

## Coverage of any medical intervention discussed in a Prevea360 Health Plan medical policy is subject to the limitations and exclusions outlined in the member's benefit certificate or summary plan description (SPD) and applicable state and/or federal laws.

## Chronic Cerebrospinal Venous Insufficiency in Multiple Sclerosis Diagnosis and Treatment MP9568

Covered Service: No

Prior Authorization Required: No

Additional Information: None

## Prevea360 Health Plan Medical Policy:

1.0 The diagnosis and treatment of chronic cerebrospinal venous insufficiency (CCSVI) in Multiple Sclerosis, including but not limited to, venous angioplasty, is considered experimental and investigational and therefore not medically necessary.

	Committee/Source	Date(s)
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