

**COMPUTERIZED DYNAMIC POSTUROGRAPHY**

Effective Date: July 24, 2023

Review Dates: 5/23

Date Of Origin: May 24, 2023

Status: New

**I. POLICY/CRITERIA**

Computerized dynamic posturography for the diagnosis of vestibular disorders is experimental and investigational due to insufficient evidence of efficacy.

**II. MEDICAL NECESSITY REVIEW**☐ Required☒ Not Required☐ Not Applicable**III. APPLICATION TO PRODUCTS**

Coverage is subject to member's specific benefits. Group specific policy will supersede this policy when applicable.

- ❖ **HMO/EPO:** *This policy applies to insured HMO/EPO plans.*
- ❖ **POS:** *This policy applies to insured POS plans.*
- ❖ **PPO:** *This policy applies to insured PPO plans. Consult individual plan documents as state mandated benefits may apply. If there is a conflict between this policy and a plan document, the provisions of the plan document will govern.*
- ❖ **ASO:** *For self-funded plans, consult individual plan documents. If there is a conflict between this policy and a self-funded plan document, the provisions of the plan document will govern.*
- ❖ **INDIVIDUAL:** *For individual policies, consult the individual insurance policy. If there is a conflict between this medical policy and the individual insurance policy document, the provisions of the individual insurance policy will govern.*
- ❖ **MEDICARE:** *Coverage is determined by the Centers for Medicare and Medicaid Services (CMS); if a coverage determination has not been adopted by CMS, this policy applies.*
- ❖ **MEDICAID/HEALTHY MICHIGAN PLAN:** *For Medicaid/Healthy Michigan Plan members, this policy will apply. Coverage is based on medical necessity criteria being met and the appropriate code(s) from the coding section of this policy being included on the Michigan Medicaid Fee Schedule located at: [http://www.michigan.gov/mdch/0,1607,7-132-2945\\_42542\\_42543\\_42546\\_42551-159815--,00.html](http://www.michigan.gov/mdch/0,1607,7-132-2945_42542_42543_42546_42551-159815--,00.html). If there is a discrepancy between this policy and the Michigan Medicaid Provider Manual located at: [http://www.michigan.gov/mdch/0,1607,7-132-2945\\_5100-87572--,00.html](http://www.michigan.gov/mdch/0,1607,7-132-2945_5100-87572--,00.html), the Michigan Medicaid Provider Manual will govern. If there is a discrepancy or lack of guidance in the Michigan Medicaid Provider Manual, the Priority Health contract with Michigan Medicaid will govern. For Medical Supplies/DME/Prosthetics and Orthotics, please refer to the Michigan Medicaid Fee Schedule to verify coverage.*

#### **IV. BACKGROUND**

Computerized dynamic posturography (CDP) also known as moving platform posturography or dynamic posturography. CDP evaluates a person's ability to maintain balance in simulated conditions involving visual and proprioceptive cues. It is a test of postural stability, which allows for examination of the relationships that exist among all 3 components of the human balance system—namely, vision, proprioception, and vestibular sensation or how motion affects the balance function of the inner ear through the position of the head.

A vestibular disorder refers to a problem with the structures in the inner ear that are responsible for processing information associated with balance and eye movements. Symptoms associated with vestibular disorders include vertigo, dizziness, and a sensation of spinning. Diagnosis of vestibular disorders is complicated by the large number of vestibular disorders and symptoms that can also be caused by nonvestibular problems, such as ear infection, abnormal blood flow in the brain, and anxiety. Initial testing includes a thorough patient history and physical examination. Standard clinical diagnostic tests for vestibular disorder include dynamic visual acuity, electronystagmography, bithermal caloric testing, and rotational chair tests, which evaluate eye movements in response to a number of different stimuli, including the position and rotation of the head.

While CDP has been available for many years, no trials evaluating the accuracy of its diagnostic performance or impact on diagnostic decision-making or health outcomes for its use in the diagnosis of vestibular disorders were identified that included patients for whom a diagnosis was not already made. The evidence in the published peer-reviewed medical literature assessing the use of CDP is primarily prospective and retrospective case series and validation studies. One systematic review (DiFabio, 1996) concluded that dynamic posturography has poor diagnostic accuracy for diagnosing vestibular disorders. Piirtola and Era (2006) evaluated prospective studies and reported only a few prospective follow-up studies using the force platform technique to measure postural balance and a reliable registration of subsequent falls were found; the small number of studies available made it difficult to draw definitive conclusions.

#### **V. CODING INFORMATION**

92548 Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (i.e., eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report;

92549 Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (i.e., eyes open, eyes closed, visual sway, platform

sway, eyes closed platform sway, platform and visual sway), including interpretation and report; with motor control test (MCT) and adaptation test (ADT)

## **VI. REFERENCES**

1. Agrawal Y, Ward BK, Minor LB. Vestibular dysfunction: prevalence, impact and need for targeted treatment. *J Vestib Res.* 2013;23(3):113-117.
2. Allum JHJ, Shepard NT. An overview of the clinical use of dynamic posturography in the differential diagnosis of balance disorders, *Journal of Vestibular Research*, 9: 223-252, 1999.
3. American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS). Position statement: posturography. Updated April 21, 2021. Available at: <https://www.entnet.org/resource/position-statement-posturography/>. Accessed January 9, 2023.
4. Di Fabio RP. Meta-analysis of the sensitivity and specificity of platform posturography. *Arch Otolaryngol Head Neck Surg.* 1996;122(2):150-156.
5. Hain TC. Moving platform posturography testing used to detect symptom exaggeration and moving platform posturography results in PPPD. Modified September 30, 2022. *Chicago Dizziness and Hearing*. Available at: <https://dizziness-and-balance.com/testing/CDP/malinger.html>. Accessed November 14, 2022.
6. Hayes, Symplr Company. Computerized Dynamic Posturography for Diagnosis of Vestibular Disorders. *Evolving Evidence Review*, Dec 7, 2022.
7. Kung BC, Willcox TO. Chapter 25 - examination of hearing and balance. In: Schapira AH, Byrne E, MiMauro S, et al., eds. *Neurology and Clinical Neuroscience*. Maryland Heights, MO: Mosby; 2007:318-327. ISBN: 9780323033541.
8. Lipp M, Longridge NS. Computerised dynamic posturography: its place in the evaluation of patients with dizziness and imbalance. *J Otolaryngol.* 1994 Jun;23(3):177-83. PMID: 8064956.
9. Loth EA, Albuquerque CE, Ciena AP, Rossi ÂG. Evaluation of the postural control in young adults by use of foam-laser dynamic posturography and power platform. *Rev Bras Med Esporte.* 2011;17(3):171-174.
10. Mallinson AI, Kuijpers ACM, Van Zwieten G, Kakal J, Mullings W, Longridge NS. Computerized Dynamic Posturography does not detect measured CVEMP and OVEMP abnormalities. *Gait Posture.* 2019 Jan;67:248-250. doi: 10.1016/j.gaitpost.2018.10.019. Epub 2018 Oct 16. Erratum in: *Gait Posture.* 2022 Jun;95:295. PMID: 30384214.
11. Nashner LM, Peters JF. Dynamic posturography in the diagnosis and management of dizziness and balance disorders. *Neurol Clin.* 1990 May;8(2):331-49. PMID: 2193215.

12. Piirtola M, Era P. Force platform measurements as predictors of falls among older people - a review. *Gerontology*. 2006;52(1):1-16. doi: 10.1159/000089820. PMID: 16439819.
13. Renga V. Clinical Evaluation of Patients with Vestibular Dysfunction. *Neurol Res Int*. 2019 Feb 3;2019:3931548. doi: 10.1155/2019/3931548. PMID: 30863640; PMCID: PMC6377969.
14. Vestibular Disorders Association (VeDA). About vestibular disorders. 2022. Available at: <https://vestibular.org/article/what-is-vestibular/about-vestibular-disorders/>. Accessed January 9, 2023
15. Wittstein MW, Crider A, Mastrocola S, Guarena Gonzalez M. Use of Virtual Reality to Assess Dynamic Posturography and Sensory Organization: Instrument Validation Study. *JMIR Serious Games*. 2020 Dec 16;8(4):e19580. doi: 10.2196/19580. PMID: 33325830; PMCID: PMC7773518.

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