

COMMERCIAL HEALTH INSURANCE

WATCHMAN FLX LAAC Device Private Payer Coverage			
Health Plan	Primary Service Area	Health Plan	Primary Service Area
AETNA	National	BCBS of FL (Florida Blues)	FL
AmeriHealth	PA, NJ, DC	BCBS of IL	IL
Arkansas Health	AR	BCBS of Kansas	KS
Anthem	National	BCBS of Kansas City	KS
Anthem Blue Cross of California	CA	BCBS of Louisiana	LA
Anthem Blue Cross of Colorado	CO	BCBS of MA	MA, RI
Anthem Blue Cross of Connecticut	CT	BCBS of MI	MI
Anthem Blue Cross of Indiana	IN	BCBS of MN	MN
Anthem Blue Cross of Kentucky	KY	BCBS of MS	MS
Anthem Blue Cross of Maine	ME	BCBS of MT	MT
Anthem Blue Cross of Missouri	MI	BCBS of NC	NC
Anthem Blue Cross of Nevada	NV	BCBS of ND	ND
Anthem Blue Cross of New Hampshire	NH	BCBS of NM	NM
Anthem Blue Cross of Nevada	NV	BCBS of Northeast NY	NY
Anthem Blue Cross of Ohio	OH	BCBS Western NY	NY
Anthem Blue Cross of Virginia	VA	BCBS of OK	OK
Anthem Blue Cross of Wisconsin	WI	BCBS of RI	RI
AvMed	FL	BCBS of SC	SC
Blue Cross Blue Shield of Georgia	GA	BCBS of TN	TN
Empire Blue Cross Blue Shield	NY	BCBS of TX	TX
Unicare	FL	BCBS of Wyoming	WY
BCBS of AL	AL	BCBS of Federal Employee Program	National
BCBS of AR	AR	Blue Cross ID	ID
BCBS Health Advantage	TX	Blue Shield CA	CA
BCBS of AZ	AZ	Capital Health Plan	FL

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COMMERCIAL HEALTH INSURANCE

Continued

WATCHMAN FLX LAAC Device Private Payer Coverage continued			
Health Plan	Primary Service Area	Health Plan	Primary Service Area
Capital Bluecross	PA	Health New England	MA, CT
CareFirst BCBS	DC, MD, VA	Highmark BCBS	DE, PA, WV
CareSource	OH	Horizon BCBS	NJ
Centene	National	Humana	National
Arizona Complete	AZ	Independence Blue Cross	PA
Arkansas Total	AR	LifeWise	OR, WA
Buckeye Health	OH	Medica	MN
Coordinated Care	WA	Medical Mutual of Ohio	OH
Heath Net CA	CA	Nebraska Blue	NE
Health Net OR	OR	Optima (Sentara)	VA, OH, NC, WV, FL, MD, PA, SC, GA, CA
Magnolia Health	MS	Preferred One	MN
Peach State Health	GA	Premera Blue Cross	WA, AK, OR
PA Health and Wellness	PA	Prevera 360	WI
Cigna	National	Priority Health	MI
Coordinated Care Health Plan	WA	Regence Health Plan (Regence Blue Cross Blue Shield)	IA, OH, UT, WA
Dean Health Plan	WI	Scott & White Health Plan	TX
Emblem Health	NY, CT, NJ, FL, PA, NC, MA, SC, GA, CA	Summa Health	OH, MD
Excellus	NY, CT	TriCare	National
Fallon	MA, NY, CT, FL, PA, SC	Tufts Health Plan	MA, RI, NY
Group Health	WA	UPMC	PA
Harvard Pilgrim	MA, ME, CT, NH, RI, VT, NY	United Healthcare	National
Hawaii Medical Services Association (HMSA)	HI	Univera	NY
Health Alliance of MI	MI	Wellmark Blue Cross Blue Shield	IA, SD

NOTE: Covered lives for Commercial and Federal plans is based on estimates available from Policy Reporter, and excludes those covered by Medicare Advantage plans and/or Medicaid.

IMPORTANT INFORMATION

Health economic and reimbursement information provided by Boston Scientific Corporation is gathered from third-party sources and is subject to change without notice as a result of complex and frequently changing laws, regulations, and policies.

This information is presented for illustrative purposes only and does not constitute reimbursement or legal advice.

Boston Scientific encourages providers to submit accurate and appropriate claims for services. **It is always the provider's responsibility to determine medical necessity, the proper site for delivery of any services, and to submit appropriate codes, charges, and modifiers for services rendered.**

It is also always the provider's responsibility to understand and comply with Medicare national coverage determinations (NCD), Medicare local coverage determinations (LCD), and any other coverage requirements established by relevant payers which can be updated frequently. Boston Scientific recommends that you consult with your payers, reimbursement specialists, and/or legal counsel regarding coding, coverage, and reimbursement matters.

Boston Scientific does not promote the use of its products outside their FDA-approved label.

Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding, or site of service requirements. The coding options listed within this guide are commonly used codes and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options.

This coding information may include codes for procedures for which Boston Scientific currently offers no cleared or approved products. In those instances, such codes have been included solely in the interest of providing users with comprehensive coding information and are not intended to promote the use of any Boston Scientific products for which they are not cleared or approved. The Health Care Provider (HCP) is solely responsible for selecting the site of service and treatment modalities appropriate for the patient based on medically appropriate needs of that patient and the independent medical judgement of the HCP.

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