

The Department of Vermont Health Access Medical Policy

Subject: Continuous Passive Motion Devices: Jaw

Last Review: March 29, 2016

Revision: February 20, 2015

Revision: April 3, 2014

Revision 4: May 28, 2013

Revision 3: June 4, 2012

Revision 2: January 27, 2011

Revision 1: September 1, 2009

Original Effective: 2004

Description of Service or Procedure

A mechanical device that increases range of motion by providing a passive stretch to tissues surrounding the temporomandibular joint.

Disclaimer

Coverage is limited to that outlined in Medicaid Rule that pertains to the beneficiary's aid category. Prior Authorization (PA) is only valid if the beneficiary is eligible for the applicable item or service on the date of service.

Medicaid Rule

[7102.2](#) Prior Authorization Determination

[7103](#) Medical Necessity

Medicaid Rules can be found at <http://humanservices.vermont.gov/on-line-rules>

Coverage Position

A continuous passive motion device for the jaw may be covered for beneficiaries:

- When this device is prescribed by a licensed medical provider enrolled in the Vermont Medicaid program, operating within their scope of practice in accordance with the Vermont State Practice Act, who is knowledgeable in the area of orthopedics and/or rheumatology, is knowledgeable regarding the function of the temporomandibular joint and in the use of jaw motion continuous passive motion devices, and who provides medical care to the beneficiary AND



- When the clinical guidelines below are met.

Coverage Guidelines

A continuous passive motion (CPM) device for the jaw may be covered for beneficiaries who:

- Have had an oral/head/neck cancer tumor resection and radiation, AND the physician determines that the beneficiary is at high risk of impaired range of motion recovery in the immediate post-operative period in conjunction with physical therapy treatment, OR
- Have a medical condition resulting in jaw hypomobility AND when a trial of a less expensive jaw motion rehabilitation techniques (such as use of flat blade tongue depressors) are demonstrated to have been ineffective through a course of comprehensive treatment with a physical therapist.

Clinical guidelines for repeat service or procedure

Repeat surgical procedure.

Type of service or procedure covered

Jaw CPM devices are for purchase only, due to hygiene issues.

Type of service or procedure not covered (this list may not be all inclusive)

Jaw CPM devices are not covered for cases, *other than tumor resection as noted above*, without trial of less expensive jaw motion rehabilitation techniques (such as use of flat blade tongue depressors) AND only when the less expensive techniques are demonstrated to have been ineffective through a course of comprehensive treatment with a physical therapist.

References

Alantar, A., Cabane, J., Hachulla, E., Princ, G., Ginisty, D., Hassin, M. et al. (2011). Recommendations for the care of oral involvement in patients with systemic sclerosis. Design, manufacture and clinical evaluation of a new TMJ exerciser Retrieved December 31, 2013, from:
<http://onlinelibrary.wiley.com/doi/10.1002/acr.20480/pdf>.

Baltrusaityte A, Surna A, Pileicikiene G, Kubilius R, Gleznys A, Zilinskas J. the Relationship Between Unilateral Mandibular Angle Fracture and Temperomandibular Joint Function. *Stomatologija; Baltic Dental and Maxillofacial Journal*, 16:87-93, 2014. Retrieved December 28, 2015 from:
<http://www.sbdmj.com/143/143-02.pdf>.

Cnossen, I.C., Van Uden-Kraan, C.F., Rinkel, R., Aalders, I.J., de Goede, C.J.T., de Bree, R., et al. (2014). Multimodal guided self-help exercise program to prevent speech, swallowing, and shoulder problems among head and neck cancer patients: A feasibility study. *Journal of Medical Internet Research*, 16(3). <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3961811>.

Hayes, Inc. Hayes Search and Summary. *Physical Therapy for Temperomandibular Joint Disorders*. Landsdale, PA. Hayes Inc; December 30, 2014.

Kamstra, J., Roodenburg, J., Beurskens, C., Reintsema, H., & Dijkstra, P. (2012). TheraBite exercises to treat trismus secondary to head and neck cancer. *Supportive Care in Cancer*. Retrieved December 31, 2013, from: <http://link.springer.com/article/10.1007/s00520-012-1610-9#page-1>.

Loorents, V., Rosell, J., Karlsson, C., Lidback, M., Hultman, K., & Borjeson, S. (2014) Prophylactic training for the prevention of radiotherapy-induced trismus- A randomized study. *Acta Oncologica*, 4(53). Retrieved December 28, 2015 from: <http://www.diva-portal.org/smash/get/diva2:714047/FULLTEXT01.pdf>.

Maloney, G., Mehta, N., Forgione, A., Zawawi, K.H, Al-Badawi, E., & Driscoll, S. (2010). Effect of a passive jaw motion device on pain and range of motion in TMD patients not responding to flat plane intraoral appliances. *The Journal of Craniomandibular Practice*, 20(1). Retrieved December 31, 2013, from: http://msaahmed.kau.edu.sa/Files/165/Researches/532_Maloney%20et%20al%20Cranio%202002.pdf.

McEwan, S.E., Davis, A.M., Jones, J.M., Martino, R., Poon, I., Rodriguez, A.M., et al. (2015). Development and preliminary evaluation of a rehabilitation consult for survivors of head and neck cancer: An intervention mapping protocol. *Implementation Science*, 10(6). Retrieved December 28, 2015 from: http://download.springer.com/static/pdf/311/art%253A10.1186%252Fs13012-014-0191-z.pdf?originUrl=http%3A%2F%2Fimplementationscience.biomedcentral.com%2Farticle%2F10.1186%2Fs13012-014-0191-z&token2=exp=1451325370~acl=%2Fstatic%2Fpdf%2F311%2Fart%25253A10.1186%25252Fs13012-014-0191-z.pdf*~hmac=be3c3668e3fcaee8d1e7f9acf1383d015f6249bbb93da04f956dcefa35d2c038.

Scrivani, S., Keith, D., & Kaban, L. (2008). Temporomandibular disorders. *New England Journal of Medicine*, 359(25). Retrieved December 31, 2013, from: [http://www.unc.edu/courses/2009ss2/obio/720/001/2009_Readings/072010_Neely/NEJM%202008\(359\)2693-705.pdf](http://www.unc.edu/courses/2009ss2/obio/720/001/2009_Readings/072010_Neely/NEJM%202008(359)2693-705.pdf).

Taibi, R., Lleshi, A., Barzan, L., Fiorica, F., Leghissa, M., Vaccher, E., et al. (2014). Head and Neck Cancer Survivors Patients and Late Effects Related to Oncologic Treatment: Update of Literature. *European Review for Medical and Pharmacological Sciences*, 18: 1473-1481. <http://www.europeanreview.org/wp/wp-content/uploads/1473-1481.pdf>.

This document has been classified as public information.