

Cineradiography/Videofluoroscopy of the Spine

Policy Number: **M20130117010**
Effective Date: **4/1/2013**
Sponsoring Department: **Health Care Services**
Impacted Department(s): **Health Care Services**

Type of Policy: Internal External

Data Classification: Confidential Restricted Public

Applies to (Line of Business):

- Corporate (All)
- State Products, if yes which plan(s): MediSource; MediSource Connect; Child Health Plus Essential Plan
- Medicare, if yes, which plan(s): MAPD; PDP; ISNP; CSNP
- Commercial, if yes, which type: Large Group; Small Group; Individual
- Self-Funded Services (*Refer to specific Summary Plan Descriptions (SPDs) to determine any pre-authorization or pre-certification requirements and coverage limitations. In the event of any conflict between this policy and the SPD of a Self-Funded Plan, the SPD shall supersede the policy.*)

Excluded Products within the Selected Lines of Business (LOB)

Applicable to Vendors? Yes No

Purpose and Applicability:

To set forth the medical necessity criteria for Cineradiography/Videofluoroscopy of the spine.

Policy:

Commercial, Self-Funded and Medicare Advantage:

Due to the current lack of peer reviewed and adequate literature to support the appropriateness and efficacy, **Cineradiography/ Videofluoroscopy** of the spine is considered experimental/investigational and not covered.

MediSource, MediSource Connect, Child Health Plus and Essential Plan:

MediSource, MediSource Connect, Child Health Plus and Essential Plan cover cineradiography/videofluoroscopy based on medical necessity as determined by Medical Director review.

Background:

This technology has been used for decades in the diagnosis of various conditions, mainly swallowing disorders, and has been proposed for the evaluation of spinal disorders including low back pain, and segmental lumbar spinal instability to determine the presence or absence of abnormalities.

The current literature evaluating the clinical utility of dynamic spinal visualization techniques, including cineradiography (videofluoroscopy), for the evaluation and assessment of the spine is limited to a few studies involving very small numbers of participants. Additional evidence from large controlled trials is needed to demonstrate that the results have significant impact on clinical care and are superior to currently available alternatives. At this time, the data is insufficient to support the use of cineradiography, and videofluoroscopy of the spine for any indication.

An evaluation of the peer-reviewed scientific literature, including but not limited to subscription materials, has provided Independent Health the basis for its medical necessity coverage outlined above.

Pre-Authorization Required? Yes No

Due to the experimental / investigational status of this test, pre-authorization is required.

Definitions

Cineradiography, Videofluoroscopy, and Dynamic Spinal Visualization are different names for the same procedure that utilizes fluoroscopy to create real-time video images of internal structures of the body. Unlike standard x-rays that take a single picture at one point in time, fluoroscopy works like a video camera, providing motion pictures of the inside of the body. The results of these techniques can be displayed on a video monitor as the procedure is being conducted as well as recorded to allow computer analysis or evaluation at a later time. Like digital motion x-ray, the results can be evaluated by a physician alone or using the assistance of computer analysis software.

References

Related Policies, Processes and Other Documents

N/A

Non-Regulatory references

Hino H, Abumi K, Kanayama M, Kaneda K. Dynamic motion analysis of normal and unstable cervical spines using cineradiography. An in vivo study. Spine (Phila Pa 1976). 1999 Jan 15;24(2):163-8.

Takayanagi K, Takahashi K, Yamagata M, Moriya H, Kitahara H, Tamaki T – Using cineradiography for continuous dynamic-motion analysis of the lumbar spine – Spine 2001 Sept 1; 26(17):1858-65.

Zheng Y, Nixon MS, Allen R – Automated segmentation of lumbar vertebrae in digital videofluoroscopic images. IEEE Trans Med Imaging 2004;23(1):45-52.

Regulatory References

New York State Department of Health [web site]. New York State Medicaid Program Physician Procedure Codes Section 4 - Radiology. Version April 2023 Available at: <https://www.emedny.org/ProviderManuals/Physician/PDFS/Physician%20Procedure%20Codes%20Sect4.pdf> Accessed August 23, 2023.

This policy contains medical necessity criteria that apply for this service. Please note that payment for covered services is subject to eligibility criteria, contract exclusions and the limitations noted in the member’s contract at the time the services are rendered.

Version Control

Signature / Approval on File? Yes No

Revision Date	Owner	Notes
1/1/2024	Health Care Services	Reviewed
11/1/2023	Health Care Services	Reviewed
11/1/2022	Health Care Services	Reviewed
12/1/2021	Health Care Services	Reviewed
1/1/2021	Health Care Services	Reviewed
2/1/2020	Medical Management	Reviewed
3/1/2019	Medical Management	Reviewed
3/1/2018	Medical Management	Reviewed
4/1/2017	Medical Management	Revised
5/1/2016	Medical Management	Revised
5/1/2015	Medical Management	Revised
4/1/2014	Medical Management	Revised