Pelvic Floor Dysfunction

Objective
Pelvic floor dysfunction refers to a wide range of problems that occurs when muscles of the pelvic floor are weak (under active), tight, “overactive,” nonfunctioning (noncontracting/nonrelaxing), or dyssynergic (uncoordinated).

Coverage
Treatment for pelvic floor dysfunction is covered when the member meets the following IS/SI criteria.

Initial Authorization
4 weeks with Assessment in 4 week blocks

Initial Review, All:
• Clinical Presentation > One
  • Bladder > Three
    • Stress/urge urinary incontinence/urgency
    • Increased daytime/nighttime frequency
    • Paruresis
    • Difficulty starting urination, incomplete voiding
    • Dribbling
  • Bowel > One
    • Fecal incontinence
    • Constipation
    • Urgency, frequency or difficulty defecating
    • Staining with voiding
  • Sexual > One (evaluation should include intensity (degree of pain and frequency and duration of pain (does it interfere with ADLs))
    • Pain with initial/during/following penetration
    • Vulvar pain
    • Pain with orgasm

• Rehab potential with expectation for clinical-functional improvement
• Treatment Plan, One:

  Progressive Therapy Program, All
  • Therapeutic exercise for strength/endurance
  • Instruction in home Rx Program
  • Goals, All:
    – Decrease in symptom intensity, frequency and duration
    – Improvement in objective measurements
    – Functional progress
    – Progress towards independence with home exercise program

  Functional Status w/visits, One:
  • No limitations (≤ 2 visits)
  • Minimal functional deficits (≤ 6 visits)
    – Intermittent symptoms with variable intensity
    – Decreased ROM/strength
  • Moderate functional deficits (≤ 8 visits)
    – Consistent symptoms with variable intensity
    – Decreased ROM/strength
  • Severe functional deficits (≤ 12 visits)
    – Unable to complete/avoids ADL/IADL
    – Consistent frequency/intensity of symptoms
    – Decreased ROM/strength

Ongoing Review, All:

• Clinical Presentation > One

  Bladder > Three
  • Stress/urge urinary incontinence/urgency
  • Increased daytime/nighttime frequency
  • Paruresis
  • Difficulty starting urination, incomplete voiding
  • Dribbling

  Bowel > One
  • Fecal incontinence
  • Constipation
  • Urgency, frequency or difficulty defecating
  • Staining with voiding

  Sexual > One (evaluation should include intensity (degree of pain and frequency and duration of pain (does it interfere with ADLs))
  • Pain with initial/during/following penetration
  • Vulvar pain
  • Pain with orgasm

  • Rehab potential based on prior level of function with expectation for clinical or functional improvement
• Patient committed to program participation

• Continue teaching and evaluate knowledge retention for home Rx program

• Partial progress made in meeting treatment goals, Both

+ Improvement in function and reduction in limitations

+ Improvement in function and reduction in limitations
  • Intermittent symptoms with variable intensity
  • Decreased ROM/strength

• Functional Status w/visits, One:

+ No limitations (≤ 2 visits)

+ Minimal functional deficits (≤ 6 visits)
  • Intermittent symptoms with variable intensity
  • Decreased ROM/strength

+ Moderate functional deficits (≤ 8 visits)
  • Consistent symptoms with variable intensity
  • Decreased ROM/strength

+ Severe functional deficits (≤ 12 visits)
  • Unable to complete/avoids ADL/IADL
  • Consistent frequency/intensity of symptoms
  • Decreased ROM/strength

Discharge Review, One:

• New onset or worsening of Sx or findings require reassessment prior to continuation of outpatient rehabilitation program

• Further improvement or integration of skills expected with patient or caregiver adherence to home Rx program

• Goals met, All:

+ Sx or findings, ≥ One:
  • No longer present or new skill acquired
  • Improved ability to manage limitations

+ Independent with home treatment program

• Functional plateau reached since last authorization

• Rehabilitation potential poor, ≥ One

+ Chronic functional loss and maximal functional ability achieved

+ Lack of motivation or refusal to continue home therapy program

+ Unable to learn or participate in a home therapy program
References:


Last Review Date: Jun 8, 2015