

Non-spinal non-invasive ultrasonic stimulators

Plan: AmeriHealth Caritas Louisiana

Clinical Policy ID: CCP.4021

Recent review date: 8/2023

Next review date: 12/2024

Policy contains: Bone growth stimulators; Non-spinal non-invasive ultrasonic stimulators;

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Policy statement

Non-spinal non-invasive ultrasonic bone growth stimulators may be considered under the following circumstances:

- The failure of a non-union fracture to heal. A period of 90 days following treatment has occurred;
- Documentation consists of two sets of radiographs, one before treatment and the second occurring 90 days after treatment; and
- The radiographs shall include multiple views and be accompanied by a written interpretation by a physician stating that there has been no clinically significant evidence of the fracture healing between the two sets of radiographs.

References

Louisiana Department of Health. 2010. Durable medical equipment provider manual. Osteogenic bone growth stimulators. Chapter 18, Section 18.2.25.1. Issued 02/28/2023.

Policy updates

Initial review date: 3/2/2021

3/2023: Policy references updated.

8/2023: Policy references updated.