Medica Coverage Policy

Policy Name:	**Noncontact Near Infrared Spectroscopy**
Effective Date:	**05/20/2024**

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member's plan document for specific coverage information. If there is a difference between this general information and the member's plan document, the member's plan document will be used to determine coverage. With respect to Medicare and Minnesota Health Care Programs, this policy will apply unless those programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

Coverage Policy

Non-contact near infrared spectroscopy is considered investigative and unproven and therefore NOT COVERED. There is insufficient reliable evidence in the form of high-quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Description

Noncontact near infrared spectroscopy (NIRS) is a non-invasive method for assessing tissue oxygenation and perfusion. NIRS is based on the idea that tissue is transparent to near infrared light and that chemicals in tissue exist such that light absorption is dependent on the tissue's oxygenation status. NIRS can distinguish between oxygenated and deoxygenated blood.

These devices are indicated as adjunct trend monitors of regional hemoglobin oxygen saturation (StO2) and relative level of oxygenated hemoglobin (HbO2) and deoxygenated hemoglobin (Hb) of blood in brain or in other tissue beneath the probes in any individual. They pass light through tissues, capture that light, and analyze it. These devices can be held close to or applied to the skin's surface.

NIRS is used for monitoring cerebral oxygenation, tissue viability in chronic wounds and ulcers, organ and skeletal muscle tissue oxygenation.

NIRS device consists of a light source and light detectors. The light passes through the scalp, skull, and upper layer of the cerebral cortex. The light is absorbed by the hemoglobin in the blood and is reflected and is collected by light detectors. The signal is then carried to a display unit where the values and trends are displayed on the screen.

This device can used for spot-checking or continuous monitoring of neonatal, pediatric, or adult patients in hospitals, long-term care, medical facilities, sleep laboratories and sub-acute environments and Emergency Medical Services (EMS), including patient transport. The specific Food and Drug Administration (FDA) indication differs by each device.

The clinical value of trend data has not been demonstrated in disease states. NIRS devices should not be used as the sole basis for diagnosis or therapy.

FDA Approval
The NIRS devices are either FDA-cleared Class I or II Medical Devices. The following are examples of FDA cleared devices. FORE-SIGHT ELITE® Tissue Oximeter Module Edwards Lifesciences (originally marketed CAS Medical Systems Inc.) FDA 510(K), 2006; SenSmart Model X-100 (formerly EQUANOX) FDA 510 K, 2013; NIRO-200NX Hamamatsu Photonics FDA (510(K), 2015; INVOS® Oximeter FDA 510(k), 1996 and Clarifi (predecessor, Ox-Imager CS device), Modulim, Inc FDA 510 K, 2016 and SnapshotNIR FDA 510K, 2020.

Prior Authorization
Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

Coding Considerations
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes:
Use the current applicable CPT/HCPCS code(s).

HCPC Codes:
Use the current applicable CPT/HCPCS code(s).

Original Effective Date: 05/20/2024

Re-Review Date(s):