

Jaw Motion Rehabilitation Systems

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Effective Date 5/1992

Next Review Date 8/2024

Coverage Policy DME 43

<u>Version</u> 5

Member specific benefits take precedence over medical policy. Coverage varies across plans. Coverage varies across plans. Refer to the individual's benefit plan for coverage details.

Purpose:

This policy addresses Jaw Motion Rehabilitation Systems.

Description & Definitions:

Jaw motion rehabilitation systems are devices used to increase the mouth opening and strengthen the jaw muscles.

Criteria:

Jaw Motion Rehabilitation Systems do not meet the definition of medical necessity.

Coding:

Medically necessary with criteria:

Coding	Description
	None

Considered Not Medically Necessary:

Coding	Description
E1700	Jaw motion rehabilitation system
E1701	Replacement cushions for jaw motion rehabilitation system, package of 6
E1702	Replacement measuring scales for jaw motion rehabilitation system, package of 200

Document History:

Revised Dates:

- 2019: November
- 2016: April, June
- 2015: June, October

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- 2014: June, October
- 2013: February, June
- 2012: July
- 2011: June, July
- 2010: July
- 2009: June
- 2008: May
- 2005: December
- 2004: October
- 2002: October
- 1998: May, October, November
- 1995: July

Reviewed Dates:

- 2023: August
- 2022: July
- 2021: October
- 2020: October
- 2019: September
- 2018: April
- 2016: September
- 2010: June
- 2007: December
- 2005: September
- 2003: October, November
- 2001: October
- 2000: October
- 1999: October
- 1996: March

Effective Date:

May 1995

References:

Including but not limited to: Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; UpToDate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

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https://evidence.hayesinc.com/search?q=%257B%2522text%2522:%2522jaw%2520motion%2520rehabilitation%2522,%2522title%2522:null,%2522termsource%2522:%2522searchbar%2522,%2522page%2522:%257B%2522page%2522:0,%2522size%2522:50%257D,%2522type%2522:%2522all%2522,%

(2023). Retrieved Jul 06, 2023, from Centers for Medicare and Medicaid Services: https://www.cms.gov/medicare-coverage-database/search-

results.aspx?keyword=Jaw%20Rehabilitation&keywordType=starts&areaId=s53&docType=NCA,CAL,NCD,MEDC AC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance

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treatment?sectionName=TRISMUS&search=Therabite&topicRef=2827&anchor=H3822571&source=see_link#H3 822571

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Medical Device Recalls. (2023, Jul 05). Retrieved Jul 06, 2023, from Food and Drug Administration: https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfRES/res.cfm

Special Notes: *

This medical policy express Sentara Health Plan's determination of medically necessity of services, and they are based upon a review of currently available clinical information. These policies are used when no specific guidelines for coverage are provided by the Center for Medicare and Medicaid Services (CMS). Medical Policies may be superseded by National or Local Coverage Determination (Medicare) guidelines. Medical policies are not a substitute for clinical judgment or for any prior authorization requirements of the health plan. These policies are not an explanation of benefits.

Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are solely responsible for diagnosis, treatment and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

The term DME is defined as equipment which, according to 42 CFR §414.202:

- Can withstand repeated use; i.e., could normally be rented and used by successive patients;
- Effective with respect to items classified as DME after January 1, 2012, has an expected life of at least 3 years;
- Is primarily and customarily used to serve a medical purpose;
- Generally, is not useful to a person in the absence of illness or injury; and,
- Is appropriate for use in a patient's home.

https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?NCDId=190

Keywords:

SHP Jaw Motion Rehabilitation Systems, SHP Durable Medical Equipment 43, Temporomandibular Joint Syndrome TMD, Treatment of Temporomandibular Disorders, TMJ, Therabite, OraStretch, Jaw Motion, Dynasplint

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