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SHP Home Traction Devices

AUTH: SHP Durable Medical Equipment 35 v3 (AC)

MCG Health Ambulatory Care 26th Edition

Link to Codes

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Coverage

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See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.

Application to Products

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Policy is applicable to all products.

Authorization Requirements

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Pre-certification by the Plan is required.

Over the door cervical traction device is approved upon request (E0860).

Description of Item or Service

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Traction equipment is used to decrease pain, muscle spasm and nerve root compression by extending the involved muscles, tissues, and ligaments of the spinal column through gentle pulling action.

Exceptions and Limitations

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- There is insufficient scientific evidence to support the medical necessity of the following traction devices as they are not shown to improve health outcomes
 upon technology review:
 - Lumbar traction devices
 - · Cervical traction applied via attachment to headboard or free-standing frame
 - Cervical traction device that can be used with ambulation
- There is insufficient scientific evidence to support the medical necessity of cervical traction devices (other than over the door traction devices which pay
 upon request) for uses other than those listed in the clinical indications for procedure section.

Clinical Indications for Procedure

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- Cervical Traction devices are considered medically necessary when **ALL** of the following criteria are met:
 - $\circ~$ Individual has musculoskeletal or neurologic impairment requiring traction equipment
 - Appropriate use of home cervical traction device has been demonstrated to individual and individual tolerated selected device
 - Device specific criteria are met, as indicated by 1 or more of the following:
 - Individual has diagnosis of temporomandibular joint (TMJ) dysfunction and has received treatment for TMJ condition
 - Individual has distortion of lower jaw or neck anatomy (eg, radical neck dissection) such that chin halter is unable to be utilized
 - Treating practitioner orders and/or documents medical necessity for greater than 20 pounds of cervical traction in home setting
- Traction Devices are NOT COVERED for ANY of the following:
 - Cervical traction applied via attachment to headboard or free-standing frame
 - · Cervical traction device that can be used with ambulation
 - Lumbar traction devices

Document History

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- Revised Dates:
 - · 2022: September
 - 2021: December

- 2020: December
- 2019: September, December
- · Reviewed Dates:
 - 2018: August
 - 2017: November
 - · 2016: March
 - 2015: March
- Effective Date: April 2014

Coding Information

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- · CPT/HCPCS codes covered if policy criteria is met:
 - · HCPCS E0849 Traction equipment, cervical, free-standing stand/frame, pneumatic, applying traction force to other than mandible
 - HCPCS E0855 Cervical traction equipment not requiring additional stand or frame
- · CPT/HCPCS codes considered not medically necessary per this Policy:
 - HCPCS E0830 Ambulatory traction device, all types, each
 - HCPCS E0840 Traction frame, attached to headboard, cervical traction
 - · HCPCS E0850 Traction stand, freestanding, cervical traction
 - HCPCS E0856 Cervical traction device, with inflatable air bladder(s)

References

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References used include but are not limited to the following:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; Uptodate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

(2022). Retrieved Sep 12, 2022, from North American Spine Society (NASS): http://www.spine.org/

21CFR890.5900 Power traction equipment. (2022, Mar 29). Retrieved Sep 12, 2022, from FDA: https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/cfrsearch.cfm? fr=890.5900

Cervical Traction. (2022). Retrieved Sep 12, 2022, from Cleveland Clinic: https://my.clevelandclinic.org/health/treatments/23093-cervical-traction

DME Manual - Appendix B. (2022, Sep 7). Retrieved Sep 12, 2022, from DMAS DME: https://vamedicaid.dmas.virginia.gov/manuals/durable-medical-equipment-and-supplies

Home-Based Cervical Traction for Treatment of Neck Pain - ARCHIVED Jan 20, 2017. (n.d.). Retrieved Sep 12, 2022, from Hayes: https://evidence.hayesinc.com/report/htb.home2545

Local Coverage Determination (LCD) Cervical TRACTION Devices L33823. (2020, Jan 1). Retrieved Sep 12, 2022, from CMS.gov: https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?

Icdid=33823 & ver=26 & keyword=traction & keyword Type=starts & area Id=all & doc Type=NCA, CAL, NCD, MEDCAC, TA, MCD, 6, 3, 5, 1, F, P& contract Option=all & sort By=relevance & bc=1 for the contract of the contract of

Management of non-radicular neck pain in adults. (2021, Nov 16). Retrieved Sep 12, 2022, from UpToDate 2: https://www.uptodate.com/contents/management-of-non-radicular-neck-pain-in-adults?search=home%20cervical%20traction&source=search_result&selectedTitle=2~150&usage_type=default&display_rank=2

NCD: DURABLE Medical Equipment Reference List - 280.1. (2005, May 5). Retrieved Sep 12, 2022, from CMS NCD: https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=364&ncdver=1&keyword=Lung%20cancer%25

Non-invasive treatments for low back pain and sciatica. (2020, Dec 11). Retrieved Sep 12, 2022, from NICE Guidelines: https://www.nice.org.uk/guidance/NG59/chapter/Recommendations#non-invasive-treatments-for-low-back-pain-and-sciatica

Outpatient Cervical Traction for Treatment of Neck Pain – ARCHIVED Jan 17, 2017. (n.d.). Retrieved Sep 12, 2022, from HAYES: https://evidence.hayesinc.com/report/htb.outpatient2416

Subacute and chronic low back pain: Nonpharmacologic and pharmacologic treatment. (2022, Aug 2). Retrieved Sep 12, 2022, from UpToDate: https://www.uptodate.com/contents/subacute-and-chronic-low-back-pain-nonpharmacologic-and-pharmacologic-treatment?search=home%20lumbar%20traction&source=search_result&selectedTitle=3~150&usage_type=default&display_rank=3

Traction, Spine (A-0345). (2022). Retrieved Sep 12, 2022, from MCG 26th Edition: https://careweb.careguidelines.com/ed26/index.html

Codes

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HCPCS: E0830, E0840, E0849, E0850, E0855, E0856

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