

**EFFECTIVE DATE:** 03/16/2010  
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### OVERVIEW

Constraint-induced movement therapy (CIMT), also known as forced use movement therapy, is a form of intensive physical therapy aimed at reorganizing and reprogramming the brain after a stroke, traumatic brain injury, spinal cord damage, or neuromotor disorder.

### PRIOR AUTHORIZATION

Not Applicable

### POLICY STATEMENT

#### Blue CHiP for Medicare and Commercial

Constraint-induced movement therapy is considered not medically necessary for any indication as there is insufficient peer-reviewed scientific literature that demonstrates that the service is effective.

### MEDICAL CRITERIA

Not Applicable

### BACKGROUND

Constraint-induced movement therapy (CIMT), also known as forced use movement therapy, is a form of intensive physical therapy aimed at reorganizing and reprogramming the brain after a stroke, traumatic brain injury, spinal cord damage, or neuromotor disorder.

CIMT developed out of behavioral research on the phenomenon of "learned nonuse" of an upper extremity, commonly observed following sensory and/or motor CNS injury, in which failure to regain use persists even after a period of partial recovery. CIMT includes three key elements: (1) constraining the use of the less-impaired upper extremity (UE); (2) intensive, repetitive daily therapist-directed practice of motor movements with the impaired UE for an extended period (2-3 weeks); and (3) shaping of more complex action patterns through a process of rewarding successive approximations to the target action.

Numerous case studies, as well as a small number of randomized controlled or controlled clinical trials have reported substantial gains in functional use of the hemiplegic UE following CIMT with children. Protocols vary widely in terms of type of constraint used, intensity and duration of training, and outcome measures.

High quality research is required to sufficiently support the use of CIMT on patients following a stroke, traumatic brain injury, or spinal cord injury. Because the methods and outcomes used are inconsistent among clinical trials, it has not been proven which techniques, if any, are clinically useful. Further studies are needed to find out the optimal treatment protocols for constraint-induced movement therapy.

### COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement for applicable Services Not Medically Necessary coverage.

### CODING

## Blue CHiP for Medicare and Commercial

There are no specific codes for this service. To report, use the Unlisted physical medicine code under Other Procedures: 97799

**Please Note:** It is incorrect to file this service with other Physical Medicine and Rehabilitation codes

### RELATED POLICIES

None

### PUBLISHED

Provider Update Oct 2014

Provider Update Jun 2013

Provider Update Apr 2012

Provider Update May 2011

Provider Update May 2010

### REFERENCES

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