

# MEDICAL POLICY No. 91355-R5

### THERMOGRAPHY

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11/19, 11/20, 11/21, 11/22, 11/23, 11/24

Date of Origin: March 31, 1989 Status: Current

#### I. POLICY/CRITERIA

- A. Thermography is considered investigational and experimental or unproven. The use of thermography, including digital infrared thermal imaging, magnetic resonance (MR) thermography, and temperature gradient studies as a diagnostic or screening tool has not been proven to be effective.
- B. Siren Socks for prediction of diabetic foot ulcers is considered investigational and experimental or unproven.

#### II. MEDICAL NECESSITY REVIEW

Prior authorization for certain drugs, services, and procedures may or may not be required. In cases where prior authorization is required, providers will submit a request demonstrating that a drug, service, or procedure is medically necessary. For more information, please refer to the <u>Priority Health Provider Manual</u>.

#### III. APPLICATION TO PRODUCTS

Coverage is subject to member's specific benefits. Group specific policy will supersede this policy when applicable.

- **❖** HMO/EPO: This policy applies to insured HMO/EPO plans.
- ❖ POS: This policy applies to insured POS plans.
- \* PPO: This policy applies to insured PPO plans. Consult individual plan documents as state mandated benefits may apply. If there is a conflict between this policy and a plan document, the provisions of the plan document will govern.
- \* ASO: For self-funded plans, consult individual plan documents. If there is a conflict between this policy and a self-funded plan document, the provisions of the plan document will govern.
- \* INDIVIDUAL: For individual policies, consult the individual insurance policy. If there is a conflict between this medical policy and the individual insurance policy document, the provisions of the individual insurance policy will govern.
- \* MEDICARE: Coverage is determined by the Centers for Medicare and Medicaid Services (CMS) and/or the Evidence of Coverage (EOC); if a coverage determination has not been adopted by CMS, this policy applies.
- MEDICAID/HEALTHY MICHIGAN PLAN: For Medicaid/Healthy Michigan Plan members, this policy will apply. Coverage is based on medical necessity criteria being met



and the appropriate code(s) from the coding section of this policy being included on the Michigan Medicaid Fee Schedule located at: <a href="http://www.michigan.gov/mdch/0,1607,7-132-2945">http://www.michigan.gov/mdch/0,1607,7-132-2945</a> 42542 42543 42546 42551-159815--,00.html. If there is a discrepancy between this policy and the Michigan Medicaid Provider Manual located at: <a href="http://www.michigan.gov/mdch/0,1607,7-132-2945">http://www.michigan.gov/mdch/0,1607,7-132-2945</a> 5100-87572--,00.html, the Michigan Medicaid Provider Manual will govern. For Medical Supplies/DME/Prosthetics and Orthotics, please refer to the Michigan Medicaid Fee Schedule to verify coverage

#### IV. DESCRIPTION

Thermography is a procedure that measures the infrared emission from the skin. The visual display of temperature information is known as a thermogram and it consists of brightly colored patterns on a liquid crystal display. It is thought that temperature differences associated with changes in metabolic activity.

Siren Socks are daily-wear socks embedded with sensors that perform continuous temperature monitoring of the feet of persons. Combined with a mobile app, the device identifies when the temperature differential between the wearer's feet changes and potentially signaling a development of a diabetic foot ulcers (DFU) and triggers an alert. Two studies (Reyzelman, 2018; 2022) reported that Siren Socks temperature sensors accurately measured temperature differentials intended to predict DFUs but patient groups in both studies were small with no comparison groups with placebo, sham, or active treatments.

#### V. CODING INFORMATION

ICD-10 Codes that may support medical necessity

None

#### **CPT/HCPCS Codes:**

93740 Temperature gradient studies

76498 Unlisted magnetic resonance procedure (eg, diagnostic, interventional) (Not covered for thermal MRI, explanatory notes must accompany claim)

#### VI. REFERENCES

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- 7;13:873-881. doi: 10.2147/CEOR.S322424. PMID: 34675567; PMCID: PMC8504713.
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- 11. Reyzelman AM, Shih CD, Tovmassian G, Nathan M, Ma R, Scholten HJ, Malhotra K, Armstrong DG. An Evaluation of Real-world Smart Sock-Based Temperature Monitoring Data as a Physiological Indicator of Early Diabetic Foot Injury: Case-Control Study. JMIR Form Res. 2022 Apr 1;6(4):e31870. doi: 10.2196/31870. PMID: 35363148; PMCID: PMC9015780.
- 12. van Netten JJ, Dijkgraaf MGW, Bus SA. Response to: Remote Diabetic Foot Temperature Monitoring for Early Detection of Diabetic Foot Ulcers: A Cost-Effectiveness Analysis [Letter]. Clinicoecon Outcomes Res. 2022 Jan 19;14:49-50. doi: 10.2147/CEOR.S354729. PMID: 35082505; PMCID: PMC8784254.

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**Thermography** 

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