



Medical Policy

Dynamic Posturography

Table of Contents

- [Policy: Commercial](#)
- [Coding Information](#)
- [Information Pertaining to All Policies](#)
- [Policy: Medicare](#)
- [Description](#)
- [References](#)
- [Authorization Information](#)
- [Policy History](#)

Policy Number: 263

BCBSA Reference Number: 2.01.02

Related Policies

None

Policy

Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity Medicare HMO BlueSM and Medicare PPO BlueSM Members

Dynamic posturography is [INVESTIGATIONAL](#).

Prior Authorization Information

Commercial Members: Managed Care (HMO and POS)

This is **NOT** a covered service.

Commercial Members: PPO, and Indemnity

This is **NOT** a covered service.

Medicare Members: HMO BlueSM

This is **NOT** a covered service.

Medicare Members: PPO BlueSM

This is **NOT** a covered service.

CPT Codes / HCPCS Codes / ICD-9 Codes

The following codes are included below for informational purposes. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.

Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.

CPT Codes

CPT codes:	Code Description
92548	Computerized dynamic posturography

ICD-9 Diagnosis Codes

Investigational for all diagnoses.

Description

Complaints of imbalance are common in older individuals and contribute to the risk of falling in the elderly population. Falls are the most common cause of death and disability. Maintenance of balance is a complex physiologic process, requiring interaction of the vestibular, visual, proprioceptive/somatosensory system, and central reflex mechanisms and is influenced by the general health of the patient (i.e., muscle tone, strength, and range of motion).

Dynamic posturography tests a patient's balance control in situations intended to isolate factors that affect balance in everyday experiences. It provides quantitative information regarding the functional ability to maintain balance. The test measures an individual's balance (as measured by a force platform to calculate the movement of the patient's center of mass) while visual and somatosensory cues are altered. Dynamic posturography cannot be used to localize the site of a lesion.

Examples of dynamic posturography devices for balance control include the NeuroCom EquiTest®, Micromedical Technology devices and Vestibular Technologies. All dynamic posturography devices for balance control are considered investigational regardless of the commercial name, the manufacturer or FDA approval status.

Summary

Dynamic posturography is a method of measuring balance under controlled laboratory conditions. It can provide information on the degree of imbalance present in an individual but is not intended to diagnosis specific types of balance disorders. The evidence on dynamic posturography consists of studies on technical performance, comparisons of results in patients with balance disorders and healthy controls, and retrospective case series reporting outcomes of patients assessed with dynamic posturography as part of clinical care.

There is a lack of reference standards for dynamic posturography, which makes it difficult to determine how the results can be applied in clinical care. There is a lack of evidence on the performance characteristics of this test for clinically important conditions, such as identifying patients who are at risk of falls. There are no studies that demonstrate the clinical utility of the test, by leading to changes in management that improves health outcomes. As a result of these deficiencies in the evidence base, dynamic posturography is considered investigational for all indications.

Policy History

Date	Action
2/2014	New references added from BCBSA National medical policy.
11/2011-4/2012	Medical policy ICD 10 remediation: Formatting, editing and coding updates. No changes to policy statements.
1/2011	Reviewed - Medical Policy Group – Neurology and Neurosurgery. No changes to policy statements.
1/2010	Reviewed - Medical Policy Group – Neurology and Neurosurgery. No changes to policy statements.
1/2010	BCBS Association National Policy Review. No changes to policy statements.
1/2009	Reviewed - Medical Policy Group – Neurology and Neurosurgery.

	No changes to policy statements.
7/2008	BCBS Association National Policy Review. No changes to policy statements.
1/2008	Reviewed - Medical Policy Group – Neurology. No changes to policy statements.
6/2007	BCBS Association National Policy Review. No changes to policy statements.
1/2007	Reviewed - Medical Policy Group – Neurology. No changes to policy statements.

Information Pertaining to All Blue Cross Blue Shield Medical Policies

Click on any of the following terms to access the relevant information:

[Medical Policy Terms of Use](#)

[Managed Care Guidelines](#)

[Indemnity/PPO Guidelines](#)

[Clinical Exception Process](#)

[Medical Technology Assessment Guidelines](#)

References

1. Blue Cross and Blue Shield Association Technology Evaluation Center (TEC). Dynamic posturography in the assessment of vestibular dysfunction. TEC Assessment 1996; Volume 11, Tab 11.
2. Honaker J, Converse C, Shepard N. Modified head shake computerized dynamic posturography. Am J Audiol 2009; 18(2):108-13.
3. Pang MY, Lam FM, Wong GH et al. Balance performance in head-shake computerized dynamic posturography: aging effects and test-retest reliability. Phys Ther 2011; 91(2):246-53.
4. Visser JE, Oude Nijhuis LB, Janssen L et al. Dynamic posturography in Parkinson's disease: diagnostic utility of the "first trial effect". Neuroscience 2010; 168(2):387-94.
5. Whitney SL, Roche JL, Marchetti GF et al. A comparison of accelerometry and center of pressure measures during computerized dynamic posturography: a measure of balance. Gait Posture 2011; 33(4):594-99.
6. Baloh RW, Jacobson KM, Enrietto JA et al. Balance disorders in older persons: quantification with posturography. Otolaryngol Head Neck Surg 1998; 119(1):89-92.
7. Evans MK, Krebs DE. Posturography does not test vestibulospinal function. Otolaryngol Head Neck Surg 1999; 120(2):164-73.
8. Clendaniel RA. Outcome measures for assessment of treatment of the dizzy and balance disorder patient. Otolaryngol Clin North Am 2000; 33(3):519-33.
9. Ebersbach G, Gunkel M. Posturography reflects clinical imbalance in Parkinson's disease. Mov Disord 2011; 26(2):241-6.
10. Buatois S, Gueguen R, Gauchard GC et al. Posturography and risk of recurrent falls in healthy non-institutionalized persons aged over 65. Gerontology 2006; 52(6):345-52.
11. Girardi M, Konrad HR, Amin M et al. Predicting fall risks in an elderly population: computer dynamic posturography versus electronystagmography test results. Laryngoscope 2001; 111(9):1528-32.
12. Sinaki M, Lynn SG. Reducing the risk of falls through proprioceptive dynamic posture training in osteoporotic women with kyphotic posturing: a randomized pilot study. Am J Phys Med Rehabil 2002; 81(4):241-6.
13. Whitney SL, Marchetti GF, Schade AI. The relationship between falls history and computerized dynamic posturography in persons with balance and vestibular disorders. Arch Phys Med Rehabil 2006; 87(3):402-7.
14. Ganesan M, Pasha SA, Pal PK et al. Direction specific preserved limits of stability in early progressive supranuclear palsy: a dynamic posturographic study. Gait Posture 2012; 35(4):625-9.

15. Lee JM, Koh SB, Chae SW et al. Postural instability and cognitive dysfunction in early Parkinson's disease. *Can J Neurol Sci* 2012; 39(4):473-82.
16. Pierchala K, Lachowska M, Morawski K et al. Sensory Organization Test outcomes in young, older and elderly healthy individuals - preliminary results. *Otolaryngol Pol* 2012; 66(4):274-79.
17. Biggan JR, Melton F, Horvat MA et al. Increased Load Computerized Dynamic Posturography in Pre-Frail and Non-Frail Community Dwelling Older Adults. *J Aging Phys Act* 2013.
18. Lim KB, Lee HJ. Computerized posturographic measurement in elderly women with unilateral knee osteoarthritis. *Ann Rehabil Med* 2012; 36(5):618-26.
19. Teggi R, Caldirola D, Fabiano B et al. Rehabilitation after acute vestibular disorders. *J Laryngol Otol* 2009; 123(4):397-402.
20. Badke MB, Miedaner JA, Shea TA et al. Effects of vestibular and balance rehabilitation on sensory organization and dizziness handicap. *Ann Otol Rhinol Laryngol* 2005; 114(1 pt 1):48-54.
21. Badke MB, Shea TA, Miedaner JA et al. Outcomes after rehabilitation for adults with balance dysfunction. *Arch Phys Med Rehabil* 2004; 85(2):227-33.
22. Brown KE, Whitney SL, Marchetti GF et al. Physical therapy for central vestibular dysfunction. *Arch Phys Med Rehabil* 2006; 87(1):76-81.
23. Hirsch MA, Toole T, Maitland CG et al. The effects of balance training and high-intensity resistance training on persons with idiopathic Parkinson's disease. *Arch Phys Med Rehabil* 2003; 84(8):1109-17.
24. Nocera J, Horvat M, Ray CT. Effects of home-based exercise on postural control and sensory organization in individuals with Parkinson disease. *Parkinsonism Relat Disord* 2009; 15(10):742-5.
25. Lundin F, Ledin T, Wikkelso C et al. Postural function in idiopathic normal pressure hydrocephalus before and after shunt surgery: A controlled study using computerized dynamic posturography (EquiTest). *Clin Neurol Neurosurg* 2013; 115(9):1626-31.
26. American Academy of Otolaryngology-Head and Neck Surgery Foundation. Posturography. Posturography. . Available online at: <http://www.entnet.org/Practice/policyPosturography.cfm>. Last accessed October, 2013.
27. Bhattacharyya N, Baugh RF, Orvidas L et al. American Academy of Otolaryngology-Head Neck, Surgery Foundation Clinical practice guideline: benign paroxysmal positional vertigo. *Otolaryngol Head Neck Surg* 2008; 139(5 Suppl 4):S47-81.