Description:
Capsule Endoscopy is a diagnostic tool for the evaluation of patients with obscure bleeding in the small intestine. It consists of an ingestible capsule containing a small camera that takes pictures twice a second as it travels through the small intestine. In addition to the camera, the capsule also contains a lighting system and a wireless radio transmitter that sends images from inside the intestine to a receiving recorder device that the patient wears around the waist. Images are then downloaded to a workstation allowing doctors to view the small intestine and detect sources of bleeding. When swallowed, the capsule travels through the digestive tract at the same speed as food, propelled by peristalsis, and is eliminated as solid waste.

Capsule endoscopy is considered medically necessary by ODS for children two years old or older and adults when standard endoscopic and imaging evaluations are inconclusive and the member has one of the following conditions:
1. Celiac disease
2. Suspected Chron’s disease
3. Suspected small bowel tumor
4. Obscure source of gastrointestinal bleeding

Criteria:
Capsule Endoscopy will be covered to plan limitations for adults and children two years of age or older, when all of the following criteria are met:
1. Documented undiagnosed obscure significant GI blood loss thought to be of small bowel origin (i.e. iron-deficiency anemia, positive fecal occult blood test, visible bleeding), and
2. The following diagnostic studies have failed to reveal a source of bleeding when performed within the same period of illness:
   a. Upper Endoscopy
   b. Colonoscopy

OR
3. For initial diagnosis in persons with suspected Crohn’s disease without evidence of disease on conventional diagnostic tests such as small bowel follow through and upper and lower endoscopy.

OR
4. For surveillance of members with hereditary GI polyposis syndromes including familial adenomatous polyposis and Peutz-Jeghers syndrome.

Limitations:
Capsule endoscopy is indicated for the diagnosis of small bowel abnormalities only. It will not be covered for colorectal cancer screening, patients with hematemesis, or for the confirmation of lesions or pathology normally within the reach of upper or lower endoscopes. It is also expected that capsule endoscopy will be performed only once during any episode of illness. Capsule endoscopy is contraindicated and not covered in patients with known or suspected gastrointestinal obstruction, strictures, or fistulae.

Not Covered:
1. Capsule endoscopy is considered experimental and investigational for all other indications, including the evaluation of diseases involving the esophagus or the colon.
2. ODS considers the Agile patency capsule experimental and investigational for evaluating the patency of the gastrointestinal tract before capsule endoscopy and for all other indications.

**Information to be Submitted with Pre-Authorization Request:**
1. Reports from upper GI endoscopy, enteroscopy, and colonoscopy
2. Medical records from treating physician documenting the requirements

**CPT Coding and Billing Information**
These codes may not be all inclusive

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>91110</td>
<td>Gastrointestinal tract imaging, intraluminal (e.g., capsule endoscopy) esophagus through ileum, with physician interpretation and report</td>
</tr>
<tr>
<td>91111</td>
<td>Gastrointestinal tract imaging, intraluminal (e.g., capsule endoscopy) esophagus through ileum, with physician interpretation and report</td>
</tr>
</tbody>
</table>

**References:**
- Frenette CT, Kuldau JG, Hillebrand DJ, Lane J, Pockros PJ. Comparison of esophageal capsule endoscopy
Subject: Capsule Endoscopy

- Leighton JA. Recent advances in endoscopic capsule imaging: see what we have been missing. Rev Gastroenterol Disorder. 2006;6 Suppl 1:S19-27.
- Wang KK, Sampliner RE; Practice Parameters Committee of the American College of

- Physician Advisors