CONTINUOUS PASSIVE MOTION (CPM)

Non-Discrimination Statement and Multi-Language Interpreter Services information are located at the end of this document.

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.

This Medical Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.

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.

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CONTINUOUS PASSIVE MOTION (CPM) (cont.)

Description:
Physical therapy of joints following surgery focuses on passive motion to restore mobility and active exercises to restore strength. Passive motion is most commonly administered by a continuous passive motion (CPM) device. CPM is thought to improve recovery by stimulating the healing of articular tissues and circulation of synovial fluid, reduce local edema and prevent adhesions, joint stiffness, contractures or cartilage degeneration. The device moves the joint (e.g., flexion/extension) continuously without individual assistance for extended periods of time (i.e., up to 24 hours/day). The speed and range of motion (ROM) can be varied depending on joint stability. ROM is increased by 3–5 degrees per day as tolerated. The use of the CPM device may be initiated in the immediate postoperative period and then continued at home for a variable period of time.

Criteria:

- Continuous passive motion immediately following surgery is considered *medically necessary* for a maximum of 3 weeks for *ANY* of the following:
  1. Total knee arthroplasty (replacement) or revision
  2. Ligamentous reconstruction of the knee
  3. Any condition of the knee causing range of motion restriction that requires intervention with either open repair or manipulation

- Continuous passive motion beyond 3 weeks of use is considered *not medically necessary*.

- Continuous passive motion for all other indications not previously listed or if above criteria not met is considered *experimental or investigational* based upon insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives.

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

- Temporomandibular joint (TMJ) disorders.
CONTINUOUS PASSIVE MOTION (CPM) (cont.)

Resources:

Literature reviewed 04/03/18. We do not include marketing materials, poster boards and non-published literature in our review.

The BCBS Association Medical Policy Reference Manual (MPRM) policy is included in our guideline review. References cited in the MPRM policy are not duplicated on this guideline.


CONTINUOUS PASSIVE MOTION (CPM) (cont.)

Resources: (cont.)


CONTINUOUS PASSIVE MOTION (CPM) (cont.)

Non-Discrimination Statement:

Blue Cross Blue Shield of Arizona (BCBSAZ) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BCBSAZ provides appropriate free aids and services, such as qualified interpreters and written information in other formats, to people with disabilities to communicate effectively with us. BCBSAZ also provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, call (602) 864-4884 for Spanish and (877) 475-4799 for all other languages and other aids and services.

If you believe that BCBSAZ has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: BCBSAZ’s Civil Rights Coordinator, Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, (602) 864-2288, TTY/TDD (602) 864-4823, crc@azblue.com. You can file a grievance in person or by mail or email. If you need help filing a grievance BCBSAZ’s Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

Multi-Language Interpreter Services:

Spanish: Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue Cross Blue Shield of Arizona, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 602-864-4884.

Navajo: Dii kwe’ é atah niíngíí Blue Cross Blue Shield of Arizona haadá yit’éego bina’idíkídgo éí doodago Háída biíá aniyeedííi t’áaddo le’é yina’idíkídgo beehaz’áanii hólo díi t’áá hazaadékéhí háhá a’dooowolgo bee haz’á doo báą́ biílíghóó. Ata’ halne’íí gií koji’ bích’iyí hodíilíih 877-475-4799.

Chinese: 如果您，或是您正在協助的對象，有關於插入項目的名稱 Blue Cross Blue Shield of Arizona 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 在此插入數字 877-475-4799。

Vietnamese: Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue Cross Blue Shield of Arizona quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thợ dịch viên, xin gọi 877-475-4799.

Arabic: إن كان لديك أو أدى شخص تسامده أسئلة بخصوص Blue Cross Blue Shield of Arizona، فأنك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم الصلب 877-475-4799.
CONTINUOUS PASSIVE MOTION (CPM) (cont.)

Multi-Language Interpreter Services: (cont.)

Tagalog: Kung ikaw, o ang iyong tinutuwanan, ay may mga katanungan tungkol sa Blue Cross Blue Shield of Arizona, may karapatang ka na makakahu ng tulong at impormasyon sa iyong wika ng walang gasitos. Upang makeusap ang isang tagasalin, tumawag sa 877-475-4799.

Korean: 만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Blue Cross Blue Shield of Arizona 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통해하시기 위해서는 877-475-4799 올 전화하십시오.

French: Si vous, ou quelqu’un que vous êtes en train d’aider, a des questions à propos de Blue Cross Blue Shield of Arizona, vous avez le droit d’obtenir de l’aide et l’information dans votre langue à aucun coût. Pour parler à un interprète, appelez 877-475-4799.

German: Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue Cross Blue Shield of Arizona haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 877-475-4799 an.

Russian: Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue Cross Blue Shield of Arizona, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 877-475-4799.

Japanese: ご本人様、またはお客様の身の回りの方でも、Blue Cross Blue Shield of Arizona についてご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳とお話される場合、877-475-4799 までお電話ください。

Farsi:

آگر شما یا کسی که شما به آن کمک می‌کنید، سوال نمودید اطلاعاتی که در آن نماید 877-475-4799.

Assyrian:

خاانوک ئامن، ئەبەش ئەوەیە ئەکەوەیە کە ئەمەنە شەوەیە، Blue Cross Blue Shield of Arizona ئەمەنە بەرەنە، 877-475-4799.

Serbo-Croatian: Ukoliko Vi ili neko kome Vi pomažete ima pitanje o Blue Cross Blue Shield of Arizona, imate pravo da besplatno dobijete pomoć i informacije na Vašem jeziku. Da biste razgovarali sa prevodiocem, nazovite 877-475-4799.

Thai: หากคุณหรือผู้ที่คุณช่วยเหลือมีคำถามเกี่ยวกับ Blue Cross Blue Shield of Arizona คณะทำงานจะให้ความช่วยเหลือและข้อมูลภาษาของคุณได้โดยไม่เก็บค่าใช้จ่าย โทร 877-475-4799