

## PA.211.MPC – Transanal Endoscopic Microsurgery

Maryland Physicians Care considers **Transanal Endoscopic Microsurgery (TEM)** medically necessary for the following indications:

1. Benign Rectal Tumors (adenomas) that cannot be removed using other means of local excision
2. T1 rectal carcinoma that cannot be removed using other means of local excision and that meet the following criteria:
  - a. Tumor has a diameter of < 3 cm, AND
  - b. Tumor is located in the middle or upper part of the rectum, AND
  - c. Tumor is well to moderately differentiated by biopsy, AND
  - d. Tumor is less than 30% of the circumference of bowel, AND
  - e. Tumor is located within 8 cm of anal verge, AND
  - f. Without evidence of lymphadenopathy, AND
  - g. Without evidence of lympho-vascular invasion.

### Limitations

*Transanal endoscopic microsurgery is considered experimental and investigational for all other indications including, but not limited to:*

1. Advanced Rectal Cancer
2. Anorectal Melanoma
3. Functional Constipation
4. Megacolon
5. Rectal Amyloidoma
6. Rectal Ulcer Syndrome
7. Recto-Urinary fistula

Maryland Physicians Care does not provide coverage for experimental and investigational services or procedures.

### Background

Transanal endoscopic microsurgery (TEM) is a minimally invasive procedure that utilizes microsurgical instruments to remove lesions high inside the rectum. Specific types of early stage rectal cancers or benign rectal polyps can be removed through the rectum, whereas previously were only accessible through major abdominal surgery. According to the Center for Colorectal Surgery, TEM shortens the patient's hospital

## PA.211.MPC - Transanal Endoscopic Microsurgery

Policy Number: PA.211.MPC

Last Review Date: 08/26/2021

Effective Date: 10/01/2021

duration, and lowers the patient's loss of blood, risk of infection, risk of bowel obstructions after recovery, and complications following surgery.

The National Cancer Institute classifies rectal cancers in the following stages:

- Stage 0 (Carcinoma in Situ): Abnormal cells are found in the mucosa. These cells may become cancerous and spread into nearby normal tissue.
- Stage I: Cancer has formed in the mucosa wall and has spread to the submucosa or to the muscle layer of the rectum wall.
- Stage IIA: Cancer has spread through the muscle layer of the rectum wall to the serosa.
- Stage IIB: Cancer has spread through the serosa to the visceral peritoneum.
- Stage IIC: Cancer has spread through the serosa to nearby organs.
- Stage III: Cancer has spread to nearby lymph nodes but not to other parts of the body
- Stage IV: Cancer has metastasized to distant organs and tissues, such as liver or lungs.

Experts from the National Comprehensive Cancer Network Guideline on Oncology advise a minimally invasive surgery only under specific conditions. TEM should be limited to stage I and II cancers and should not be done on tumors that are likely to return after treatment.

### Codes:

CPT Codes / HCPCS Codes / ICD-10 Codes	
Code	Description
*0184T	Excision of rectal tumor, transanal endoscopic microsurgical approach (ie, TEMS), including muscularis propria (ie, full thickness)  *This procedure code is not a covered benefit under Maryland Physicians Care.

### References

1. Allaix ME, Arezzo A, Morino M. Transanal endoscopic microsurgery for rectal cancer: T1 and beyond? An evidence-based review. Surg Endosc. 2016;30(11):4841-4852. <https://pubmed.ncbi.nlm.nih.gov/26902614/>

## PA.211.MPC - Transanal Endoscopic Microsurgery

Policy Number: PA.211.MPC

Last Review Date: 08/26/2021

Effective Date: 10/01/2021

2. Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD) No. L35490 – Category III Codes. (Contractor: Wisconsin Physicians Service Insurance Corporation). Revision Effective Date: 04/25/2021. <https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?lcdid=35490&ver=62&bc=CAAAAAAAAAAAAA>
3. García-Flórez LJ, Otero-Díez JL. Local excision by transanal endoscopic surgery. World J Gastroenterol. 2015;21(31):9286–9296. doi:10.3748/wjg.v21.i31.9286 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4541381/>
4. Jung Y, Lee J, Cho JY, et al. Comparison of efficacy and safety between endoscopic submucosal dissection and transanal endoscopic microsurgery for the treatment of rectal tumor. Saudi J Gastroenterol. 2018;24(2):115-121. <https://pubmed.ncbi.nlm.nih.gov/29637919/>
5. Liu Q, Zhong G, Zhou W, Lin G. Initial application of transanal endoscopic microsurgery for high-risk lower rectal gastrointestinal stromal tumor after imatinib mesylate neoadjuvant chemotherapy: A case report. Medicine (Baltimore). 2017;96(29):e7538. <https://pubmed.ncbi.nlm.nih.gov/28723770/>
6. National Comprehensive Cancer Network (NCCN). Rectal Cancer. NCCN Guidelines for Patients. 2021. <https://www.nccn.org/patients/guidelines/content/PDF/rectal-patient.pdf>
7. Treatment of recurrence after transanal endoscopic microsurgery (TEM) for T1 rectal cancer. Pascal G. Doornebosch, et al. Colon Rectum. 2010 Sep; 53(9): 1234–1239. doi: 10.1007/DCR.0b013e3181e73f33 <https://www.ncbi.nlm.nih.gov/pubmed/20706065>

### Archived References

1. Hayes. Medical Technology Directory. Transanal Endoscopic Microsurgery for Rectal Carcinoma. Published: June 2, 2009. Archived July 02, 2014.

### Disclaimer:

Maryland Physicians Care medical payment and prior authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. The policies constitute only the reimbursement and coverage guidelines of Maryland Physicians Care and its affiliated managed care entities. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies.

Maryland Physicians Care reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if

## **PA.211.MPC - Transanal Endoscopic Microsurgery**

Policy Number: PA.211.MPC

Last Review Date: 08/26/2021

Effective Date: 10/01/2021

necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

These policies are the proprietary information of Maryland Physicians Care. Any sale, copying, or dissemination of said policies is prohibited.