



Subject: *Light Box Therapy for Seasonal Affective Disorder*

Number:

Effective date: 02/2001 (original); 01/2003 (revision)

Revision date(s): 12/2003

Note: This is an active policy and is no longer scheduled for routine literature review or revision.

Important note

Even though this policy may indicate that a particular service or supply is considered covered, this conclusion is not based upon the terms of your particular benefit plan. Each benefit plan contains its own specific provisions for coverage and exclusions. Not all benefits that are determined to be medically necessary will be covered benefits under the terms of your benefit plan. You need to consult the *Evidence of Coverage* to determine if there are any exclusions or other benefit limitations applicable to this service or supply. If there is a discrepancy between this policy and your plan of benefits, the provisions of your benefits plan will govern. However, applicable state mandates will take precedence with respect to fully insured plans and self-funded non-ERISA (e.g., government, school boards, church) plans. Unless otherwise specifically excluded, federal mandates will apply to all plans. With respect to Medicare and Medicaid members, this policy will apply unless Medicare and Medicaid policies extend coverage beyond this Medical Policy and Criteria Statement. Medicare and Medicaid policies will only apply to benefits paid for under Medicare or Medicaid rules, and not to any other health benefit plan benefits. The Centers for Medicare and Medicaid's *Coverage Issues Manual* can be found on the following Web site: <http://www.cms.hhs.gov/manuals/pub06pdf/pub06pdf.asp>

Overview

Seasonal Affective Disorder (SAD) is defined as a major recurrent depressive disorder, characterized by a seasonal pattern of depression, usually occurring every year in late fall or winter. SAD can occur in patients with either major depressive disorder or bipolar disorder.

It is believed that SAD is associated with decreases in light exposure during the fall and winter seasons.

Light therapy has been recommended as the first-line treatment for SAD. The most commonly used and studied form of light therapy involves the use of a light box or lamp that administers bright light during a particular time of day, usually in the morning.

This item will be applied towards the durable medical equipment benefit limit.

Policy and criteria

NOTE: Durable medical equipment (DME) requires prior authorization by the plan medical director.

When services are covered:

We cover **light box therapy for SAD** when ALL of the following conditions are met:

- Member is diagnosed with bipolar disorder or recurrent major depression; and
- Member meets DSM-IV criteria for a seasonal mood disorder: at least two years of seasonal depressive episodes which completely remit when daylight increases in the spring and which substantially outnumber any nonseasonal depressive episodes; and
- Member has DME benefit.

Light box therapy requires a high-intensity light unit (e.g., Bio-Light, Brite Lite, Dawn Simulator, etc.). They are not the same as "tanning lights" that give off an entirely different band or spectrum of light.

When services are not covered:

We **do not cover** services when the above criteria are not met **or for any procedures or devices not listed above.**

We **do not cover** services when symptoms may be related to a mood disorder due to a:

- general medical condition; or
- substance-induced; or
- bereavement (the normal reaction to the death of a loved one); or
- related to a psychotic disorder, such as schizoaffective disorder

We **do not cover** extraocular light therapy (application of light to areas of the body other than the retina) for SAD. This service is considered experimental and investigational as its effectiveness has not been established.

We **do not cover** any other types of light therapy of SAD. Many types of lights, such as light visors, overhead light diffuser with a dawn/dusk simulation controller, low dose light and others have been tested and not shown to be as effective as the 10,000-lux fluorescent light (box) used for 30 minutes exposure in the morning.

FCHP products to which this policy applies:

- ⊕ FCHP Direct and FCHP Select Care (HMO)
- ⊕ FCHP Flex Care Direct and Select (POS)
- ⊕ Fallon Preferred Care (PPO)
- ⊕ FCHP MassHealth
- ⊕ Non-Group: FCHP Independent Care, Direct enrollment and Bill-at-home

Medicare plan – *reminder* to refer to CMS for policy and criteria

References

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10. Leppamaki SJ, Partonen TT, Hurme J, et al. Randomized trial of the efficacy of bright-light exposure and aerobic exercise on depressive symptoms and serum lipids. J Clin Psychiatry. 2002;63(4):316-321.
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13. Terman M, Amira L, Terman JS, et al. Predictors of response and nonresponse to light treatment for winter depression. Am J Psychiatry. 1996;153(11):1423-1429.
14. Wileman SM, Eagles JM, Andrew JE, et al. Light therapy for seasonal affective disorder in primary care: Randomised controlled trial. Br J Psychiatry. 2001;178:311-316.

Mandated benefit/Regulatory issues

- Federal
- Commonwealth of Massachusetts
- Medicare – National Policy
- Medicare – Local Medical Review Policy
- Not applicable

Committee review dates:

Technology Assessment Committee: 01/2001

Utilization Management Committee: 06/200

Approved by: Signature on file 12/29/2003
Dennis A. Batey, M.D. Vice President and Chief Medical Officer Date