Clinical Guideline Title: Therapeutic Exercise Utilization (97110)

<table>
<thead>
<tr>
<th>History:</th>
<th>Effective Date:</th>
<th>4/20/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Revision Date:</td>
<td>4/20/17</td>
<td></td>
</tr>
<tr>
<td>Last Review Date:</td>
<td>4/20/17</td>
<td></td>
</tr>
</tbody>
</table>

Responsible Area/Individual: Utilization Management / Chief Clinical Officer

Purpose: To apply reasonable criteria to support on the utilization of therapeutic exercise procedures in the management of acute musculoskeletal conditions.

Regulation/Reference (if applicable): 2016 ChiroCode Deskbook

Guideline:
Fulcrum Health, Inc. (Fulcrum) has developed this guideline to support the utilization of therapeutic exercises for the management of musculoskeletal conditions when the application of the service is consistent with a best-practice approach to achieve an optimal outcome for the patient.

Definitions:
Therapeutic exercise (CPT 97110) incorporates one parameter (strength, endurance, range of motion or flexibility) to one or more areas of the body. Examples include, treadmill (for endurance) isokinetic exercise (for range of motion), lumbar stabilization exercise (for flexibility), and gymnastic ball (for stretching and strengthening). This service requires direct one-on-one contact with the provider and is time-based and may be billed at 15 minute increments.

A minimum of **8 minutes contact time** is required to satisfy 1 billable unit.

Position:
Therapeutic exercise utilized to promote overall fitness, flexibility, endurance enhancement, aerobic conditioning, or weight loss is not a covered benefit under the current consumer Certificate of Benefit. Due to the cognitive and reactive requirements involved with this service, it is unlikely that this service could be supported for any pediatric patient 2 years old or younger.
**Procedure:**

Therapeutic exercises may be clinically appropriate and/or necessary in the management of musculoskeletal conditions when:

- The service falls within the definition of the 97110 code for an NMS condition
- There is direct one on one contact with the doctor
- Time requirement is met
- Documentation clearly states the rationale for use:
  - Utilization will improve the subjective/objective/functional deficits.
  - Location of the service

Therapeutic exercises are considered **NOT** to be clinically appropriate and/or necessary for the management of musculoskeletal conditions when:

- Contraindications exist to the application
- Risks outweigh patient safety by the application of the service
- Used to promote overall fitness, flexibility
- Used to enhance endurance or aerobic conditioning
- Used for weight loss
- Used for patients 2 years old or younger
- Used largely for the comfort and convenience of the patient

**Note:**

Provider should verify patient coverage prior to the rendering of service, not all certificates of coverage include payment for the 97110 service.

**Reference/Attachments:**


**Document History:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/8/2017</td>
<td>New Document</td>
</tr>
</tbody>
</table>