



Manual: IU Health Plans  
Department: Utilization Management  
Policy # MP041  
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# Health Plans

**Medicare Advantage**

**XX Commercial**

## **Incontinence, Biofeedback Policy**

### **I. Purpose**

Indiana University Health Plans (IU Health Plans) considers clinical indications when making a medical necessity determination for Incontinence Biofeedback treatment.

### **II. Scope**

This policy applies to all Utilization Management staff having decision-making responsibilities where authorization is required for Fully Insured commercial plan.

### **III. Exceptions**

1. Adult (members 18 years age and older) - Biofeedback for Urinary Incontinence and Fecal Incontinence/Constipation:
  - a. Home use of biofeedback therapy is not covered.
  - b. Biofeedback training in a group setting is not covered.
  - c. Biofeedback therapy is limited to up to six treatments per six months per condition.
2. Appropriate candidates for biofeedback training include:
  - a. Capable of participating in the treatment plan (physically as well as intellectually)
  - b. Motivated to actively participate in the treatment plan, including being responsive to care requirements.
  - c. Have a condition that can be appropriately treated with biofeedback.
3. Pediatric (members between five years of age and 18 years of age) - Biofeedback for Dysfunctional Elimination Syndrome therapy should not be a treatment for any of the following conditions/symptoms and will not be covered:
  - a. This is not a treatment option for children under five years of age.
  - b. Unusual straining during urination or a small or narrow stream of urine or dripping may be a sign of other physical problems.
  - c. Cloudy or pink urine, or bloodstains on underwear or night clothes.
4. Other limitations include:
  - a. Treatment is limited to ten sessions per lifetime.
  - b. No coverage provided for the electromyography (EMG) biofeedback device.
  - c. Biofeedback therapy for encopresis or constipation in children is considered experimental and investigative.

#### IV. Definitions

**Anal Manometry-** Diagnostic test that measures anal sphincter properties and provides an assessment of rectal sensation, rectoanal reflexes, and rectal compliance (CMS, LCD 34977)

**Fecal Incontinence-** CMS (LCD 34977) defines fecal incontinence as the involuntary loss of stool (gas, liquid or solid). Fecal incontinence is caused by a disruption of the normal function of both the lower digestive tract and the nervous system. Fecal incontinence can be caused by several factors:

- Constipation

- Damage to the anal sphincter muscle (e.g., childbirth or hemorrhoid surgery) Damage to the nerves of the anal sphincter muscles of the rectum (e.g., childbirth, straining to pass stool, stroke, physical disability due to injury, diabetes or multiple sclerosis)

- Loss of the storage capacity in the rectum

- Diarrhea

- Pelvic floor dysfunction

**Urinary Incontinence-** CMS (LCD34977) defines urinary incontinence as the involuntary leakage of urine. Male and females have different risk factors in developing urinary incontinence. The risk of urinary incontinence increases with age in both men and women, but women are more likely to develop urinary incontinence due to anatomical differences in the pelvic region and due to changes caused by pregnancy and childbirth. There are several types of urinary incontinence. A few examples include:

- Stress incontinence

- Urge incontinence

- Overflow incontinence

- Mixed incontinence

**Biofeedback Training-** Biofeedback training of the pelvic muscles uses an electronic or mechanical device to relay visual and/or auditory evidence of pelvic floor muscle activity in order to improve awareness and control of pelvic floor muscle contractions. Biofeedback may include measurement of muscle contraction through surface EMO, vaginal or rectal sensors, and/or rectal manometry devices. Such services when performed for biofeedback monitoring are part of the biofeedback service.

#### V. Policy Statements

IU Health Plans considers **Biofeedback for the treatment of Incontinence** medically necessary for the following indications:

1. Adult (members 18 years age and older) - Biofeedback for Urinary Incontinence and Fecal Incontinence/Constipation. Biofeedback is covered for the management and

treatment of adult urinary incontinence and fecal incontinence/constipation when **ALL of the following** criteria are met:

- a. Treatment is billed by a practitioner according to their scope of practice for a diagnosis of urinary incontinence or fecal incontinence/constipation.
- b. Potential treatable problems should be identified, and treatment implemented prior to biofeedback therapy.
- c. Coverage includes treatment of urinary stress and/or urge incontinence and fecal incontinence/constipation in cognitively intact members.
- d. Member has failed a documented trial of four weeks of an ordered plan of pelvic muscle exercises (PME), designed to increase peri urethral muscle strength.

2. Pediatric (members between five years of age and 18 years of age) -

Biofeedback for Dysfunctional Elimination Syndrome must be prescribed by the urologist and performed by the practitioner according to their scope of practice for the treatment of **one or more of the following** conditions associated with bladder dysfunction:

- a. Nocturnal enuresis
- b. Staccato voiding
- c. Bladder-sphincter dyssynergia
- d. Recurrent urinary tract infections when **all of the following** criteria are met:
  - i. Physical limitations such as a kidney infection, diabetes, or defects in the urinary system have been ruled out.
  - ii. Medications and other conservative measures to address this problem have not reduced or eliminated the issue.
  - iii. Dysfunctional elimination (bedwetting) occurs nightly.

| CODE                     | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | <b>FOR ADULT MEMBERS (18 years and older) Biofeedback for Urinary Incontinence and Fecal Incontinence/Constipation</b>                                                                                                                                                                                                                                                                                                                                                   |
| 90901                    | Biofeedback training by any modality                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 90911                    | Biofeedback training; perineal muscles, anorectal, or urethral sphincter, including EMO and/or manometry                                                                                                                                                                                                                                                                                                                                                                 |
| 90912                    | Qualified healthcare professional trains a patient to control involuntary bodily functions by altering brain activity, blood pressure, heart rate, and other bodily functions that the patient cannot normally control voluntarily. This service is done for conditions such as fecal or urinary incontinence. EMG and manometry, if performed, are included with this service. Report this code for the first 15 minutes of face-to-face service with the patient.      |
| 90913                    | Qualified healthcare professional trains a patient to control involuntary bodily functions by altering brain activity, blood pressure, heart rate, and other bodily functions that the patient cannot normally control voluntarily. This service is done for conditions such as fecal or urinary incontinence. EMG and manometry, if performed, are included with this service. Report this code for the additional 15 minutes of face-to-face service with the patient. |
| <b>NOT COVERED CODES</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

|                  |                                                                                                         |
|------------------|---------------------------------------------------------------------------------------------------------|
| 90875            | If psychophysiological therapy is performed incorporating biofeedback training, consult these CPT codes |
| 90876            | If psychophysiological therapy is performed incorporating biofeedback training, consult these CPT codes |
| <b>ICD 10</b>    | <b>Covered if selection criteria are met</b>                                                            |
| K59-K59.09       | Constipation                                                                                            |
| K59.4            | Anal Spasm                                                                                              |
| N31.2            | Flaccid Neuropathic bladder, not elsewhere classified                                                   |
| N31.9            | Neuromuscular Dysfunction of bladder                                                                    |
| N36.42           | Intrinsic Sphincter Deficiency (ISD)                                                                    |
| N36.43           | Post-Void Dribbling                                                                                     |
| N36.44           | Muscular Disorders of Urethra                                                                           |
| O83.4            | Cauda Equina Syndrome                                                                                   |
| N36.8            | Other specified disorders of urethra                                                                    |
| N39.3            | Stress incontinence (Female) (Male)                                                                     |
| N39.41           | Urge Incontinence                                                                                       |
| N39.42           | Incontinence without sensory awareness                                                                  |
| N39.43           | Post-void dribbling                                                                                     |
| N39.44           | Nocturnal enuresis                                                                                      |
| N39.45           | Continuous leakage                                                                                      |
| N39.46           | Mixed incontinence                                                                                      |
| N39.490          | Overflow Incontinence                                                                                   |
| R15.0-R15.9      | Fecal Incontinence                                                                                      |
| R33.0            | Drug Induced retention of urine                                                                         |
| R39.14           | Feeling of incomplete bladder emptying                                                                  |
| R39.15           | Urgency of urination                                                                                    |
| <b>CPT Codes</b> | <b>For pediatric between 5 and 18 years for biofeedback for dysfunction Elimination Syndrome</b>        |

|                     |                                                                                                         |
|---------------------|---------------------------------------------------------------------------------------------------------|
| 90911               | Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMO and/or manometry |
| <b>ICD 10 Codes</b> | <b>Covered if Selection Criteria are Met</b>                                                            |
| N13.790-<br>N17.739 | Vesicoureteral reflux                                                                                   |
| N32.81              | Overactive bladder                                                                                      |
| N36.41-<br>N36.44   | Sphincter disorders/ deficiency                                                                         |
| N39.0               | Urinary tract infection site not specified                                                              |
| N3§9.44             | Nocturnal enuresis                                                                                      |

## VI. Procedures

None

## VII. References/Citations

1. Abi Nader, E., Roche, O., Jais, J. P., Salomon, J., Goulet, O., & Campeotto, F. (2021). The use of biofeedback for children with fecal incontinence secondary to retentive constipation: Experience of a French Pediatric Center. *Clinics and research in hepatology and gastroenterology*, 45(3), 101550. <https://doi.org/10.1016/j.clinre.2020.09.011>
2. Centers for Medicare & Medicaid (CMS). National Coverage Determination (NCD) Biofeedback Therapy for the Treatment of Urinary Incontinence. 30.1.1. Effective Date 7/1/2001. [NCD - Biofeedback Therapy for the Treatment of Urinary Incontinence \(30.1.1\) \(cms.gov\)](https://www.cms.gov/medicare/coverage/determinations/national-coverage-determinations-urinary-incontinence-biofeedback-therapy)
3. Hagen, S., Elders, A., Stratton, S., Sergenson, N., Bugge, C., Dean, S., Hay-Smith, J., Kilonzo, M., Dimitrova, M., Abdel-Fattah, M., Agur, W., Booth, J., Glazener, C., Guerrero, K., McDonald, A., Norrie, J., Williams, L. R., & McClurg, D. (2020). Effectiveness of pelvic floor muscle training with and without electromyographic biofeedback for urinary incontinence in women: multicentre randomised controlled trial. *BMJ (Clinical research ed.)*, 371, m3719. <https://doi.org/10.1136/bmj.m3719>

## VI. Forms/Appendices

None

## VII. Responsibility

Medical Director

This Policy is proprietary and confidential. No part of this Policy may be disclosed in any manner to a third party without the prior written consent of IU Health Plans, Inc.