery disease at standard or high risk. [Medicare](#) provides reimbursement to hospitals and physicians who participate in the registry and adhere to the study

protocol. To submit claims for VQI TSP, facilities and providers should include National Clinical Trial (NCT) identifier [NCT02850588](#) and follow the appropriate billing instructions.

Documentation Resources

Accurate and complete patient medical records and detailed procedure dictation are essential for proper MS-DRG assignment and physician reimbursement.

[Epic UserWeb*: Video Navigating TCAR Tools \(Login required\)](#)

[Epic UserWeb*: Vascular Surgery Starter Set \(Login required\)](#)

ENROUTE Transcarotid Stent System

USE/INDICATIONS FOR USE The ENROUTE® Transcarotid Stent System used in conjunction with the ENROUTE Transcarotid Neuroprotection System (NPS) is indicated for the treatment of patients at high risk and standard risk for adverse events from carotid endarterectomy, who require carotid revascularization and meet the criteria outlined below: High Risk | Standard Risk With neurological symptoms: ≥ 50% stenosis of the common or internal carotid artery by ultrasound or angiogram | ≥ 70% stenosis of the common or internal carotid artery by ultrasound or ≥ 50% stenosis of the common or internal carotid artery by angiogram Without neurological symptoms: ≥ 80% stenosis of the common or internal carotid artery by ultrasound or angiogram | ≥ 70% stenosis of the common or internal carotid artery by ultrasound or ≥ 60% stenosis of the common or internal carotid artery by angiogram Reference vessel diameter: Must be within 4.0 mm – 9.0 mm at the target lesion Carotid bifurcation location: Minimum 5 cm above the clavicle to allow for placement of the ENROUTE Transcarotid NPS

ENROUTE Transcarotid Neuroprotection System

INTENDED USE/INDICATIONS FOR USE The ENROUTE Transcarotid Neuroprotection System (ENROUTE Transcarotid NPS) is intended to provide transcarotid vascular access, introduction of diagnostic agents and therapeutic devices, and embolic protection during carotid artery angioplasty and stenting procedures for patients diagnosed with carotid artery stenosis and who have appropriate anatomy described below: · Adequate femoral venous access · Common carotid artery reference diameter of at least 6 mm · Carotid bifurcation is a minimum of 5 cm above the clavicle as measured by duplex Doppler ultrasound (DUS) or computerized axial tomography (CT) angiography or magnetic resonance (MR) angiography.

IMPORTANT INFORMATION

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