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MEDICAL POLICY



Medical Policy Title	Dynamic Adjustable Braces
Policy Number	1.01.35
Current Effective Date	February 20, 2025
Next Review Date	February 2026

Our medical policies are based on the assessment of evidence based, peer-reviewed literature, and professional guidelines. Eligibility for reimbursement is based upon the benefits set forth in the member's subscriber contract. (Link to <u>Product Disclaimer</u>)

POLICY STATEMENT(S)

- I. Dynamic adjustable braces are considered **medically appropriate** for **ANY** of the following indications:
 - A. When the patient is not responding favorably to conventional methods of restoring joint motion (e.g., physical therapy, standard splinting, NSAIDs) following a sub-acute injury or postoperative period (at least three weeks after injury or surgery);
 - B. In the acute post-operative period for patients who have a prior documented history of motion stiffness/loss in a joint and are having additional surgical procedures done to improve motion in that joint.
- II. Dynamic adjustable braces are considered **not medically necessary** after four (4) months of use for the following indications:
 - A. In the management of chronic contractures and joint stiffness due to joint trauma, fractures, burns, head and spinal cord injuries, rheumatoid arthritis, plantar fasciitis, multiple sclerosis, muscular dystrophy, stroke, or cerebral palsy; or
 - B. When conventional methods of treating stiff or contracted joints have not been attempted.

RELATED POLICIES

Corporate Medical Policy

- 1.01.00 Durable Medical Equipment Standard and Non-Standard
- 1.01.02 Continuous Passive Motion Device in the Home Setting

POLICY GUIDELINE(S)

Coverage of durable medical equipment is contract dependent unless mandated by federal or state law or regulation.

DESCRIPTION

Dynamic adjustable extension units are spring-loaded, adjustable-tension, controlled devices that use a three-point pressure system, coupled with a continuous, low-intensity stretching effect, for extension and flexion of the elbow, wrist, finger, ankle, and toes. Dynamic adjustable braces can be used for the treatment of joint stiffness from immobilization or limited range of motion arising from

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fractures, dislocations, tendon and ligament repairs, joint arthroplasties, total knee replacements, burns, adhesive capsulitis of the shoulder, rheumatoid arthritis, hemophilia, tendon releases, head trauma, spinal cord injuries, cerebral palsy, multiple sclerosis, and other traumatic and non-traumatic disorders. The objective of the dynamic adjustable brace is to restore functioning range of motion to a joint without compromising the stability and quality of the connective tissue and joint. Dynamic splinting device examples include Advance Dynamic ROM, Dynasplint, EMPI Advance Dynamic ROM, LMB Pro-glide, Pro-glide Dynamic ROM, SaeboFlex, SaeboReach, Stat-A-Dyne, and Ultraflex.

SUPPORTIVE LITERATURE

Not Applicable

PROFESSIONAL GUIDELINE(S)

Not Applicable

REGULATORY STATUS

United Stated Food and Drug Administration (FDA) categorize mechanical stretching devices under product code ION and are Class I, 510(k) exempt devices.

CODE(S)

- Codes may not be covered under all circumstances.
- Code list may not be all inclusive (AMA and CMS code updates may occur more frequently than policy updates).
- (E/I)=Experimental/Investigational
- (NMN)=Not medically necessary/appropriate

CPT Codes

Code	Description
	None

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HCPCS Codes

Code	Description
E1800	Dynamic adjustable elbow extension and flexion device, includes soft interface material
E1802	Dynamic adjustable forearm pronation/supination device, includes soft interface material
E1803	Dynamic adjustable elbow extension only device, includes soft interface material (Effective 01/01/25)

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Code	Description
E1804	Dynamic adjustable elbow flexion only device, includes soft interface material (Effective 01/01/25)
E1805	Dynamic adjustable wrist extension and flexion device, includes soft interface material
E1807	Dynamic adjustable wrist extension only device, includes soft interface material (Effective 01/01/25)
E1808	Dynamic adjustable wrist flexion only device, includes soft interface material (Effective 01/01/25)
E1810	Dynamic adjustable knee extension and flexion device, includes soft interface material
E1812	Dynamic knee, extension/flexion device with active resistance control
E1813	Dynamic adjustable knee extension only device, includes soft interface material (Effective 01/01/25)
E1814	Dynamic adjustable knee flexion only device, includes soft interface material (Effective 01/01/25)
E1815	Dynamic adjustable ankle extension and flexion device, includes soft interface material
E1820	Replacement soft interface material, dynamic adjustable extension/flexion device
E1822	Dynamic adjustable ankle extension only device, includes soft interface material (Effective 01/01/25)
E1823	Dynamic adjustable ankle flexion only device, includes soft interface material (Effective 01/01/25)
E1825	Dynamic adjustable finger extension and flexion device, includes soft interface material
E1826	Dynamic adjustable finger extension only device, includes soft interface material (Effective 01/01/25)
E1827	Dynamic adjustable finger flexion only device, includes soft interface material (Effective 01/01/25)
E1828	Dynamic adjustable toe extension only device, includes soft interface material (Effective 01/01/25)
E1829	Dynamic adjustable toe flexion only device, includes soft interface material (Effective 01/01/25)

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Code	Description
E1830	Dynamic adjustable toe extension and flexion device, includes soft interface material
E1840	Dynamic adjustable shoulder flexion/abduction/rotation device, includes soft interface material

ICD10 Codes

Code	Description
	Numerous

REFERENCES

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Harvey L, et al. Does stretching induce lasting increases in joint ROM? A systematic review. Physiother Res Int. 2002;7(1):1-13.

Kamstra JI, et al. Dynasplint Trismus System exercises for trismus secondary to head and neck cancer: a prospective explorative study. Support Care Cancer. 2016 Aug;24(8):3315-23.

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KEY WORDS

Dorsiflexion, Dynasplint, EMPI Advance, Joint Extension Device, LMB Proglide, Ultraflex

CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

Based on our review, Dynamic Adjustable Braces is not addressed in National or Regional Medicare coverage determinations or policies.

PRODUCT DISCLAIMER

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- Services are contract dependent; if a product does not cover a service, medical policy criteria do not apply.
- If a commercial product (including an Essential Plan or Child Health Plus product) covers a specific service, medical policy criteria apply to the benefit.
- If a Medicaid product covers a specific service, and there are no New York State Medicaid guidelines (eMedNY) criteria, medical policy criteria apply to the benefit.
- If a Medicare product (including Medicare HMO-Dual Special Needs Program (DSNP) product) covers a specific service, and there is no national or local Medicare coverage decision for the service, medical policy criteria apply to the benefit.
- If a Medicare HMO-Dual Special Needs Program (DSNP) product DOES NOT cover a specific service, please refer to the Medicaid Product coverage line.

POLICY HISTORY/REVISION

Committee Approval Dates

04/24/03, 04/22/04, 04/28/05, 02/23/06, 02/22/07, 02/28/08, 02/26/09, 02/25/10, 02/24/11, 02/27/12, 02/28/13, 02/27/14, 02/26/15, 02/25/16, 02/23/17, 02/22/18, 02/28/19, 02/27/20, 02/25/21, 02/17/22, 02/16/23, 02/22/24, 02/20/25

Date	Summary of Changes
02/20/25	 Annual review, code edit, removed E1801, E1806, E1811, E1816, E1818, E1821, E1831, E1841, policy intent unchanged.
01/01/25	Summary of changes tracking implemented.
04/25/02	Original effective date