Continuous Passive Motion (CPM) Device/Machines may be eligible for coverage for use postoperatively, as an adjunct to conventional physical therapy, in the following instances:

- Total Knee Arthroplasty (TKA) and
- Ligamentous Reconstruction of the Knee.

**Note:** Documentation of the preceding surgical indications must accompany the request or claim for the CPM device.

CPM device may be eligible for coverage for use postoperatively following a previously approved Autologous Chondrocyte Transplantation (ACT) or Infusion (ACI), as an adjunct to rehabilitation.

**Note:** Documentation of the preceding surgical intervention must accompany the request or claim for the CPM device.

Outpatient use of the CPM device may be eligible for coverage up to twenty-one (21) days ONLY.

**Note:** Documentation of need for outpatient use, including degree of knee restoration, must accompany the request.

The following exceptional conditions may be eligible for coverage AND should be referred for medical review in situations for use other than those listed above:

- Repeated Ligamentous Reconstruction and/or debridement procedure in a knee following a previously failed Ligamentous Reconstruction when adequate range of motion was not established in the initial procedure;

- Knee joint stiffness resulting from secondary diseases, such as rheumatoid arthritis or trauma, and/or post surgical or post infective adhesive synovitis with range of motion (ROM) of less than 30 degrees after surgical release or manipulation;

- Significant limitation of the knee ROM, (the inability of knee extension past 30 degrees), at the time of hospital discharge from any cause;

- Preexisting medical or lateral femoral condyle injury requiring a condyloplasty; and,

- Following knee joint debridement or synovectomy.

The other uses of CPM devices, with or without conventional physical therapy, including but not limited to, are not eligible for coverage.
for the following surgical procedures or conditions, as these uses would be considered investigational, experimental, or unproven:

- Shoulder surgery,
- Total hip replacement (THR),
- Temporomandibular joint (TMJ) surgery,
- Ankle or toe surgery,
- Prevention of thrombosis following ankle surgery,
- Rehabilitation of the shoulder, elbow or hand,
- Treatment of osteoarthritis in the shoulder, hip, or any other major joint,
- Aiding in the clearance of infection from a septic joint,
- Treatment of hemarthrosis in hemophiliac patients,
- Treatment of contractures caused by burns, trauma, and Dupuytren's Contractures
- Treatment of any other conditions not listed above.

DESCRIPTION:

Continuous Passive Motion (CPM) Devices/Machines are intended to aid in the rehabilitation after orthopaedic surgery or trauma (fracture). The device moves the joint (flexion or extension) without patient assistance (passively) on a 24-hour basis. The device is held in place across the affected joint by Velcro straps. An electrical power unit is used to set the speed and range of joint motion (ROM) and can be varied depending on joint stability and other intraoperative assessments. A physical therapist or other health professional, familiar with these devices, determines the device settings. The ROM is increased by 3 to 5 degrees per day, as tolerated. An emergency stop switch immediately halts the device, if necessary.

There are a wide variety of CPM devices available to rehabilitate specific synovial joints (hip, knee, ankle, toes, shoulder, elbow, wrist, fingers, and temporomandibular joint) following surgery or trauma (including fracture, infection, etc.). The diffusion of synovial fluid is occurring without the integrity of the repaired tissue being jeopardized. The joint receives nutrition, venous flow increases, and deterioration of cartilage is being prevented. Recently, CPM has been used to treat conditions of the lumbar spine and sacroiliac joint of the pelvis.

CPM may be recommended for any condition or surgery that has a risk of contracture. The CPM device is purported to:

- decrease edema and pain,
- maintain range of motion (ROM) preventing joint stiffness, and
- facilitate achievement of extension and flexion.

Because immobilization is detrimental, CPM devices are an attractive clinical means to accelerate recovery by:

- achieving early motion,
- reducing the length of hospital stay, and
- decreasing the amount of medication required postoperatively.

The devices can be used while in bed or in a chair. Therefore,
hospitalization is not medically justified solely for their use.

CPM has few contraindications, which include poor patient compliance and conditions in which immobilization is a treatment requirement, such as infection or deep vein thrombosis.

CPM Devices/Machines are commonly known as CPM units, CPM systems, leg exercisers, arm exercisers, and hand exercisers.

RATIONAL:

The use of the CPM device alone OR conventional physical therapy alone appears to offer equivalent benefits for postoperative rehabilitation following TKA or reconstruction of the anterior cruciate ligament. However in the limited published literature of pilot studies, anecdotal, and small case series of patients, the use of CPM devices in a patient's postoperative treatment phase or for rehabilitation of a disabling condition of other joints besides the knee remains investigational. Although CPM following Autologous Chondrocyte Transplantation is being used, research and further clinical studies are currently underway.

DISCLAIMER

State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, takes precedence over Medical Policy and must be considered first in determining coverage. The member’s contract benefits in effect on the date that services are rendered must be used. Any benefits are subject to the payment of premiums for the date on which services are rendered. Medical technology is constantly evolving, and we reserve the right to review and update Medical Policy periodically. HMO Blue Texas physicians who are contracted/affiliated with a capitated IPA/medical group must contact the IPA/medical group for information regarding HMO claims/reimbursement information and other general policies and procedures.

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