



Cervical Traction Required Documentation for Insurance/Medicare

The Medical Record MUST document BOTH:

1. The beneficiary has a musculoskeletal or neurologic impairment requiring traction equipment; and
2. The appropriate use of a home cervical traction device has been demonstrated to the beneficiary and they tried and tolerated the selected device.

MUST DOCUMENT ONE (1) OF THE FOLLOWING CRITERIA:

- A diagnosis of TMJ dysfunction and has received treatment for the TMJ condition; or
- A distortion of the lower jaw or neck anatomy such that a chin halter is unable to be utilized; or
- The treating physician orders and/or documents the medical necessity for greater than 20 lbs of cervical traction in the HOME setting.