

## Clinical Review Criteria Related to High Frequency Chest Wall Oscillation Devices (HFCWO)

### I. Criteria for Approval

---

HFCWO devices (E0483) are covered for patients who meet the following:

A. Criteria 1, 2, or 3; **AND** Criterion 4

1. The patient has the diagnosis of cystic fibrosis (ICD-10, E84.0 Cystic Fibrosis with pulmonary manifestations; E84.9 Cystic Fibrosis, unspecified).
2. There is a diagnosis of bronchiectasis, (ICD-10, J47.0 Bronchiectasis with acute lower respiratory infection; J47.1 Bronchiectasis with (acute) exacerbation; J47.9 Bronchiectasis, uncomplicated; Q33.4 Congenital Bronchiectasis), which has been confirmed by a high resolution, spiral, or standard CT scan and which is characterized by:
  - a. Daily productive cough for at least 6 continuous months; or
  - b. Frequent (i.e., more than 2/year) exacerbations requiring antibiotic therapy.

Chronic bronchitis and chronic obstructive pulmonary disease (COPD) in the absence of a confirmed diagnosis of bronchiectasis do not meet this criterion.

3. The patient has one of the following neuromuscular disease diagnoses:

Post-polio (G14)

Acid maltase deficiency (E63.0)

Anterior horn cell diseases (M23.01-M23.34)

Multiple sclerosis (G35)

Quadriplegia (G82)

Hereditary muscular dystrophy (G71.0, G71.11)

Myotonic disorders (G71.1, G71.19)

Other myopathies (G72, G72.49, G72.8, G72.89)

Paralysis of the diaphragm (J98.6)

4. There must be well-documented failure of standard treatments to adequately mobilize retained secretions (chest physiotherapy and, if appropriate, use of the FLUTTER device), AND Valid reasons why standard chest physiotherapy cannot be performed, i.e., the inability of the caregiver to perform it.

If all of the criteria are not met, the claim will be denied as not reasonable and necessary.

**Note:** Approve for lung transplant patients within the first six months postoperatively who are unable to tolerate standard respiratory therapy.

B. Minuteman Health Insurance (MHI) considers the use of high-frequency chest compression systems experimental and investigational for all other conditions, including:

1. myasthenia gravis
2. childhood atelectasis
3. cerebral palsy
4. kyphosis
5. leukodystrophy
6. scoliosis

## **II. CPT/ ICD-10/ HCPCS Codes**

---

Applicable Coding: Codes may not be all inclusive as the American Medical Association (AMA) code updates may occur more frequently or at different intervals than policy updates. These codes are not intended to be used for coverage determinations.

### **CPT CODES**

<b>A7025</b>	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM VEST, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH
<b>A7026</b>	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM HOSE, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH
<b>E0483</b>	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH

### III. References

---

NCQA Standard UM2, Clinical Criteria for Utilization Management Decisions, Element A

Centers for Medicare and Medicaid Services. National Coverage Determination: High Frequency Chest Wall Oscillation Devices (L33785)  
( Last Accessed 2/2/17)

Thomas A. Scherer MD, FCCP, Jurg Barandun MD, Elena Martinez, R- CPT, Adam Wanner MD, FCCP, and Eben M. Rubin MD, FCCP, “Effect of High Frequency Oral Airway and Chest Wall Oscillation and Conventional Chest Physical Therapy on Expectoration in Patients with Stable Cystic Fibrosis,” CHEST, 1998  
(Last Accessed 2/2/17)

Patrick A Flume MD, Karen A Robinson MSc, Brian P O’Sullivan MD, Jonathan D Finder MD, Robert L Vender MD, Donna-Beth Willey-Courand MD, Terry B White PhD, Bruce C Marshall MD, and the Clinical Practice Guidelines for Pulmonary Therapies Committee, “Cystic Fibrosis Pulmonary Guidelines: Airway Clearance Therapies,” *Respiratory Care*, April 2009  
(Last Accessed 2/2/17).

### IV. Summary of Changes

---

04/13/2017

- Added a section about experimental and investigational.

### V. Review Dates

---

HNE Review Dates: 6/11/13, 5/13/14, 5/12/15, 5/10/16, 04/04/2017

MHI Review Dates: 01/01/2014, 10/23/2014, 07/02/2015, 04/13/2017