Coverage and Payment for the

Subcutaneous Implantable Defibrillator (S-ICD™) System

The Heart Rhythm Society (HRS) is an international non-profit organization that promotes education and advocacy for cardiac arrhythmia professionals and patients. Founded in 1979, we have over 5,900 members focused on the clinical and scientific developments devoted to treating cardiac arrhythmias.

HRS recommends that private health insurance companies provide coverage for subcutaneous implantable cardiac defibrillator (S-ICD) therapy, consistent with FDA labeling.

Under FDA labeling, S-ICD is indicated for individuals meeting criteria for implantable cardioverter defibrillator therapy for primary or secondary prevention of sudden cardiac death and S-ICD is not indicated for individuals with symptomatic bradycardia, incessant ventricular tachycardia, or spontaneous, frequently recurring ventricular tachycardia that is reliably terminated with anti-tachycardia pacing.

Subcutaneous Implantable Cardiac Defibrillator (S-ICD) therapy has been covered by Medicare since its introduction to the market in 2012 under the CMS National Coverage Determination (NCD) for Implantable Automatic Defibrillators (20.4). HRS urges private carriers to follow the precedent set by Medicare to facilitate patient access to S-ICD therapy. Where coverage is either limited or unavailable, plan policies should be updated to ensure all patients with appropriate clinical rationale have access to this therapy option.

S-ICD therapy addresses a clinical need by eliminating or minimizing complications that may result from transvenous leads. Appropriate coverage will facilitate clinical decision-making between physicians and their patients regarding the ICD device that provides the most appropriate therapeutic intervention.

Approved Spring 2017
HRS Subcommittee on Reimbursement and Regulatory Affairs