


<b>MEDICAL POLICY</b>		<b>Bone Growth Stimulators (Medicare Only)</b>	
<b>Effective Date: 9/1/2020</b>   <div style="text-align: right;">9/1/2020</div>		Section: DME	Policy No: 409
		Medical Policy Committee Approved Date: 12/17; 12/18; 7/19; 8/2020	
Medical Officer	Date		

**See Policy CPT/HCPCS CODE section below for any prior authorization requirements**

**SCOPE:**

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

**APPLIES TO:**

Medicare Only

**MEDICARE POLICY CRITERIA**

The following Centers for Medicare & Medicaid Service (CMS) guidelines should be utilized for medical necessity coverage determinations. Click the link provided in the table below to access applicable medical necessity criteria. All listed guidelines apply.

Service	Medicare Guidelines
<i>Osteogenic Stimulators</i>	<ul style="list-style-type: none"> <li>National Coverage Determination (NCD) for Osteogenic Stimulators (<a href="#">150.2</a>)<sup>1</sup></li> <li>Local Coverage Determination (LCD): Osteogenesis Stimulators (<a href="#">L33796</a>)<sup>2</sup></li> <li>Local Coverage Article (LCA): Osteogenesis Stimulators- Policy Article (<a href="#">A52513</a>)<sup>3</sup></li> </ul>

**BILLING GUIDELINES**

Please refer to the LCA: Osteogenesis Stimulators- Policy Article ([A52513](#)) for any relevant billing guidelines.

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**HCPCS CODES**

<b>Medicare Only</b>	
Prior Authorization Required	
<b>Spinal Electrical Bone Growth Stimulator</b>	
20974	Electrical stimulation to aid bone healing; noninvasive (nonoperative)
20975	Electrical stimulation to aid bone healing; invasive (operative)
E0748	Osteogenesis stimulator, electrical, non-invasive, spinal applications
E0749	Osteogenesis stimulator, electrical, surgically implanted
<b>Non-Spinal Electrical Bone Growth Stimulator</b>	
20974	Electrical stimulation to aid bone healing; noninvasive (nonoperative)
E0747	Osteogenesis stimulator, electrical, non-invasive, other than spinal applications
<b>Ultrasound Bone Growth Stimulator</b>	
20979	Low intensity ultrasound stimulation to aid bone healing, noninvasive (nonoperative)
E0760	Osteogenesis stimulator, low intensity ultrasound, non-invasive
No Prior Authorization Required	
A4559	Coupling gel or paste, for use with ultrasound device, per oz

**INSTRUCTIONS FOR USE**

Company Medical Policies serve as guidance for the administration of plan benefits. Medical policies do not constitute medical advice nor a guarantee of coverage. Company Medical Policies are reviewed annually and are based upon published, peer-reviewed scientific evidence and evidence-based clinical practice guidelines that are available as of the last policy update. The Companies reserve the right to determine the application of Medical Policies and make revisions to Medical Policies at any time. Providers will be given at least 60-days’ notice of policy changes that are restrictive in nature.

The scope and availability of all plan benefits are determined in accordance with the applicable coverage agreement. Any conflict or variance between the terms of the coverage agreement and Company Medical Policy will be resolved in favor of the coverage agreement.

**REGULATORY STATUS**

Mental Health Parity Statement

Coverage decisions are made on the basis of individualized determinations of medical necessity and the experimental or investigational character of the treatment in the individual case.

**REFERENCES**

1. CMS. National Coverage Determination (NCD) for Osteogenic STIMULATORS (150.2). Effective date: 4/27/2005. <https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=65>. Accessed 6/21/2020.
2. CMS. Local coverage determination (LCD): Osteogenesis stimulators (L33796). Effective Date: 01/01/2020. <https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=33796>. Accessed 6/21/2020.
3. CMS. Local Coverage Article: Osteogenesis stimulators Policy Article (A52513). Effective date: 01/01/2020. <https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=52513>. Accessed 6/21/2020.