# Cigna Medical Coverage Policy

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**Subject** **Spinal Orthoses**

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## Coverage Policy

**Coverage for spinal orthoses is subject to the terms, conditions and limitations of the applicable benefit plan's External Prosthetic Appliances and Devices (EPA) or Durable Medical Equipment (DME) benefit and schedule of copayments. Please refer to the applicable benefit plan document to determine benefit availability and the terms, conditions and limitations of coverage. Under many benefit plans, coverage for EPA and DME is limited to the lowest-cost alternative.**

**Cigna covers a spinal orthosis (e.g., cervical orthosis cervical-thoracic orthosis, thoracic orthosis, thoracic-lumbar-sacral orthosis, lumbar-sacral orthosis, lumbar orthosis) as medically necessary for ANY of the following indications:**

- when mobility restriction is necessary to alleviate pain of spinal origin
- postoperatively or post-injury to facilitate healing of the spine or related soft tissues
- as support for weak spinal musculature or a spinal deformity that significantly impacts the ability to perform activities of daily living

### Repair and Replacement

**Cigna covers repair and/or replacement of a spinal orthosis under the following circumstances:**

- Repair is covered only when anatomical change or reasonable wear and tear renders the item nonfunctional and the repair will make the equipment usable.
- Replacement is covered only when anatomical change or reasonable wear and tear renders the item nonfunctional and nonrepairable.

**Cigna does not cover repair or replacement if the item becomes unusable or non-functioning because of individual misuse, abuse or neglect.**

## Not Covered

**Cigna does not cover a spinal orthosis for ANY other indication, including the following because each is considered not medically necessary and/or specifically excluded under many benefit plans:**

- when used primarily for improved athletic performance or sports participation
- to prevent injury in an otherwise uninjured body part
- as a preoperative diagnostic tool prior to lumbar fusion surgery
- duplicate orthoses for use as spare devices

**Cigna does not cover the following items because they do not address the underlying physical condition and are convenience/comfort items that are not primarily medical in nature and not medically necessary (this list may not be all-inclusive):**

- prophylactic elastic lumbar supports (e.g., tool belts, lumbar belt)
- inflatable lumbar support pillows/cushions
- back rest supports
- protective body socks

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## General Background

Back pain is a common ailment that affects individuals of all ages and may result from conditions including, but not limited to, injury, obesity, age, disc disease, spinal stenosis, spinal sprains and strains. Back pain treatments include short-term rest, nonsteroidal anti-inflammatory drugs, muscle relaxants, back braces/spinal orthotics and passive modalities such as heat, cold, massage, ultrasound, electrical stimulation, acupuncture, traction, and spinal manipulation. More invasive treatments may involve anesthetic injections and surgery.

Orthotic devices are orthopedic appliances or apparatuses used to support, align, prevent or correct deformities. A brace is an orthosis or orthopedic appliance that supports or holds in correct position any movable part of the body and that allows for motion of that body part. A spinal orthosis provides an external force to control spine position, applies corrective forces to abnormal curvatures, provides stabilization of spine structures when soft tissue can't, and restricts spine movement after trauma. The biomechanics typically consist of a three-point pressure system directed at trunk and head support, motion control, spinal realignment and partial weight transfer when upright. Spinal orthoses include cervical orthoses (CO), cervical-thoracic orthoses, (CTO), thoracic orthoses (TO), thoracic-lumbar-sacral orthoses, (TLSO), lumbar-sacral orthoses (LSO), and lumbar orthoses (LO).

Spinal orthoses have been recommended for conservative treatment of back pain and to stabilize the spine. Conditions for which spinal orthoses have been recommended for relieving pain, reducing progression of disease/injury, and improving function include but are not limited to spinal stenosis, vertebral fractures, scoliosis, spondylosis, spondylolisthesis, Scheuermann's disease (kyphotic deformity), and sprains.

Lumbosacral supports or back braces have also been used for the treatment of back pain related to degenerative disorders of the lumbar spine, as a predictor of outcome following lumbar fusion surgery, and as an adjunct to lumbar fusion surgery. According to a review and subsequent guideline published by Resnick et al. (2005), the current evidence is insufficient to recommend a treatment standard. However, the following are recommended guidelines/options for brace therapy as an adjunct to or substitute for lumbar fusion:

- The short-term use of a rigid lumbar support (i.e., 1–3 weeks) is recommended as a treatment for low-back pain of relatively short duration (i.e., < six months).
- The use of a lumbar brace for patients with chronic low-back pain is not recommended because there is no pertinent medical evidence of any long-term benefit or evidence that brace therapy is effective in the treatment of patients with chronic (i.e., > six months) low-back pain.
- Lumbar braces are not recommended as a means of decreasing low-back pain in the general working population; however, they are recommended as a means of decreasing the number of sick days lost due to low-back pain among workers with a previous lumbar injury.
- The use of lumbar brace therapy as a preoperative diagnostic tool or transpedicular external fixation to predict outcome following lumbar fusion surgery is not recommended.

Spinal orthoses have also been recommended for use following spinal surgery as a method of restricting excessive spinal motion, allowing for soft tissue healing, and to reduce postoperative pain. In addition, authors suggest spinal bracing results in lower incidence of hardware failure, loss of surgical correction, and pseudoarthrosis. The indications for bracing are dependent on the degree of injury and spinal instability, the presence of neurological deficit, the type and quality of internal fixation, bone quality, and the patient's individual profile (Lindsey, et al., 2003).

Combined with education and training on back mechanics and lifting, elastic rib belts and lumbar supports have been recommended for the prevention of injury in the workplace. However, authors have reported that, despite their use, efficacy is debatable (van Poppel, et al., 1998), and individual workers presenting with no prior history of low-back pain are unlikely to benefit from back belt use (Ammendolia, et al., 2005). Research has not demonstrated these devices are effective when used for the prevention of injury (Bigos, et al., 2009; van Duijvenbode, et al., 2009; van Poppel, 2004).

**Types of Spinal Orthoses**
Usage of orthotics depends on the amount of stabilization or support required. Spinal orthoses may be flexible, rigid or semi-rigid. Flexible orthoses (LSOs, LOs) consist of cloth belts and elastic corsets with adjustable fasteners, and are used primarily for muscle support in the low back to relieve low-back pain that results from trauma, disc disease or weakened muscles. Lumbar corsets may be used to treat mild spinal instability, painful arthritis, vertebral fractures of the lumbar and lower thoracic spine and may be used immediately after lumbar surgery (e.g., discectomy, fusion) to provide back support. Rigid orthoses (TLSOs, some LSOs) are plastic body jackets. They are often used post-fracture to reduce risk of further injury, or postoperatively for complex spinal surgeries when increased support is required for spinal immobilization. Rigid devices are also recommended for the treatment of scoliosis. Semi-rigid devices combine the support of rigid materials and the comfort of flexible fabrics.

Cervical orthoses (HCPCS codes L0120–L0200) and cervical-thoracic orthoses (HCPCS codes L0210–L0220) may be used as nonoperative management for cervical and/or thoracic trauma. There are various types of cervical orthoses, including soft and rigid devices. Soft collars that are made of lightweight material are very flexible and can be easily removed. However, they offer minimal immobilization and primarily act as reminders to limit neck motion. Soft collars are typically indicated for mild cervical sprains or, in some cases, to provide comfort after a stable internal fixation. More rigid collars such as the Philadelphia collar and Miami collar are utilized post-fusion for cervical strain or for unstable fractures. A rigid Halo device provides the most rigid stabilization and is used for multiple level cervical spine surgery. CTOs can add improved motion restriction in the middle to lower cervical spine and may also be used in unstable fractures. The sternal occipital mandibular immobilizer (SOMI) brace is a low thoracic CTO used for stabilizing the upper cervical vertebrae.

Thoracolumbar orthoses are generally used to treat lower level fractures and immobilization. Available devices include lumbosacral corsets, Jewett braces, and custom-molded devices.

Thoracic-lumbar-sacral orthoses (HCPCS codes L0450–L0492); lumbar orthoses (HCPCS codes L0625–L0627); and lumbar-sacral orthoses (HCPCS codes L0628–L0640) have the following characteristics:

- They are used to immobilize a specified area of the spine.
- They have an intimate fit and are generally worn under clothing.

- They are not specifically designed for patients in wheelchairs (some braces may be worn by a patient in a wheelchair, e.g., neuromuscular scoliosis, post-spinal cord injury).

In addition to the immobilization and intimate fit, the body-jacket type orthoses (HCPCS L0639, L0640, L0458–L0464, and L0480–L0492) are characterized by a rigid plastic shell that encircles the trunk with overlapping edges and stabilizing closures. It provides a high degree of immobility. The entire circumference of the plastic shell must be the same rigid material. These orthoses are often required for scoliosis, postoperatively following spinal stabilization of instability, and for nonoperative management of unstable fractures (e.g., burst fractures).

A TLSO brace must extend from the sacrococcygeal junction to just inferior to the scapular spine, excluding elastic or equal shoulder straps or other strapping. The anterior must, at a minimum, extend from the symphysis pubis to the xiphoid. Some extend up to the sternal notch.

A spinal orthosis can be designed to control gross movement of the trunk and intersegmental motion of the vertebrae in one or more planes of motion:

- lateral/flexion (side bending) in the coronal/frontal plane
- flexion (forward bending) or extension (backward bending) in the sagittal plane
- axial rotation (twisting) in the transverse plane

If the device does not provide control of motion in one or more planes, or if it does not provide intracavitary pressure, then the item should not be considered a spinal orthosis.

Sagittal control is achieved by a rigid posterior panel.

Coronal control is achieved by a rigid panel in the mid-axillary line (which may be either an integral part of a posterior or anterior panel or a separate panel).

Transverse control is achieved by one of the following structural features:

- a rigid panel in the upper sternal area which is an integral part of an anterior shell
- a rigid panel in the upper sternal area which is rigidly attached to a rigid abdominal or posterior panel
- rigid extensions form a rigid posterior panel to the upper anterior chest bilaterally

Straps over the shoulders attaching to a posterior panel do not provide transverse control.

A protective body sock, HCPCS code L0984, is a garment made of cloth or similar material that is worn under a spinal orthosis and is not primarily medical in nature. Other items that are not primarily medical in nature and considered convenience items include, but are not limited to, prophylactic elastic lumbar supports (e.g., tool belts, lumbar belt), inflatable lumbar support pillows/cushions and back rest supports.

Spinal orthoses may be prefabricated, prefitted, or custom-fabricated.

A prefabricated orthosis is one that is manufactured in quantity without a specific patient in mind. A prefabricated orthosis can be modified (e.g., trimmed, bent or molded) for use by a specific patient and is then considered a custom-fitted orthosis. An orthosis that is made from prefabricated components is considered a prefabricated orthosis. Any orthosis that does not meet the standard definition of custom-fabricated is considered to be a prefabricated device.

A custom-fabricated orthosis is one that is specifically made for an individual patient, starting with the most basic materials that may include plastic, metals, leather or various cloths. The construction of these devices requires substantial labor such as cutting, bending, molding and sewing, and may even involve the use of some prefabricated components. A molded-to-patient model orthosis is a type of custom-fabricated device for which an impression of the specific body part is made (e.g., by means of a plaster cast, or CAD-CAM [computer-aided design] technology). The impression is then used to make a specific patient model. The actual orthosis is molded from the patient-specific model. HCPCS codes representing custom-fabricated orthoses are L0622, L0624, L0629, L0632, L0634, L0636, L0640, L0480, L0482 and L0452.

Unmodified, prefabricated orthoses are generally used in treating conditions prior to a custom-fitted orthosis (prefabricated orthoses that are modified by bending or molding for a specific patient). Custom-fitted orthoses are generally attempted prior to the use of custom-fabricated orthoses (individually constructed from materials). A custom-fitted orthosis may be required initially for conditions including, but not limited to: scoliosis management, following surgical stabilization of the spine following trauma, and for unstable spinal fractures that are treated nonoperatively (e.g., burst fractures).

An orthotic device used solely to prevent injury in an otherwise uninjured body part is considered a preventative or prophylactic treatment modality.

Identical, spare orthoses are considered convenience items.

**Use Outside of the US:** No relevant information found related to spinal orthotic devices.

**Summary**
Conservative treatment for back pain may include the use of a spinal orthotic. These devices are used to alleviate pain by restricting mobility, postoperatively and post-injury to facilitate healing of the spine and/or related tissues, and to support weak spinal muscles or a deformed spine that significantly impacts a patient's ability to perform activities of daily living.

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## Coding/Billing Information

**Note:** 1) This list of codes may not be all-inclusive.
2) Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

**Covered when medically necessary:**

| HCPCS Codes | Description |
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| L0120 | Cervical, flexible, nonadjustable (foam collar) |
| L0130 | Cervical, flexible, thermoplastic collar, molded to patient |
| L0140 | Cervical, semi-rigid, adjustable (plastic collar) |
| L0150 | Cervical, semi-rigid, adjustable molded chin cup (plastic collar with mandibular/occipital piece) |
| L0160 | Cervical, semi-rigid, wire frame occipital/mandibular support |
| L0170 | Cervical, collar, molded to patient model |
| L0172 | Cervical, collar, semi-rigid thermoplastic foam, two piece |
| L0174 | Cervical, collar, semi-rigid, thermoplastic foam, two piece with thoracic extension |
| L0180 | Cervical, multiple post collar, occipital/mandibular supports, adjustable |
| L0190 | Cervical, multiple post collar, occipital/mandibular supports, adjustable cervical bars (SOMI, Guilford, Taylor types) |
| L0200 | Cervical, multiple post collar, occipital/mandibular supports, adjustable cervical bars, and thoracic extension |
| L0220 | Thoracic, rib belt, custom fabricated |
| L0430 | Spinal orthosis, anterior-posterior-lateral control, with interface material, custom fitted (DeWall Posture Protector only) |
| L0450 | TLSO, flexible, provides trunk support, upper thoracic region, produces intracavitary pressure to reduce load on the intervertebral disks with rigid stays or panel(s), includes shoulder straps and closures, prefabricated, includes fitting and adjustment |
| L0452 | TLSO, flexible, provides trunk support, upper thoracic region, produces intracavitary pressure to reduce load on the intervertebral disks with rigid stays or panel(s), includes shoulder straps and closures, custom fabricated |
| L0454 | TLSO flexible, provides trunk support, extends from sacrococcygeal junction to |

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| | above T-9 vertebra, restricts gross trunk motion in the sagittal plane, produces intracavitary pressure to reduce load on the intervertebral disks with rigid stays or panel(s), includes shoulder straps and closures, prefabricated, includes fitting and adjustment |
| L0456 | TLSO, flexible, provides trunk support, thoracic region, rigid posterior panel and soft anterior apron, extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, restricts gross trunk motion in the sagittal plane, produces intracavitary pressure to reduce load on the intervertebral disks, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0458 | TLSO, triplanar control, modular segmented spinal system, two rigid plastic shells, posterior extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, anterior extends from the symphysis pubis to the xiphoid, soft liner, restricts gross trunk motion in the sagittal, coronal, and transverse planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0460 | TLSO, triplanar control, modular segmented spinal system, two rigid plastic shells, posterior extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, anterior extends from the symphysis pubis to the sternal notch, soft liner, restricts gross trunk motion in the sagittal, coronal, and transverse planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0462 | TLSO, triplanar control, modular segmented spinal system, three rigid plastic shells, posterior extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, anterior extends from the symphysis pubis to the sternal notch, soft liner, restricts gross trunk motion in the sagittal, coronal, and transverse planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0464 | TLSO, triplanar control, modular segmented spinal system, four rigid plastic shells, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to the sternal notch, soft liner, restricts gross trunk motion in sagittal, coronal, and transverse planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0466 | TLSO, sagittal control, rigid posterior frame and flexible soft anterior apron with straps, closures and padding, restricts gross trunk motion in sagittal plane, produces intracavitary pressure to reduce load on intervertebral disks, includes fitting and shaping the frame, prefabricated, includes fitting and adjustment |
| L0468 | TLSO, sagittal-coronal control, rigid posterior frame and flexible soft anterior apron with straps, closures and padding, extends from sacrococcygeal junction over scapulae, lateral strength provided by pelvic, thoracic, and lateral frame pieces, restricts gross trunk motion in sagittal, and coronal planes, produces intracavitary pressure to reduce load on intervertebral disks, includes fitting and shaping the frame, prefabricated, includes fitting and adjustment |
| L0470 | TLSO, triplanar control, rigid posterior frame and flexible soft anterior apron with straps, closures and padding, extends from sacrococcygeal junction to scapula, lateral strength provided by pelvic, thoracic, and lateral frame pieces, rotational strength provided by subclavicular extensions, restricts gross trunk motion in sagittal, coronal, and transverse planes, produces intracavitary pressure to reduce load on the intervertebral disks, includes fitting and shaping the frame, prefabricated, includes fitting and adjustment |
| L0472 | TLSO, triplanar control, hyperextension, rigid anterior and lateral frame extends from symphysis pubis to sternal notch with two anterior components (one pubic and one sternal), posterior and lateral pads with straps and closures, limits spinal |

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| | flexion, restricts gross trunk motion in sagittal, coronal, and transverse planes, includes fitting and shaping the frame, prefabricated, includes fitting and adjustment |
| L0480 | TLSO, triplanar control, one piece rigid plastic shell without interface liner, with multiple straps and closures, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to sternal notch, anterior or posterior opening, restricts gross trunk motion in sagittal, coronal, and transverse planes, includes a carved plaster or CAD-CAM model, custom fabricated |
| L0482 | TLSO, triplanar control, one piece rigid plastic shell with interface liner, multiple straps and closures, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to sternal notch, anterior or posterior opening, restricts gross trunk motion in sagittal, coronal, and transverse planes, includes a carved plaster or CAD-CAM model, custom fabricated |
| L0484 | TLSO, triplanar control, two piece rigid plastic shell without interface liner, with multiple straps and closures, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to sternal notch, lateral strength is enhanced by overlapping plastic, restricts gross trunk motion in the sagittal, coronal, and transverse planes, includes a carved plaster or CAD-CAM model, custom fabricated |
| L0486 | TLSO, triplanar control, two piece rigid plastic shell with interface liner, multiple straps and closures, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to sternal notch, lateral strength is enhanced by overlapping plastic, restricts gross trunk motion in the sagittal, coronal, and transverse planes, includes a carved plaster or CAD-CAM model, custom fabricated |
| L0488 | TLSO, triplanar control, one piece rigid plastic shell with interface liner, multiple straps and closures, posterior extends from sacrococcygeal junction and terminates just inferior to scapular spine, anterior extends from symphysis pubis to sternal notch, anterior or posterior opening, restricts gross trunk motion in sagittal, coronal, and transverse planes, prefabricated, includes fitting and adjustment |
| L0490 | TLSO, sagittal-coronal control, one piece rigid plastic shell, with overlapping reinforced anterior, with multiple straps and closures, posterior extends from sacrococcygeal junction and terminates at or before the T9 vertebra, anterior extends from symphysis pubis to xiphoid, anterior opening, restricts gross trunk motion in sagittal and coronal planes, prefabricated, includes fitting and adjustment |
| L0491 | TLSO, sagittal-coronal control, modular segmented spinal system, two rigid plastic shells, posterior extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, anterior extends from the symphysis pubis to the xiphoid, soft liner, restricts gross trunk motion in the sagittal and coronal planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0492 | TLSO, sagittal-coronal control, modular segmented spinal system, three rigid plastic shells, posterior extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, anterior extends from the symphysis pubis to the xiphoid, soft liner, restricts gross trunk motion in the sagittal and coronal planes, lateral strength is provided by overlapping plastic and stabilizing closures, includes straps and closures, prefabricated, includes fitting and adjustment |
| L0621 | Sacroiliac orthosis, flexible, provides pelvic-sacral support, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0622 | Sacroiliac orthosis, flexible, provides pelvic-sacral support, reduces motion about |

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| | the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, custom fabricated |
| L0623 | Sacroiliac orthosis, provides pelvic-sacral support, with rigid or semi-rigid panels over the sacrum and abdomen, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0624 | Sacroiliac orthosis, provides pelvic-sacral support, with rigid or semi-rigid panels placed over the sacrum and abdomen, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, custom fabricated |
| L0625 | Lumbar orthosis, flexible, provides lumbar support, posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include pendulous abdomen design, shoulder straps, stays, prefabricated, includes fitting and adjustment |
| L0626 | Lumbar orthosis, sagittal control, with rigid posterior panel(s), posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0627 | Lumbar orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0628 | LSO, flexible, provides lumbo-sacral support, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0629 | LSO, flexible, provides lumbo-sacral support, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include stays, shoulder straps, pendulous abdomen design, custom fabricated |
| L0630 | LSO, sagittal control, with rigid posterior panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0631 | LSO, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0632 | LSO, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, custom fabricated |
| L0633 | LSO, sagittal-coronal control, with rigid posterior frame/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0634 | LSO, sagittal-coronal control, with rigid posterior frame/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panel(s), produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, custom fabricated |

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| L0635 | LSO, sagittal-coronal control, lumbar flexion, rigid posterior frame/panel(s), lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panel(s), produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0636 | LSO, sagittal-coronal control, lumbar flexion, rigid posterior frame/panels, lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, custom fabricated |
| L0637 | LSO, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0638 | LSO, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, custom fabricated |
| L0639 | LSO, sagittal-coronal control, rigid shell(s)/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, anterior extends from symphysis pubis to xyphoid, produces intracavitary pressure to reduce load on the intervertebral discs, overall strength is provided by overlapping rigid material and stabilizing closures, includes straps, closures, may include soft interface, pendulous abdomen design, prefabricated, includes fitting and adjustment |
| L0640 | LSO, sagittal-coronal control, rigid shell(s)/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, anterior extends from symphysis pubis to xyphoid, produces intracavitary pressure to reduce load on the intervertebral discs, overall strength is provided by overlapping rigid material and stabilizing closures, includes straps, closures, may include soft interface, pendulous abdomen design, custom fabricated |
| L0700 | Cervical-thoracic-lumbar-sacral orthotic (CTLSO), anterior-posterior-lateral control, molded to patient model, (Minerva type) |
| L0710 | Cervical-thoracic-lumbar-sacral orthotic (CTLSO), anterior-posterior-lateral-control, molded to patient model, with interface material, (Minerva type) |
| L0970 | TLSO, corset front |
| L0972 | LSO, corset front |
| L0974 | TLSO, full corset |
| L0976 | LSO, full corset |
| L0978 | Axillary crutch extension |
| L0980 | Peroneal straps, pair |
| L1000 | Cervical-thoracic-lumbar-sacral orthosis (CTLSO) (Milwaukee), inclusive of furnishing initial orthosis, including model |
| L1001 | Cervical thoracic lumbar sacral orthosis, immobilizer, infant size, prefabricated, includes fitting and adjustment |
| L1005 | Tension based scoliosis orthosis and accessory pads, includes fitting and adjustment |
| L1010 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; axilla sling |
| L1020 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; kyphosis pad |
| L1025 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; kyphosis pad, floating |

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| L1030 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; lumbar bolster pad |
| L1040 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; lumbar or lumbar rib pad |
| L1050 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; sternal pad |
| L1060 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; thoracic pad |
| L1070 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; trapezius sling |
| L1080 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; outrigger |
| L1085 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; outrigger, bilateral with vertical extensions |
| L1090 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; lumbar sling |
| L1100 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; ring flange, plastic or leather |
| L1110 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; ring flange, plastic or leather, molded to patient model |
| L1120 | Additions to cervical-thoracic-lumbar-sacral orthosis (CTLSO) or scoliosis orthosis; covers for upright, each |
| L1200 | Thoracic-lumbar-sacral-orthosis (TLSO), inclusive of furnishing initial orthosis only |
| L1210 | Addition to TLSO, (low profile); lateral thoracic extension |
| L1220 | Addition to TLSO, (low profile); anterior thoracic extension |
| L1230 | Addition to TLSO, (low profile); Milwaukee type superstructure |
| L1240 | Addition to TLSO, (low profile); lumbar derotation pad |
| L1250 | Addition to TLSO, (low profile); anterior axis pad |
| L1260 | Addition to TLSO, (low profile); anterior thoracic derotation pad |
| L1270 | Addition to TLSO, (low profile); abdominal pad |
| L1280 | Addition to TLSO, (low profile); rib gusset (elastic), each |
| L1290 | Addition to TLSO, (low profile); lateral trochanteric pad |
| L1300 | Other scoliosis procedure; body jacket molded to patient model |
| L1310 | Other scoliosis procedure; post-operative body jacket |

**Not primarily medical in nature/Convenience items/Not Covered:**

| **HCPCS Codes** | **Description** |
|---|---|
| L0982 | Stocking supporter grips, set of four (4) |
| L0984 | Protective body sock, each |



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