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Medical policies in conjunction with other nationally recognized standards of care are used to make medical coverage decisions.

Motor Cortex Stimulation Policy

Indication/Usage:

Motor cortex stimulation (MCS), also referred to as cerebral cortex stimulation or extradural motor cortex stimulation (EMCS), is primarily proposed for relief of refractory neuropathic pain. It entails implantation of electrodes over the primary motor cortex. One or more electrodes are placed extradurally over the motor cortex via a burr hole or a small craniotomy, and these electrodes are then connected to an implantable, battery-powered, neurostimulator. This procedure is usually performed in two separate operations involving a temporary neurostimulator and a permanent neurostimulator if the trial is successful in reducing neuropathic pain by 50%.

Medical Indications for Authorization Commercial and Medicare Members

SummaCare considers motor cortex stimulation experimental and investigational for any indications because its effectiveness has not been established. |

There is currently no NCD or LCD per CMS

Limitations

There are currently no devices approved by the FDA for motor cortex stimulation. There is insufficient evidence in the published peer-reviewed literature to support the safety and efficacy of MCS for any indication. Outcomes regarding the benefits of MCS are conflicting. Some studies reported that the initial pain relief following MCS was not sustained over time and in some cases, worsening of pain followed MCS. Surgical techniques, electrode placement, device programming, outcome measures and patient selection criteria have not been established.

Coverage Decisions

Coverage decisions made per CMS, Hayes and industry standards research

Plans Covered By This Policy

Commercial and Medicare

Considered experimental and investigational for all lines of business

Sources Reviewed

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