

SUBJECT: CRYOTHERAPY (COLD THERAPY) DEVICES

POLICY NUMBER: 1.01.21
CATEGORY: Equipment/Supplies

EFFECTIVE DATE: 09/16/99

REVISED DATE: 02/01/01, 06/27/02, 06/26/03, 05/27/04, 04/27/06, 04/26/07, 04/24/08, 04/23/09, 04/29/10, 06/24/11, 06/28/12

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- *If the member's subscriber contract excludes coverage for a specific service it is not covered under that contract. In such cases, medical policy criteria are not applied.*
- *Medical policies apply to commercial and Medicaid products only when a contract benefit for the specific service exists.*
- *Medical policies only apply to Medicare products when a contract benefit exists and where there are no National or Local Medicare coverage decisions for the specific service.*

POLICY STATEMENT:

Based upon our criteria and review of the peer-reviewed literature, the use of active or passive cryotherapy devices for any indication has not been medically proven to be effective and is considered **not medically necessary**.

DESCRIPTION:

Cryotherapy is "cold therapy" and refers to the placement of cold packs or compresses to promote comfort while helping to prevent inflammation and swelling. The devices can provide either passive or active cooling. Passive cooling devices are usually a garment such as a vest or cuff in which ice water can be circulated and compression controlled by the use of a hand pump or use gravity. Some types of passive cooling devices can be fitted with a mechanical pump which allows the temperature of the circulating water to be maintained at a more constant temperature (e.g., Cryo/Cuff®). Active cooling devices have separate pumps which combine focal compression with cold to provide optimal control of swelling, edema, hematoma, hemarthrosis, and pain (e.g., Game Ready™).

RATIONALE:

The majority of the published randomized studies of cooling devices failed to adequately describe the cooling regimens or include the relevant control group of standard ice pack treatment. When cooling devices and ice packs were used with the same regimen, no differences in health outcomes were observed. Currently available evidence is insufficient to determine whether continuous cooling with these devices results in improved health outcomes when compared to usual ice pack exchange in the home environment. Thus, the available scientific literature is insufficient to document that the use of passive cooling systems is associated with a benefit beyond convenience; these devices are considered not medically necessary.

CODES: Number Description

Eligibility for reimbursement is based upon the benefits set forth in the member's subscriber contract.

CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.

Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.

CPT: No specific code(s)

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HCPCS: E0218 Water circulating cold pad with pump

E0236 Pump for water circulating pad

ICD9: 715.16 Osteoarthritis localized, lower leg

715.26 Osteoarthritis, localized, secondary lower leg

715.36 Osteoarthritis, localized, not specified whether primary or secondary, lower leg

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715.96 Osteoarthritis, unspecified whether generalized or localized, lower leg

717.83 Old disruption of anterior cruciate ligament

Several

ICD10: M17.0-M17.9 Osteoarthritis of knee (code range)

M23.50 Chronic instability of knee, unspecified knee

Several

REFERENCES:

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*Key Article

KEY WORDS:

Cold therapy, Cryotherapy, Ice therapy.

CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS

There is currently a Local Coverage Determination (LCD) for Cold Therapy. Please refer to the following LCD website for Medicare Members: [http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=5038&ContrId=137&ver=30&ContrVer=1&CntrctrSelected=137*1&Cntrctr=137&name=NHIC%2c+Corp.+16003%2c+DME+MAC\)&s=41&DocType=All&bc=AggAAAIAAAAAAA%3d%3d&](http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=5038&ContrId=137&ver=30&ContrVer=1&CntrctrSelected=137*1&Cntrctr=137&name=NHIC%2c+Corp.+16003%2c+DME+MAC)&s=41&DocType=All&bc=AggAAAIAAAAAAA%3d%3d&)