01-92502-12

Original Effective Date: 12/15/03

Reviewed: 03/28/24

Revised: 04/15/24

Subject: Computerized Dynamic Posturography

THIS MEDICAL COVERAGE GUIDELINE IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS MEDICAL COVERAGE GUIDELINE APPLIES TO ALL LINES OF BUSINESS UNLESS OTHERWISE NOTED IN THE PROGRAM EXCEPTIONS SECTION.

Position Statement | Billing/Coding | Reimbursement | Program Exceptions | Definitions | Related Guidelines

Other | References | Updates

DESCRIPTION:

Computerized dynamic posturography (CDP) attempts to provide quantitative information regarding the functional ability to maintain balance. The patient, wearing a harness to prevent falls, stands on an enclosed platform surrounded by a visual field. By altering the angle of the platform or shifting the visual field, the test assesses movement coordination and the sensory organization of visual, somatosensory, and vestibular information relevant to postural control. Results of posturography have been used to determine what type of information (i.e., visual, vestibular, proprioceptive) can and cannot be used to maintain balance. CDP cannot be used to localize the site of a lesion. The Food and Drug Administration (FDA) approved the EquiTest™ for computerized dynamic posturography. Other dynamic posturography device makers include Micromedical Technology, Metitur, Vestibular Technologies and Medicapteurs.

Summary and Analysis of Evidence: Computerized dynamic posturography (CDP) provides multisensory assessment of balance. Consensus and guidelines directing clinical application of CDP are lacking regarding CDP utility and coverage determinations vary. Computerized dynamic posturography (CDP) provides multisensory assessment of balance. Consensus and guidelines directing clinical application of CDP are lacking regarding CDP utility and coverage determinations vary (Chieffe, et al., 2023).

POSITION STATEMENT:

Dynamic posturography is considered **experimental or investigational**. The evidence is insufficient to determine that dynamic posturography results in an improvement in the net health outcome.

BILLING/CODING INFORMATION:

CPT Coding:

92548	Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (ie, eyes open, eyes closed, visual sway, platform sway, eyes closed

	platform sway, platform and visual sway), including interpretation and report (**investigational**)
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) (**investigational**)

REIMBURSEMENT INFORMATION:

Refer to section entitled **POSITION STATEMENT**.

PROGRAM EXCEPTIONS:

Federal Employee Program (FEP): Follow FEP guidelines.

State Account Organization (SAO): Follow SAO guidelines.

Medicare Advantage products: No National Coverage Determination (NCD) and/or Local Coverage Determination (LCD) were found at the time of the last guideline reviewed date.

DEFINITIONS:

No guideline related definitions apply.

RELATED GUIDELINES:

None applicable.

OTHER:

Other names used to report dynamic posturography:

Note: The use of specific product names is illustrative only. It is not intended to be a recommendation of one product over another, and is not intended to represent a complete listing of all products available.

Automated posturography

Balance board testing
Computerized dynamic posturography (CDP)
Computerized posturography
Computerized platform posturography
EquiTest

Equilibrium platform testing (EPT)
Moving platform posturography
Test of Balance (TOB)

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COMMITTEE APPROVAL:

This Medical Coverage Guideline (MCG) was approved by the Florida Blue Medical Policy and Coverage Committee on 03/28/24.

GUIDELINE UPDATE INFORMATION:

12/15/03	New Medical Coverage Guideline.
12/15/04	Reviewed; no change in investigational status.
02/15/06	Revised description section. Added program exception (covered indications and ICD-9 codes that support medical necessity-*note-expanded codes to include the 4th and 5th digit) for Medicare Advantage products, and updated references.
02/15/07	Scheduled review. No change in investigational status. Updated Medicare Advantage products program exception; deleted 850.20 – 850.29 code range, and updated references.
06/15/07	Reformatted guideline; references updated.
02/15/08	Scheduled review. No change in position statement (investigational). Added computerized to MCG title. Revised descriptor. Updated Medicare Advantage products program exception, and updated references.
02/15/09	Scheduled review. No change in position statement (experimental or investigational), and updated references.
02/15/10	Scheduled review. No change in position statement (experimental or investigational). Updated references. Deleted Medicare Advantage products program exceptions.
04/15/11	Added Medicare Advantage products program exceptions. Updated references.
05/11/14	Revision: Program Exceptions section updated.
11/01/15	Revision: ICD-9 Codes deleted.
06/15/17	Review; no change in position statement. Updated references.

03/15/19	Review; no change in position statement. Updated references.
01/01/20	Annual HCPCS code update. Added code 92549.
06/15/21	Review; revised position statement. Updated references.
06/15/23	Review; no change in position statement. Updated references.
04/15/24	Review; no change in position statement. Updated references.