

## Home Cervical Traction Therapy

<b>Policy ID:</b>	HHO-DE-MP-1245
<b>Approved By:</b>	Highmark Health Options – Market Leadership
<b>Provider Notice Date:</b>	
<b>Original Effective Date:</b>	N/A
<b>Annual Approval Date:</b>	01/26/2022
<b>Last Revision Date:</b>	01/26/2022
<b>Products:</b>	Medicaid
<b>Application:</b>	
<b>Page Number(s):</b>	1-3

### Disclaimer

Highmark Health Options medical policy is intended to serve only as a general reference resource regarding coverage for the services described. This policy does not constitute medical advice and is not intended to govern or otherwise influence medical decisions.

### POLICY STATEMENT

Cervical traction is a medical technique that uses devices to apply forces that are atraumatic to the cervical spine and used to treat neck pain with or without cervical radicular pain.

### DEFINITIONS

**Highmark Health Options (HHO)** – Managed care organization serving vulnerable populations that have complex needs and qualify for Medicaid. Highmark Health Options members include individuals and families with low income, expecting mothers, children, and people with disabilities. Members pay nothing to very little for their health coverage. Highmark Health Options currently serves Delaware Medicaid: Delaware Healthy Children Program (DHCP) and Diamond State Health Plan and Health Plan Plus members.

### POLICY POSITION

Cervical traction devices in the home setting may be considered medically necessary when BOTH of the following criteria are met:

- The individual has a musculoskeletal or neurologic impairment requiring cervical traction equipment; and
- The appropriate use of an in-home home cervical traction device has been demonstrated to the individual by a medical professional and the individual has tolerated the selected device.

All other conditions, including atlanto-occipital dislocation injuries, are considered not medically necessary.

Total payments for a rental item may not exceed its allowable purchase price, except for those items identified as life sustaining DME.

Prior authorization is required

**NONCOVERED SERVICES**

Cervical traction device with inflatable air bladder is noncovered.

**COVERED PROCEDURE CODES**

E0840	Traction Frame, Attached To Headboard, Cervical Traction.
E0849	Traction Equipment, Cervical, Free Standing Stand/frame, Pneumatic, Applying Traction Force To Other Than Mandible.
E0850	Traction Stand, Free Standing, Cervical Traction.
E0855	Cervical Traction Equipment Not Requiring Additional Stand Or Frame.
E0860	Traction Equipment, Overdoor, Cervical.

**NONCOVERED PROCEDURE CODES**

E0856	Cervical Traction Device, With Inflatable Air Bladder(s).
-------	---

**Covered Codes for Procedure Codes: E0840, E0849, E0850, E0855, E0860**

M43.02	M43.03	M43.12	M43.13	M43.5X2
M43.5X3	M47.012	M47.022	M47.12	M47.22
M47.23	M47.812	M47.892	M47.893	M48.02
M48.03	M48.8X2	M48.8X3	M50.00	M50.01
M50.020	M50.021	M50.022	M50.023	M50.03
M50.10	M50.11	M50.120	M50.121	M50.122
M50.123	M50.13	M50.20	M50.21	M50.22
M50.221	M50.222	M50.223	M50.30	M50.32
M50.321	M50.322	M50.323	M50.80	M50.81
M50.82	M50.821	M50.822	M50.823	M50.90
M50.91	M50.920	M50.921	M50.922	M50.923
M53.0	M53.1	M53.82	M54.12	M54.13
M54.2	M54.89	M62.411	M62.412	M96.1
M99.11	M99.21	M99.31	M99.41	M99.51
M99.61	M99.71	S13.0XXA	S13.100A	S13.101A
S13.110A	S13.111A	S13.120A	S13.120D	S13.120S
S13.121A	S13.121D	S13.121S	S13.130A	S13.130D
S13.130S	S13.131A	S13.131D	S13.131S	S13.140A

S13.140D	S13.140S	S13.141A	S13.141D	S13.141S
S13.150A	S13.150D	S13.150S	S13.151A	S13.151D
S13.151S	S13.160A	S13.160D	S13.160S	S13.161A
S13.161D	S13.161S	S13.170A	S13.170D	S13.170S
S13.171A	S13.171D	S13.171S	S13.180A	S13.180D
S13.180S	S13.181A	S13.181D	S13.181S	S13.20XA
S13.29XA	S13.4XXA	S13.8XXA	S13.9XXA	S16.1XXA
S16.1XXD	S16.1XXS			

## References

Washington State Department of Labor and Industries Technology Assessment. Pronex and HomeTrac Cervical Traction. 2015.

Hayes, Inc, Health Technology Brief. Outpatient Cervical Traction for Treatment of Neck Pain. Lansdale, PA: Hayes, In.; November, 2015.

Bukhari SRI, Shakil-ur-Rehman S, Ahmad S, Naeem A. Comparison between effectiveness of Mechanical and Manual Traction combined with mobilization and exercise therapy in Patients with Cervical Radiculopathy. Pakistan Journal of Medical Sciences. 2016;32(1):31-34.

Kang H J, Park TS. Changes in cervical muscle activity according to the traction force of an air-inflatable neck traction device. J Phys Ther Sci. 2015; 27: 2723-2725.

Khan RR, Awan WA, Rashid S, Masood T. A randomized controlled trial of intermittent Cervical Traction in sitting Vs. Supine position for the management of Cervical Radiculopathy. Pak J Med Sci. 2017;33(6):1333- 1338.

Romeo A, Vanti C, Boldrini V, Ruggeri M, et al. Cervical Radiculopathy: Effectiveness of Adding Traction to Physical Therapy—A systematic Review and Meta-Analysis of Randomized Controlled Trials. Physical Therapy. 2018;98(4)231-242.

Gregory G, McKivigan JM. Effectiveness of Intermittent Mechanical Traction in Cervical Radiculopathy: A Systematic Review. J Med Res Prac. 2018;7(2)39-46.

Shakoor MA, Emran MA, Zaman AKA, Moyeenuzzaman M. Effects of manual continuous home cervical traction in cervical spondylosis. Bangladesh Med Res Counc Bull 2020; 46:128-133.