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PROVIDER BULLETIN

TOPIC: Bone Growth Stimulation (BGS)

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Based on review of current literature, there is evidence that bone growth stimulation is effective in specific situations. For BGS used as an adjunct to another treatment, the primary treatment **must be a covered service**.

- Electrical non-invasive and invasive stimulators are covered only for the following indications:
 - Non-union of long bone fractures (3 or more months ceased healing, minimum of 2 radiographs separated by a minimum of 90 days prior to the start of the treatment);
 - Failed fusion, where a minimum of 9 months has elapsed since the last surgery; or adjunct to fusion for patients with a previously failed fusion and high risk of pseudarthrosis at the same site or for multiple level fusion involving 3 or more vertebrae (e.g. L3-L5, L4-S1); and
 - Congenital pseudarthrosis (non-invasive only).
- Ultrasonic stimulator indications:
 - Non-union fractures confirmed by 2 sets of radiographs minimum of 90 days apart prior to the start of the treatment with written physician interpretation of no clinically significant evidence of fracture healing.
 - Fresh fractures in patients at high risk of delayed healing or non-union. Examples of high risk comorbidities may include: diabetes, smoking, obesity, or osteoporosis.
 - As medically indicated per physician notes
- Non-covered indications include:
 - Non-union of skull, vertebrae or tumor related;
 - Ultrasonic stimulators may not be used concurrently with other non-invasive osteogenic devices;
 - Ultrasonic stimulators for delayed fractures

Definition of **delayed union**: fracture that does not achieve union within the anticipated timeframe for a given type of fracture. Generally, fractures that do not heal within 3 to 9 months are considered delayed unions.



