

MedStar Health, Inc.

POLICY AND PROCEDURE MANUAL

Policy Number: MP.036.MH
Last Review Date: 05/11/2018
Effective Date: 07/01/2018

MP.036.MH – Iontophoresis for Musculoskeletal Conditions

This policy applies to the following lines of business:

- ✓ MedStar Employee (Select)
- ✓ MedStar CareFirst PPO

MedStar Health considers **iontophoresis for Musculoskeletal Conditions** medically necessary for the following indications:

Iontophoresis is covered for the treatment of pain and edema caused by an inflammatory process for any of the following musculoskeletal conditions such as:

- Tendonitis
- Bursitis
- Plantar Fasciitis
- Lateral Epicondylitis
- Medial Epicondylitis
- Rheumatoid Arthritis
- Enthesopathy

Limitations

1. Iontophoresis is not covered for the following:

- As a local anesthesia
- For hypnosis
- To perform axillary liposuction
- For biofeedback
- As a form of psychotherapy
- To conduct percutaneous thoracic phenol sympathectomy
- For intractable, disabling primary hyperhidrosis
- For acute low back pain
- Carpal tunnel syndrome
- Temporomandibular Joint Syndrome (TMJ)
- For use in preparation for invasive procedures (e.g. arterial line placement)
- Venipuncture for renal dialysis
- Injections
- Hair transplants
- Cauterization of spider veins
- Removal of skin growths

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- Oral surgeries
 - Surgeries of the eyelid or eardrum
 - Localized joint pain testing for cystic fibrosis
 - Pain resulting from herpes zoster (shingles)
2. Iontophoresis should not be performed on members with the following:
- Pacemakers or other electrically sensitive implanted devices,
 - Known sensitivity to electric currents, or allergies to the drug being administered or to electrode adhesives.
 - Iontophoresis electrodes should not be applied to damaged, blemished, or recently scarred tissue.

Background

The Centers for Medicare and Medicaid Services (CMS) define Iontophoresis as an intervention that uses the properties of electricity to introduce ions of soluble salts and medications (such as NSAIDS and/or analgesics) into tissue by means of an electric current. This modality is non-invasive and utilizes polarity differences to push the medication across the cell membranes. It is used to reduce pain and edema caused by an inflammatory process such as tendonitis, bursitis, plantar fasciitis and lateral epicondylitis.

Codes:

CPT Codes / HCPCS Codes / ICD-10 Codes	
Code	Description
CPT codes:	
97033	Application of a modality to one or more areas; iontophoresis, each 15 minutes.
ICD-10 codes covered if selection criteria are met:	
M05.60	Rheumatoid arthritis of unspecified site with involvement of other organs and systems
M06.9	Rheumatoid arthritis
M65.4	Radial styloid tenosynovitis
M65.80-M65.89	Other synovitis and tenosynovitis
M65.9	Synovitis and tenosynovitis, unspecified
M70.10-M70.72	Bursitis
M71.50	Other bursitis, not elsewhere classified, unspecified site

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M72.2	Plantar fascial fibromatosis
M75.2-M75.32	Tendinitis, shoulder
M75.50-M75.52	Bursitis of shoulder
M76.0-M76.02	Gluteal tendinitis
M76.1-M76.12	Psoas tendinitis
M76.4-M76.42	Tibial collateral bursitis
M76.5-M76.52	Patellar tendinitis
M76.6-M76.62	Achilles tendinitis
M76.7-M76.2	Peroneal tendinitis
M76.8	Other specified enthesopathies of lower limb, excluding foot
M76.82-M76.829	Posterior tibial tendinitis
M76.89	Other specified enthesopathies of lower limb, excluding foot
M76.9	Unspecified enthesopathy, lower limb, excluding foot
M77.0-M77.02	Medial epicondylitis
M77.1-M77.12	Lateral epicondylitis
M77.5-M77.8	Other enthesopathies, unspecified
M77.9	Enthesopathy, unspecified
Z51.89	Encounter for other specified aftercare

References

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4. Hayes Health Technology Brief. Iontophoresis for Epicondylitis. Annual Review July 9, 2012.

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