

Department:	Medical Management	Original Approval:	11/01/2019
Policy #:	MM180	Last Approval:	11/13/2019
Title:	Electroconvulsive Therapy (ECT)		
Approved By:	UM Committee		

REQUIRED CLINICAL DOCUMENTATION FOR REVIEW

Medical record documenting all the following:

- History of current and past depression
- Past medical history and surgical history
- Previous therapies for major depression including behavioral and pharmaceutical therapies with details of doses, duration, and response to each therapy
- Assessment
- Plan of care
- Rationale for plan of care
- Expectations
- Follow up plans

POLICY

This policy refers to the use of Electroconvulsive Therapy (ECT) for Apple Health Members and for Medicare Members.

BACKGROUND

Electroconvulsive therapy involves electrodes being applied to the scalp for delivery of a small electrical current that stimulates a generalized cerebral seizure. General anesthesia is required and causes most of the attendant risks of the procedure. ECT is most effective for major depression with psychosis or severe suicidal ideation. The short-term response rate for treatment resistant depression is 50-80%. Continuation of antidepressants after ECT reduces the risk of recurrence. Bipolar disorder has a 68% response with 81% response for patients with catatonia. Schizophrenia and schizoaffective disorders also respond to ECT, particularly when accompanied by severe depression, suicidal behavior, or catatonia.

ECT is usually administered three times per week for 6 to 12 treatments. The most frequent side effects are acute confusion, anterograde amnesia, and retrograde amnesia, caused both by the seizure and by the anesthetic and usually resolve after 30 minutes. The risks of ECT are the risks of anesthesia and the cardiovascular risk due to the seizure, which increases cardiac workload and oxygen demand. Evidence does not support the use of ECT for autism spectrum disorder, agitation from dementia or Parkinson's disease.

DEFINITIONS

Electroconvulsive Therapy (ECT): Induction of one seizure with an electric current.

Multiple-seizure electroconvulsive therapy (MECT): involves inducing multiple seizures during one session. The clinical effectiveness has not been established and the risks are increased due to the multiple seizures. CMS has determined that it cannot be considered reasonable and necessary.

Resistance to treatment: failure to achieve a 50% reduction in depressive symptoms, in accordance with objective measures (such as Geriatric Depression Scale (GDS), the Personal Health Questionnaire Depression Scale (PHQ-9), the Beck Depression Inventory (BDI), the Montgomery Asberg Depression Rating Scale (MADRS), the Quick Inventory of Depressive Symptomatology (QIDS), the Inventory for Depressive Symptomatology Systems Review (IDS-SR) or Hamilton Rating Scale for Depression (HAM-D)), after trials of antidepressants from 2 classes at an adequate dose and for an adequate period of time, consistent with accepted standards of care.

INDICATIONS/CRITERIA

ECT criteria require all the following for acute treatment:

- Ordered by a psychiatrist and furnished under the direct supervision of a qualified physician (MD or DO) who has experience administering ECT

The member has been medically cleared for ECT by the primary care provider or treating physician. (This means that the member is deemed to be safe from a physical health standpoint, including cardiovascular and cerebrovascular, to undergo ECT.)

- Member has severe symptoms from one of the following diagnoses:
 - Major depressive disorder or major depression with psychosis
 - Bipolar disorder
 - Schizophrenia
 - Schizoaffective disorder
- Severity of condition as demonstrated by at least one of the following:
 - Catatonia or inability to provide self-care due to illness
 - High risk for suicide or other significant self-harm
 - Resistance to treatment with adequate trials of therapeutic doses of pharmacotherapy from at least 2 classes, for at least 4 weeks each, with documented adherence
 - Intractable mania
 - Neuroleptic malignant syndrome
 - Pharmacotherapy contraindicated due risk of adverse effects (such as due to pregnancy or age)

Criteria for continued or maintenance treatment the criteria require all the following:

- History of positive response to ECT in the current or previous episode
- One of the following:

- Relapse without continuation and maintenance treatment (either pharmacotherapy or ECT), and require a second a course of acute ECT
- Failure of one or more courses maintenance pharmacotherapy following ECT
- Member prefers continuation and maintenance ECT to pharmacotherapy
- Treatment is being re-evaluated and modified as needed
- Frequency is adjusted to lowest reasonable needed to maintain response

Contraindications include:

- Unstable cardiac disease
- Cerebrovascular disease such as stroke or hemorrhage
- Increased intracranial pressure

Inpatient ECT criteria requires both of the following:

- The member meets above criteria for ECT
- LOCUS criteria for inpatient psychiatric hospitalization are met

Multiple-seizure Electroconvulsive Therapy (MECT) is not covered for Apple Health or for Medicare Members.

[National Coverage Determination \(NCD\) for MULTIPLE ELECTROCONVULSIVE THERAPY \(MECT\) \(160.25\)](#)

SPECIAL CONSIDERATIONS

Enter all special considerations here.

LIMITATIONS/EXCLUSIONS

Please refer to a product line's certificate of coverage for benefit limitations and exclusions for these services:

PRODUCT LINE	LINK TO CERTIFICATE OF COVERAGE
MEDICARE ADVANTAGE	http://healthfirst.chpw.org/for-members/resource-library/handbooks-and-guides
WASHINGTON APPLE HEALTH	http://chpw.org/our-plans/apple-health/
INTEGRATED MANAGED CARE	http://chpw.org/our-plans/apple-health/

Citations & References

CFR	
WAC	
RCW	
Contract Citation	<input checked="" type="checkbox"/> WAH
	<input checked="" type="checkbox"/> IMC
	<input checked="" type="checkbox"/> MA
Other Requirements	
NCQA Elements	

Revision History

Revision Date	Revision Description	Revision Made By
08/09/2019	Policy creation	LuAnn Chen, MD
11/13/2019	Approval	UM Committee