Athletic Pubalgia Surgery

Medical Coverage Policy

Original Effective Date: 12/02/2010
Revised Date: 12/01/2011
Review Date: 12/01/2011
Policy Number: CLPD-0497-001

Change Summary: Updated Disclaimer, Description, Background, References

When printed, the version of this document becomes uncontrolled because Humana's documents are updated regularly. Do not rely on printed copies for the most up-to-date version. Refer to http://apps.humana.com/tad/tad_new/home.aspx to verify this is the current version before each use.

Disclaimer
Disaster
Description
Coverage Determination
Background

State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, take precedence over clinical policy and must be considered first in determining eligibility for coverage. Coverage may also differ for our Medicare and/or Medicaid members based on any applicable Centers for Medicare & Medicaid Services (CMS) coverage statements including National Coverage Determinations (NCD), Local Medical Review Policies (LMRP), and/or Local Coverage Determinations. See the CMS web site at http://www.cms.hhs.gov. The member's health plan benefits, in effect on the date services are rendered, must be used. Clinical policy is not intended to preempt the judgment of the reviewing Medical Director or dictate to providers how to practice medicine. Providers are expected to exercise their medical judgment in rendering the most appropriate care. Identification of selected brand names of devices, tests, and procedures in a Medical Coverage Policy are for reference only and is not an endorsement of any one device, test or procedure over another. Clinical technology is constantly evolving, and we reserve the right to review and update this policy periodically. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any shape or form or by any means, electronic, mechanical, photocopying, or otherwise, without permission from Humana Inc.

Description
Athletic pubalgia is also known as sportman’s hernia. This condition involves persistent groin pain during exercise when there is no evidence of a clinically detectable hernia. Athletic pubalgia is not a true hernia, but is considered an overuse injury in which the external oblique muscle and surrounding tendons are worn down or partially torn.¹

Conservative treatment consists of, but may not be limited to, medications and physical therapy. If conservative treatment fails, surgical treatment has been utilized. The procedure has been performed using an open approach, an anterior approach, or laparoscopically. Polypropylene or polyester mesh has also been used to stabilize the area.
Athletic Pubalgia Surgery

Coverage Determination

Humana members may NOT be eligible under the Plan for athletic pubalgia surgery. This technology is considered experimental/investigational as it is not identified as widely used and generally accepted for the proposed use as reported in nationally recognized peer-reviewed medical literature published in the English language.

Background

You can learn more about groin or sports injuries from the following sites:

- American Association of Orthopedic Surgeons (AAOS) – http://www.aaos.org

Medical Alternatives

Alternatives to athletic pubalgia surgery include, but may not be limited to, the following:

- Physical therapy
- Prescription drug therapy may be appropriate for this condition.

To make the best health decision for your individual needs, consult your physician.

Provider Claims Codes

All provider claims codes surrounding this topic may not be included in the following table:

<table>
<thead>
<tr>
<th>CPT® Codes</th>
<th>Description</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>No specific code identified</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category III CPT® Codes</th>
<th>Description</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>No specific code identified</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

See the DISCLAIMER. All Humana member health plan contracts are NOT the same. All legislation/regulations on this subject may not be included. This document is for informational purposes only.
Athletic Pubalgia Surgery

When printed, the version of this document becomes uncontrolled because Humana’s documents are updated regularly. Do not rely on printed copies for the most up-to-date version. Refer to http://apps.humana.com/tad/tad_new/home.aspx to verify this is the current version before each use.

### Medical Terms

**Anterior** – Toward the front or in front of.

**External Oblique Muscle** – A diagonally arranged abdominal muscle on either side of the torso.

**Groin** – The fold or hollow on either side of the front of the body where the thigh joins the abdomen.

**Hernia** – The projection of an organ or part through the lining of the cavity in which it is normally situated, especially the protrusion of intestine through the front wall of the abdominal cavity. It is caused by muscular strain or injury.

**Laparoscope** – A flexible fiberoptic instrument, passed through a small incision in the abdominal wall and equipped with biopsy forceps, an obturator, scissors, or the like, with which to examine the abdominal cavity or perform minor surgery.

**Laparoscopic** – Surgery performed with a laparoscope.

**Tendon** – A cord or band of dense, tough, inelastic, white, fibrous tissue, serving to connect a muscle with bone or part

### References

When printed, the version of this document becomes uncontrolled because Humana’s documents are updated regularly. Do not rely on printed copies for the most up-to-date version. Refer to http://apps.humana.com/tad/tad_new/home.aspx to verify this is the current version before each use.


