

## Non-Invasive Hemodialysis Access Studies (93985, 93986, 93990) L35751

<b>Indications:</b>
Medicare considers a Doppler flow study medically necessary when the patient's dialysis access site manifests signs or symptoms associated with vascular compromise, and when the results of this test are necessary to determine the clinical course of treatment.
Examples supporting the medical necessity for Doppler flow studies include: <ul style="list-style-type: none"> <li>• Elevated dynamic venous pressure &gt;200mm HG when measured during dialysis with the blood pump set on a 200cc/min.,</li> <li>• Access recirculation of 12 percent or greater,</li> <li>• An otherwise unexplained urea reduction ratio</li> </ul>
Vessel mapping of vessels for hemodialysis access is considered for Medicare payment when it is performed preoperatively prior to creation of hemodialysis access using an autogenous hemodialysis conduit, including arterial inflow and venous outflow in patients with end stage renal disease (ESRD). This is a covered service only when the results of the study are necessary to determine appropriate vessel utilization. The need for a hemodialysis access site must be determined prior to the performance of the test.

<b>Limitations:</b>
Unless the documentation is provided supporting the necessity of more than one study, Medicare will limit payment to either a Doppler flow study or an arteriogram (fistulogram, venogram), but not both.
An example of when both studies may be clinically necessary is when a Doppler flow study demonstrates: <ul style="list-style-type: none"> <li>• Reduced flow (blood flow rate less than 800cc/min or</li> <li>• A decreased flow of 25 percent or greater from previous study) and</li> <li>• The physician requires an arteriogram to define the problem.</li> </ul>

<b>Most Common Diagnoses for Hemodialysis Access Examination (which meet medical necessity) *</b>	
I77.0	Arteriovenous fistula, acquired
N18.6	End stage renal disease
T82.41XA**	Breakdown (mechanical) of vascular dialysis catheter, initial encounter
T82.42XA**	Displacement of vascular dialysis catheter, initial encounter
T82.43XA**	Leakage of vascular catheter, initial encounter
T82.49XA**	Other complication of vascular dialysis catheter, initial encounter
T82.510A**	Breakdown (mechanical) of surgically created arteriovenous fistula, initial encounter
T82.590A**	Other mechanical complication of surgically created arteriovenous fistula, initial encounter
T82.7XXA**	Infection and inflammatory reaction due to other cardiac and vascular devices, implants and grafts, initial encounter
T82.818A**	Embolism due to vascular prosthetic devices, implants and grafts, initial encounter
T82.838A**	Hemorrhage due to vascular prosthetic devices, implants and grafts, initial encounter
T82.858A**	Stenosis of other vascular prosthetic devices, implants and grafts, initial encounter

T82.868A**	Thrombosis due to vascular prosthetic devices, implants and grafts, initial encounter
T82.898A**	Other specified complication of vascular prosthetic devices, implants and grafts, initial encounter
Z99.2	Dependence on renal dialysis

<b>Most Common Diagnoses for Vessel Mapping of Vessels for Hemodialysis Access (which meet medical necessity) *</b>	
I74.2	Embolism and thrombosis of arteries of the upper extremities
N18.4	Chronic kidney disease, stage 4
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease
T82.42XA**	Displacement of vascular dialysis catheter, initial encounter
T82.510A**	Breakdown (mechanical) of surgically created AV <b>fistula</b> , initial encounter
T82.511A**	Breakdown (mechanical) of surgically created AV <b>shunt</b> , initial encounter
T82.520A**	Displacement of surgically created AV fistula, initial encounter
T82.530A**	Leakage of surgically created AV fistula, initial encounter
T82.590A**	Other mechanical complication of surgically created AV fistula, initial encounter
T82.7XXA**	Infection and inflammatory reaction due to other vascular device, implant, and graft, initial encounter
T82.818A**	Embolism due to vascular prosthetic devices, implants and grafts, initial encounter
T82.838A**	Hemorrhage due to vascular prosthetic devices, implants and grafts, initial encounter
T82.848A**	Pain due to vascular prosthetic devices, implants and grafts, initial encounter
T82.858A**	Stenosis of other vascular prosthetic devices, implants and grafts, initial encounter
T82.868A**	Thrombosis due to vascular prosthetic devices, implants and grafts, initial encounter
Z01.810	Encounter for preprocedural cardiovascular examination
Z01.818	Encounter for other preprocedural examination

\*See the complete list of Medicare covered diagnoses and payment rules:

<https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=57594&ver=18>

To see the complete coverage indications and limitations:

<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdId=35751&ver=47>

Additional guidelines are found in the Medicare Benefit Policy manual, 100-02, Chapter 11, Section 40

H.: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/bp102c11.pdf>

\*\*The 5<sup>th</sup> digit of A, Initial encounter, is used as long as the patient is receiving active treatment for hemodialysis access. It does not refer to whether the provider is seeing the patient for the first time.

The above CMS and WPS-GHA guidelines are current as of: 04/01/2025.