This Policy Guideline is applicable to UnitedHealthcare Medicare Advantage Plans offered by UnitedHealthcare and its affiliates for health care services submitted on CMS 1500 forms and, when specified, to those billed on UB04 forms (CMS 1450), or their electronic comparative. The information presented in this Policy Guideline is believed to be accurate and current as of the date of publication.

This Policy Guideline provides assistance in administering health benefits. All reviewers must first identify member eligibility, any federal or state regulatory requirements, Centers for Medicare and Medicaid Services (CMS) policy, the member specific benefit plan coverage, and individual provider contracts prior to use of this Policy Guideline. When deciding coverage, the member specific benefit plan document must be referenced. The terms of the member specific benefit plan document may differ greatly from the standard benefit plan upon which this Policy Guideline is based. In the event of a conflict, the member specific benefit plan document supersedes this Policy Guideline. Other Policies and Guidelines may apply. UnitedHealthcare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary.

UnitedHealthcare follows Medicare coverage guidelines and regularly updates its Medicare Advantage Policy Guidelines to comply with changes in CMS policy. UnitedHealthcare encourages physicians and other healthcare professionals to keep current with any CMS policy changes and/or billing requirements by referring to the CMS or your local carrier website regularly. Physicians and other healthcare professionals can sign up for regular distributions for policy or regulatory changes directly from CMS and/or your local carrier. This Policy Guideline is provided for informational purposes. It does not constitute medical advice.

**POLICY SUMMARY**

**Overview**

Traditional approaches for the treatment of kidney stones are the surgical technique nephrectomy (or nephrotomy) and endoscopic treatments via the urethra.

**Indications and Limitations of Coverage**

The following Lithotripsy Techniques are Medicare covered procedures:

- **Extracorporeal Shock Wave Lithotripsy**
  Extracorporeal Shock Wave Lithotripsy (ESWL) is a non-invasive method of treating kidney stones using a device called a lithotriptor. The lithotriptor uses shock waves generated outside of the body to break up upper urinary tract stones. It focuses the shock waves specifically on stones under X-ray visualization, pulverizing them by repeated shocks.

- **Percutaneous Lithotripsy**
  Percutaneous lithotripsy (or nephrolithotomy) is an invasive method of treating kidney stones by using ultrasound, electrohydraulic or mechanical lithotripsy. A probe is inserted through an incision in the skin directly over the kidney and applied to the stone. A form of lithotripsy is then used to fragment the stone. Mechanical or electrohydraulic lithotripsy may be used as an alternative or adjunct to ultrasonic lithotripsy.

- **Transurethral Ureteroscopic Lithotripsy**
  Transurethral ureteroscopic lithotripsy is a method of fragmenting and removing ureteral and renal stones through a cystoscope. The cystoscope is inserted through the urethra into the bladder. Catheters are passed through the scope into the opening where the ureters enter the bladder. Instruments passed through this opening into the ureters are used to manipulate and ultimately disintegrate stones, using mechanical crushing, transcystoscopic electrohydraulic shock waves, ultrasound or laser.
REFERENCES

CMS National Coverage Determinations (NCDs)
NCD 230.1 Treatment of Kidney Stones

GUIDELINE HISTORY/REVISION INFORMATION

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