

Extracorporeal Shock Wave Therapy for Musculoskeletal Conditions

Last Revision/Review Date: September 19, 2018

P&P # C.5.11

A. Documentation Required

1. To facilitate the authorization process for Extracorporeal Shock Wave Therapy (ESWT) for the treatment of refractory rotator cuff calcific tendonitis, the referral requests must include the following:
 - a. Detailed history and physical exam documenting the diagnosis of calcific tendinitis of the shoulder;
 - b. Results of radiologic shoulder imaging documenting the presence and size of calcium deposits (e.g., plain radiography, ultrasound, MRI);
 - c. Detailed history of conservative therapies tried for rotator cuff tendonitis treatment and response to therapies.

B. Medical Necessity Criteria

1. High energy Extracorporeal Shock Wave Therapy (ESWT) is medically necessary for the treatment of **refractory rotator cuff calcific tendonitis** in adult patients when **ALL** the following criteria are met:
 - a. Diagnosis exists for at least 6 months; **AND**
 - b. Documented calcium deposit measuring 1 cm or greater in the rotator cuff tendon; **AND**
 - c. Persistent daily shoulder pain or direct tendonitis function limitations that impact ability to perform activities of daily living; **AND**
 - d. Functional limitation persists despite conventional treatments including:
 - i. Analgesic medications (e.g., non-steroidal anti-inflammatory medications) if not contraindicated; **AND**
 - ii. Trial of physical therapy for at least 3 months.

Note: One ESWT treatment is approved per shoulder per lifetime.

- C. **Extracorporeal Shock Wave Therapy (ESWT)** is considered experimental, investigational and not medically necessary for treatment of **ANY** condition not listed above. These conditions include the following: (not all-inclusive)

1. Achilles tendonitis (tendinopathy);
2. Lateral epicondylitis (tennis elbow);
3. Medial epicondylitis (golfers elbow);
4. Delayed and non-union of fractures;
5. Osteonecrosis of the femoral head;
6. Patellar tendinopathy;
7. Wound healing including burn wounds, diabetic foot and venous leg ulcers;
8. Other musculoskeletal indications (e.g., Calcaneal spur, hammer toe, tendosynovitis of the foot or ankle and tibialis tendinitis);
9. Plantar fasciitis;

10. Pregnant women;
11. Patients with bleeding disorders or on anticoagulation therapy

RATIONALE

Based on the definitions and an evaluation of medical literature, the safety, efficacy, and long-term outcomes of ESWT for musculoskeletal conditions other than rotator cuff calcific tendonitis, have not been established in the published medical literature. This procedure has not been proven to achieve equivalent or improved patient outcomes compared to available and established alternatives.

CPT Codes

0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified; high energy
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