IEHP UM Subcommittee Approved Authorization Guidelines
Non-Surgical Decompression Therapy for the Treatment of Lumbosacral Pain

Policy
Vertebral axial decompression is performed for symptomatic relief of pain associated with lumbar disc problems. The treatment combines pelvic and/or cervical traction connected to a special table that permits the traction application. There is insufficient scientific data to support the benefits of this technique. Therefore, Decompression Therapy for the Treatment of Lumbosacral Pain is not a covered benefit at this time.

Medicare (2017)
In the CMS manual it states that VAX-D (Vertebral Axial Decompression) is not covered by Medicare as “there is insufficient scientific data to support the benefits of this technique”.

Coverage by Other Health Plans
BlueCross BlueShield of Arizona (2017) Spinal decompression or vertebral axial decompression therapy is … not eligible for coverage and is considered experimental or investigational based on insufficient scientific evidence to permit conclusions concerning the effect on health outcomes”.

Health Net (2015) Health Net does not cover VAX-D as it is not seen as medically necessary for the treatment of Lumbar sacral pain. Current policy recommendations are based on a lack of large randomized clinical trials that compare VAX-D to other types of treatment modalities.

Wellmark (2016) “Decompression therapy, including vertebral axial decompression, for the treatment of low back pain and all other applications is considered investigational”.

Additional Resources
Annals of Internal Medicine–A Joint Clinical Practice Guideline from the American College of Physicians and the American Pain Society recommends that spinal manipulation may be of some benefit for acute (< 4weeks) low back pain. However, it specifies that vertebral continuous or intermittent traction of the spine has “not shown to be effective in patients with sciatica. There is insufficient evidence to recommend any specific treatment [using spinal manipulation] as first line treatment”.

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Description of Procedure
Blue Cross/Blue Shield describes the therapy as: “Individual wears a pelvic or chest harness and lies prone on a specially equipped table. The table is slowly extended and a distraction force is applied via the pelvic harness until the desired tension is reached. This is followed by a gradual decrease of the tension. The cyclic nature of the treatment allows the individual to withstand stronger distraction forces compared to static lumbar traction techniques. An individual session typically includes 15 cycles of tension and 10 to 15 daily treatments may be administered.”

Effective Date: August 23, 2007

Reviewed Annually: November 9, 2016

Revised:
May 31, 2017
October 16, 2017

Bibliography
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