



**BlueCross
BlueShield
of Arizona**

An Independent Licensee of the
Blue Cross and Blue Shield Association

MEDICAL COVERAGE GUIDELINES

SECTION: Durable Medical Equipment (DME)

ORIGINAL EFFECTIVE DATE:

01/07/14

LAST REVIEW DATE:

LAST CRITERIA REVISION DATE:

ARCHIVE DATE:

SKIN CONTACT MONOCHROMATIC INFRARED ENERGY (MIRE)

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Description:

The application of monochromatic infrared energy (MIRE) has been investigated as a treatment of multiple conditions, i.e., cutaneous ulcers, diabetic neuropathy, musculoskeletal and soft tissue injuries, including temporomandibular disorders, tendonitis, capsulitis and myofascial pain. MIRE devices are also being developed for the treatment of baldness and snoring. MIRE is delivered through pads that are placed on the skin and the infrared energy is delivered over a period of 30-45 minutes. The mechanism of action is not known, although it has been proposed that MIRE may help release small molecules of nitric oxide from hemoglobin in the blood. Nitric oxide increases blood flow and helps deliver healing cells and nutrients to the treatment area.

Devices include:

- Anodyne® Therapy System)
- Clarimedix system
- HealthLight™ System



**BlueCross
BlueShield
of Arizona**

An Independent Licensee of the
Blue Cross and Blue Shield Association

MEDICAL COVERAGE GUIDELINES

SECTION: Durable Medical Equipment (DME)

ORIGINAL EFFECTIVE DATE:

01/07/14

LAST REVIEW DATE:

LAST CRITERIA REVISION DATE:

ARCHIVE DATE:

SKIN CONTACT MONOCHROMATIC INFRARED ENERGY (MIRE) (cont.)

Criteria:

➤ Skin contact monochromatic infrared energy (MIRE) for treatment of the following conditions is considered ***experimental or investigational*** based upon:

1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
2. Insufficient evidence to support improvement of the net health outcome, and
3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives.

These conditions include, *but are not limited to*:

- Cutaneous ulcers
- Diabetic neuropathy
- Musculoskeletal conditions:
 - Capsulitis
 - Myofascial pain
 - Temporomandibular disorders
 - Tendonitis

**MEDICAL COVERAGE GUIDELINES****SECTION: Durable Medical Equipment (DME)****ORIGINAL EFFECTIVE DATE:****01/07/14****LAST REVIEW DATE:****LAST CRITERIA REVISION DATE:****ARCHIVE DATE:**

SKIN CONTACT MONOCHROMATIC INFRARED ENERGY (MIRE) (cont.)**Resources:**

1. 1.01.22 BCBS Association Medical Policy Reference Manual. Skin Contact Monochromatic Infrared Energy as a Technique to Treat Cutaneous Ulcers, Diabetic Neuropathy, and Miscellaneous Musculoskeletal Conditions. Re-issue date 12/12/2013, issue date 04/29/2003.
2. Lavery LA, Murdoch DP, Williams J, Lavery DC. Does anodyne light therapy improve peripheral neuropathy in diabetes? A double-blind, sham-controlled, randomized trial to evaluate monochromatic infrared photoenergy. *Diabetes Care*. 2008;31(2):316-21.
Reprint: Abstract
3. Nather A, Sim YE, Chew LLj, Neo SH. Anodyne therapy for recalcitrant diabetic foot ulcers: a report of four cases. *J Orthop Surg (Hong Kong)*. 2007;15(3):361-4.
Reprint: Abstract

FDA Summary Statements for lamp, infrared, therapeutic heating. Device names include, *but are not limited to*:

Anodyne® Professional Therapy System
Clarimedix system
HealthLight™ System

- FDA-approved indication: Increasing circulation and decreasing pain.

HealthLight System is a trademark of Bioremedi Therapeutic Systems, Inc., an independent corporation that is not affiliated with BCBSAZ.

Anodyne Therapy System is a registered trademark of Anodyne Therapy LLC, an independent corporation that is not affiliated with BCBSAZ.