



Clinical Medical Policy Cognitive Rehabilitation (CR)

Benefit Coverage

Outpatient CR is considered to be the most appropriate setting for members who have sustained a traumatic brain injury or an acute brain insult.

CR may be performed individually, in groups, or both, depending upon the needs of the individual and may include intensive therapy by speech-language pathologists, physical therapists, occupational therapists, and neuropsychologists.

Vocational rehabilitation is not a covered benefit for RIte Care and Rhody Health Partners members. If this is the primary focus of a CR program then coverage will not be provided.

Description

CR comprises a variety of therapeutic activities that are designed to retrain an individual's ability to think and use judgment to make decisions. The techniques used for CR attempt to help a patient to reduce, manage, or cope with the cognitive deficits caused by brain injury and may include learning how to do things differently when functions cannot be restored to the pre-injury level.

Criteria for Authorization of CR

All of the following criteria must be met to qualify for CR:

1. Dx: TBI, acute brain insult, or acute CVA (*see Appendix A*).
2. Individual is able and willing to participate in treatment plan.
3. Documented potential to show measurable functional gains within a predetermined timeframe.
4. History of compliance with treatment plan.
5. The individual's mental and physical condition prior to the injury indicates there is significant potential for improvement and the individual must have no lasting or major treatment impediment that prevents progress, such as severe dementia.
6. In the presence of a recent or current history of unresolved behavioral health issues or substance abuse, an active treatment program with demonstrated compliance is an integral part of the proposed cognitive rehab program.
7. Viable discharge placement alternatives are identified during the assessment for admission to the program.

Inpatient CR Programs

All of the above criteria must be met as well as the following:

1. Constant supervision required 24/7 due to poor judgment and safety concerns.
2. An alternative level of care cannot provide the intensity of services required for the treatment of the cognitive deficits.



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Continued Treatment for CR

All of the following criteria must be met to extend authorization of a CR program;

1. Established interim goals are met.
2. Member demonstrates quantifiable rates of improvement on functional abilities.
3. Evidence of compliance – ability, willingness, and active participation in treatment program.
4. An alternative level of care cannot provide the intensity of services required for the treatment of the cognitive deficits.

Exclusions:

There is insufficient evidence in the published medical literature to support the use of CR for any condition other than traumatic brain injury, acute brain insult, or CVA. *See Appendix B.*

Appendix A (Note: This list of codes may not be all-inclusive)

ICD-9-CM Covered Diagnosis Codes	Description
310.2	Post-concussion syndrome
324.0	Intracranial abscess
348.1	Anoxic brain damage
349.82	Toxic encephalopathy
430	Subarachnoid hemorrhage
431	Intracerebral hemorrhage
434.01	Cerebral thrombosis with cerebral infarction
434.11	Cerebral embolism with cerebral infarction
434.91	Unspecified cerebral artery occlusion with cerebral infarction
438.0	Late effects of cerebrovascular disease; cognitive deficits

800.10-800.49	Fracture of vault of skull, closed
800.60-800.99	Fracture of vault of skull, open
801.10-801.49	Fracture of base of skull, closed
801.60-801.99	Fracture of base of skull, open
803.10-803.49	Other and unqualified skull fracture, closed
803.60-803.99	Other and unqualified skull fracture, open
804.10-804.49	Multiple fractures involving skull or face with other bones, closed
804.60-804.99	Multiple fractures involving skull or face with other bones, open
850.11	Concussion with loss of consciousness of 30 minutes or less
850.12	Concussion with loss of consciousness from 31 to 59 minutes
850.2	Concussion with moderate loss of consciousness
850.3	Concussion with prolonged loss of consciousness and return to pre-existing conscious level
850.4	Concussion with prolonged loss of consciousness, without return to pre-existing consciousness level
850.5	Concussion with loss of consciousness of unspecified duration
851.00-851.99	Cerebral laceration and contusion
852.00-852.59	Subarachnoid, subdural, and extradural



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	hemorrhage, following injury
853.00-853.19	Other and unspecified intracranial hemorrhage following injury
854.00-854.19	Intracranial injury of other and unspecified nature
905.0	Late effects of fracture of skull and face bones
907.0	Late effects of intracranial injury without mention of skull fracture
997.02	Iatrogenic cerebrovascular infarction or hemorrhage
V15.52	Personal history of traumatic brain injury

Appendix B (Note: This list of codes may not be all-inclusive)

Experimental/Investigational/Unproven/Not Covered: ICD-9-CM Diagnosis Codes	Description
290.0-290.43	Dementias
294.10	Dementia in conditions classified elsewhere without behavioral disturbance
294.11	Dementia in conditions classified elsewhere with behavioral disturbance
294.8	Other persistent mental disorders due to conditions classified elsewhere
294.9	Unspecified persistent mental disorders due to conditions classified elsewhere



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295.00 –295.95	Schizophrenic disorders
299.00 – 299.91	Pervasive developmental disorders
307.23	Tourette’s disorder
310.1	Personality change due to conditions classified elsewhere
314.00	Attention deficit disorder without mention of hyperactivity
314.01	Attention deficit disorder with hyperactivity
314.1	Hyperkinesis with developmental delay
315.00-315.9	Specific delays in development
331.0	Alzheimer’s disease
331.11-331.19	Frontotemporal dementia

331.82	Dementia with Lewy bodies
340	Multiple sclerosis
343.0-343.9	Infantile cerebral palsy
349.82	Toxic encephalopathy
436	Acute, but ill-defined CV disease
437.3	Non-ruptured cerebral aneurysm
438.10-438.14	Late effects of cerebrovascular disease; speech and language deficits
438.89	Other late effects of cerebrovascular disease



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758.0	Down's syndrome
781.2	Abnormality of gait
781.3	Lack of coordination
783.40	Lack of normal physiological development, unspecified
783.42	Delayed milestones
784.59	Other speech disturbance
850.0	Concussion with no loss of consciousness
850.9	Concussion, unspecified
V11.0	Personal history of schizophrenia
V57.22	Encounter for vocational therapy
All other codes	

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CMP Cross Reference:

References:

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