

Close Window

[Aetna.com Home](#) | [Help](#) | [Contact Us](#)

We want you to know<sup>®</sup>



Search

# Clinical Policy Bulletin: Cranial Remodeling Bands and Helmets

Number: 0379

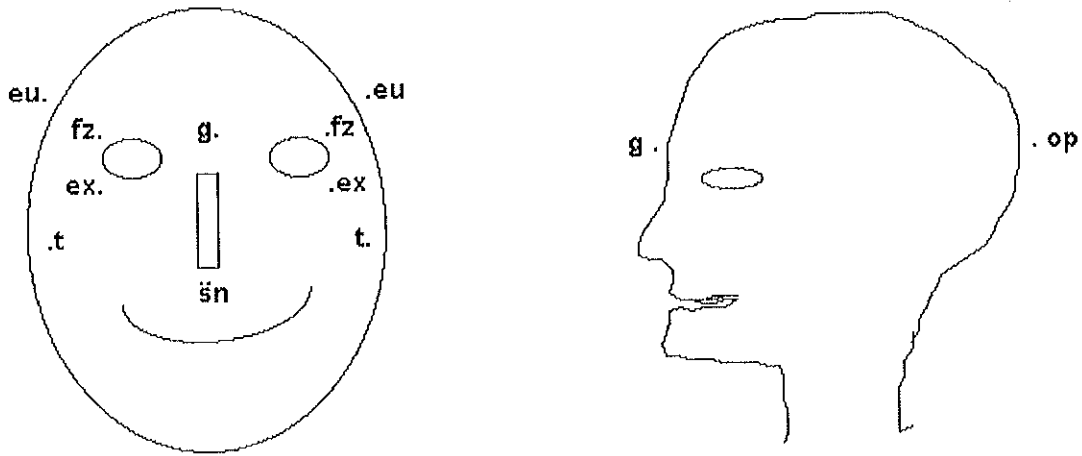
Politic  
> Last  
Effect  
Next  
> Rev  
> Def

Addi  
> Clir  
Note

## Policy

- I. Aetna considers the use of a cranial remodeling band as durable medical equipment medically necessary for moderate to severe positional head deformities associated with premature birth, restrictive intrauterine positioning, cervical abnormalities, birth trauma, torticollis (shortening of the sternocleidomastoid muscle) and sleeping positions in children when banding is initiated at 4 to 12 months of age and the following conditions are met:
  - A. A 2-month trial of conservative therapy consisting of repositioning the child's head such that the child lies opposite to the preferred position, has failed to improve the deformity and is judged to be unlikely to do so, and
  - B. One of the following must be met:
    1. Anthropometric data (measurements used to evaluate abnormal head shape by measuring the distance in mm from one pre-designated point on the face or skull to another, comparing the right and left sides) verifies that a moderate to severe plagiocephaly is documented by a physician experienced in such measurement. (Note: These measurements are generally obtained by the orthotist fitting the band or helmet.) The most significant measurements used in this initial evaluation are skull base asymmetry, cranial vault asymmetry, orbitotragial depth, and cephalic index.

DIAGRAM:



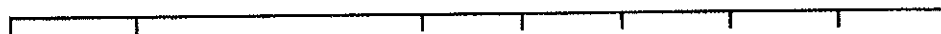
A difference of asymmetry greater than 6 mm between anthropometric measurements (see diagram above) in any of the anthropometric data in the first column of the following table warrants coverage of a trial of orthotic banding to correct the craniofacial deformity:

Anthropometric Data	Measurement	Measures
Cranial base (sn-t on same side)	from right and left subnasal point (sn) to tragus (t)	measures maxillary depth or right and left morphological face height
Cranial vault (fz R-euL, fz L-euR)	from frontozygomatic point (fz) on one side of face to euryon (eu)	measures cranial vault asymmetry
Orbitotragial depth (ex-t, R, L)	from exocanthion point (ex) to tragus (t)	measures orbito-tragion depth (exocanthion)

- For brachycephaly evaluation, a cephalic index 2 standard deviations below mean (head narrow for its length) or 2 standard deviations above mean (head wide for its length) warrants coverage of a trial of orthotic banding to correct the craniofacial deformity in a child after 4 months of age and before 12 months of age. (Note: These measurements are generally obtained by the orthotist fitting the band or helmet.)

Head width (eu - eu)	from euryon (eu) on one side of head to euryon (eu) on the other side	measures greatest transverse diameter or maximal head width
Head length (g-op)	from glabella point (g) to opisthocranium (op)	measures maximal head depth or length

$$\text{Cephalic index} = \frac{\text{Head width (eu - eu)} \times 100}{\text{Head length (g - op)}}$$



Sex	Age	-2SD	-1SD	Mean	+1SD	+2SD
Male	16 days to 6 months	63.7	68.7	73.7	78.7	83.7
	6 - 12 months	64.8	71.4	78.0	84.6	91.2
Female	16 days to 6 months	63.9	68.6	73.3	78.0	82.7
	6-12 months	69.5	74.0	78.5	83.0	87.5

3. Premature infants with dolichocephalic head shape who have developed a misshapen head secondary to sustained head position.
4. Infants who develop significant plagiocephaly secondary to a constant head position required for long-term hyperalimentation who do not respond to simple changing of the catheter location allowing the head to be repositioned.
5. Members with moderate to severe residual plagiocephaly after surgical correction.
6. Members with excess frontal bossing secondary to sagittal synostosis.

II. Use of a cranial remodeling banding for persons not meeting these criteria is considered experimental and investigational.

## Background

Plagiocephaly (an asymmetrical head shape) is most often the result of an infant spending extended periods of time on their back, typically during sleep. Plagiocephaly can also occur as a feature of other disorders (e.g., craniofacial disorders, torticollis, cervical anomalies) and is categorized as either positional or synostotic (premature union of cranial sutures). Although 1 in 300 infants exhibit variable degrees of plagiocephaly, true sutural synostosis, which interferes with cranium development and may cause increased intracranial pressure, occurs in only 0.4 to 1 per 1000 live births.

Positional plagiocephaly is treated conservatively and many cases do not require any treatment as the condition may resolve spontaneously when the infant begins to sit up. When the deformity is moderate or severe and a trial of repositioning the infant has failed, a pediatric neurologist, neurosurgeon or other appropriate specialist in craniofacial deformities may prescribe a cranial remodeling band to remodel the misshapen head.

Examples of brands of cranial remodeling bands and helmets include the DOC BAND®, Gillette Children's Craniocap, and the STARband™ Cranial Headband. Average treatment time with the cranial remodeling band or helmet is four and a half months.

### CPT Codes

Other CPT Code related to the CPB:

97703

## HCPCS Codes

## HCPCS Codes covered if selection criteria are met:

L0100	Cranial orthosis (helmet), with or without soft interface, molded to patient model
L0110	Cranial orthosis (helmet), with or without soft interface, non-molded
L0112	Cranial cervical orthosis, congenital torticollis type, with or without soft interface material, adjustable range of motion joint, custom fabricated
S1040	Cranial remolding orthosis, rigid, with soft interface material, custom fabricated, includes fitting and adjustment(s)

## ICD-9 Codes

## ICD-9 Codes covered if selection criteria are met:

723.5	Torticollis, unspecified
738.19	Other specified deformity of head
738.2	Acquired deformity of neck
744.89	Other specified anomalies of face and neck
754.0	Certain congenital musculoskeletal deformities of skull, face, and jaw
754.1	Certain congenital anomalies of sternocleidomastoid muscle
756.0	Other injuries to skeleton
767.8	Other specified birth trauma

## Other ICD-9 Codes related to the CPB:


765.00 - 765.19	Extreme immaturity and other preterm infants
V53.7	Fitting and adjustment of orthopedic devices

## The above policy is based on the following references:

1. Moss SD. Nonsurgical, nonorthotic treatment of occipital plagiocephaly: What is the natural history of the misshapen neonatal head? *J Neurosurg.* 1997;87(5):667-670.
2. Fredrick DR, Mulliken JB, Robb RM. Ocular manifestations of deformational frontal plagiocephaly, *J Pediatr Ophthalmol Strabismus.* 1993;30(2):92-95.
3. Ripley CE, Pomatto J, Beals SP, et al. Treatment of positional plagiocephaly with dynamic orthoticcranioplasty. *J Craniofacial Surg.* 1994;5(3):150-159.
4. Orthomerica Products, Inc. The Global Orthotic Solution [website]. Newport Beach, CA: Orthomerica; 2002. Available at: <http://www.orthomerica.com/>. Accessed May 16, 2002.
5. Cranial Technologies, Inc. Welcome to Cranial Technologies, Inc., Manufacturer of the DOC Band [website]. Tempe, AZ: Cranial Technologies; 2002. Available at: <http://www.cranialtech.com/>. Accessed May 16, 2002.

6. Orthomerica Products, Inc. The STARband™ Cranial Remolding Orthosis [website]. Newport Beach, CA: Orthomerica; 2003. Available at: <http://www.orthomerica.com/products/cranial/starband.htm>. Accessed May 13, 2004.
7. Gillette Children's Specialty Healthcare. Craniocap™ [website]. St. Paul, MN: Gillette; 2003, 2004. Available at: <http://www.gillettechildrens.org/>. Accessed May 13, 2004.
8. Persing J, James H, Swanson J, et al. Prevention and management of positional skull deformities in infants. The American Academy of Pediatrics. Clinical report. Guidance for the clinician in rendering pediatric care. Pediatrics. 2003; 112(1):199-202.
9. Institute for Clinical Systems Improvement (ICSI). Cranial orthoses for deformational plagiocephaly. ICSI Technology Assessment Reports. TA #082. Bloomington, MN: ICSI; March 2004. Available at: <http://www.icsi.org/knowledge/detail.asp?catID=107&itemID=1495>. Accessed May 3, 2004.
10. Pollack IF, Losken HW, Fasick P. Diagnosis and management of posterior plagiocephaly. Pediatrics. 1997;99(2):180-185.
11. Wolfe A, Rubenstein A. Congenital, Syntoses. eMedicine Plastic Surgery Topic 190. Omaha, NE: eMedicine.com; updated May 14, 2003. Available at: <http://www.emedicine.com/plastic/topic190.htm>. Accessed December 14, 2004.

 [Email this Page](#)

 [Print this Page](#)

Copyright Aetna Inc. All rights reserved. Clinical Policy Bulletins are developed by Aetna to assist in administering plan benefits and constitute neither offers of coverage nor medical advice. This Clinical Policy Bulletin contains only a partial, general description of plan or program benefits and does not constitute a contract. Aetna does not provide health care services and, therefore, cannot guarantee any results or outcomes. Participating providers are independent contractors in private practice and are neither employees nor agents of Aetna or its affiliates. Treating providers are solely responsible for medical advice and treatment of members. This Clinical Policy Bulletin may be updated and therefore is subject to change.

CPT only copyright 2006 American Medical Association. All Rights Reserved.

Copyright 2001-2007 Aetna Inc. [Web Privacy Statement](#) | [Legal Statement](#) | [Privacy Notices](#) | [Member Disclosure](#)