## Infrared Heating Pad Systems

*Adopted from the National Government Services website.*

For any item to be covered by The Health Plan, it must:

1. Be eligible for a defined Medicare or The Health Plan benefit category
2. Be reasonable and necessary for the diagnosis or treatment of an illness or injury or to improve the functioning of a malformed body member
3. Meet all other applicable Medicare and/or The Health Plan statutory and regulatory requirements

For the items addressed in this medical policy, the criteria for "reasonable and necessary" are defined by the following indications and limitations of coverage and/or medical necessity. *Please refer to individual product lines certificates of coverage for possible exclusions of benefit.*

For an item to be covered by The Health Plan, the supplier must receive a written, signed, and dated order before a claim is submitted to The Health Plan. If the supplier bills for an item addressed in this policy without first receiving the completed order, the item will be denied as not reasonable and necessary.

Suppliers are to follow The Health Plan requirements for precertification as applicable.

Infrared heating systems are not covered under all Lines of Business

<table>
<thead>
<tr>
<th>CMS National Coverage Policy</th>
<th>CMS Publication 100-3 Medicare National Coverage Determination Manual, Chapter 1, Section 270.6</th>
</tr>
</thead>
</table>
| **Review/Revisions Effective Date** | For services performed on or after 10/31/13  
**Review /Revised:** 07/01/2017 02/01/16 |
| **The Health Plan** | Plans will follow Coverage Determination posted on the CGS website unless otherwise indicated in sections of this policy, contractual agreements, or benefit plan documents. |

### DESCRIPTION

An **infrared heater** or **heat lamp** is a body with a higher temperature which transfers energy to a body with a lower temperature through electromagnetic radiation.

### NONCOVERAGE STATEMENT

There are no indications for which these devices have been demonstrated to have any therapeutic effect. The device and any related accessories will be denied as not reasonable and necessary.
CODING INFORMATION

CPT/HCPCS codes: The appearance of a code in this section does not necessarily indicate coverage.

HCPCS MODIFIERS

<table>
<thead>
<tr>
<th>Modifier</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>EY</td>
<td>NO PHYSICIAN OR OTHER LICENSED HEALTH CARE PROVIDER ORDER FOR THIS ITEM OR SERVICE</td>
</tr>
</tbody>
</table>

HCPCS CODES

EQUIPMENT

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>E0221</td>
<td>INFRARED HEATING PAD SYSTEM</td>
</tr>
</tbody>
</table>

ACCESSORIES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A4639</td>
<td>REPLACEMENT PAD FOR INFRARED HEATING PAD SYSTEM, EACH</td>
</tr>
</tbody>
</table>

There are no specified diagnoses or ICD-10 codes that indicate medical necessity or noncovered items.

KX, GA, and GZ MODIFIERS

Suppliers may submit a claim with a KX modifier only if all the criteria for that item is met.

If coverage criteria are not met, the GA or GZ modifier must be used. When there is an expectation of a medical denial, suppliers must enter the GA modifier on the claim line if they have obtained a properly executed Advance Beneficiary Notice (ABN) or the GZ modifier, if they have not obtained a valid ABN.

ADVANCED BENEFICIARY NOTICE

The Health Plan expects providers to follow the Medicare policy on ABN across all Medicare, Medicaid, and Commercial plans.

NOTE: Providers may be held financially responsible if they furnish the above items without notifying the member, verbally and in writing, that the specific service being provided is not covered. This must be done prior to the dispensing of the device. The provider must submit the waiver or ABN to The Health Plan with the claim showing the member agreed to pay for the device. Generalized statements on waivers or ABN are not acceptable.

PRICING, DATA ANALYSIS, AND CODING (PDAC)

The Health Plan has implemented use of Medicare’s PDAC contractor for review of authorizations. Suppliers should contact the PDAC contractor for guidance on the correct coding of these items.

[dmepdac.com/](http://dmepdac.com/)
MEDICARE DEFINITIONS AND DESCRIPTIONS

An infrared heating pad system (E0221) consists of a pad or pads containing mechanisms (i.e., luminous gallium aluminum arsenide diodes) that generates infrared (or near infrared) light and a power source. Replacement pads are coded A4639.

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INTERNET LINKS AND SOURCES


The Health Plan Provider Procedural Manual. Payment Voucher, Section 14, Page 11