

Medical Policy



Transcutaneous Electrical Nerve Stimulators (TENS)

▼ Description

A transcutaneous electrical nerve stimulator (TENS) unit is a device which utilizes electrical current delivered through electrodes placed on the surface of the skin to decrease the member's perception of pain by inhibiting the transmission of afferent pain nerve impulses and/or stimulating the release of endorphins. A TENS unit must be distinguished from other electrical stimulators (e.g., neuromuscular stimulators) which are used to directly stimulate muscles and/or motor nerves.

▼ Policy

A TENS is covered for the treatment of members with chronic, intractable pain or acute post-operative pain when one of the following coverage criteria, I-III, are met.

I. Acute Post-operative Pain

TENS is covered for acute post-operative pain. Coverage is limited to 30 days (one month's rental) from the day of surgery. Payment will be made only as a rental.

A TENS unit will be denied as not reasonable and necessary for acute pain (less than three months duration) other than for post-operative pain.

II. Chronic Pain Other than Low Back Pain

TENS is covered for chronic, intractable pain other than chronic low back pain when all of the following criteria must be met:

- The presumed etiology of the pain must be a type that is accepted as responding to TENS therapy. Examples of conditions for which TENS therapy is not considered to be reasonable and necessary are (not all-inclusive):
 - headache
 - visceral abdominal pain
 - pelvic pain
 - temporomandibular joint (TMJ) pain

- The pain must have been present for at least three months
- Other appropriate treatment modalities must have been tried and failed

TENS therapy for chronic pain that does not meet these criteria will be denied as not reasonable and necessary.

III. Chronic Low Back Pain (CLBP)

TENS therapy for CLBP is only covered when all of the following criteria are met:

- The member has one of the diagnosis codes listed in the Diagnosis Codes that Support Medical Necessity section below.
- The member is enrolled in an approved clinical study that meets all of the requirements set out in NCD §160.27 (CMS Internet Only Manual 100-03, Chapter 1). Refer to the APPENDICES section for additional information about approved clinical studies.

TENS therapy for CLBP that does not meet these criteria will be denied as not reasonable and necessary.

General Requirements for chronic pain (II) and CLBP (III)

When used for the treatment of chronic, intractable pain described in section II, the TENS unit must be used by the member on a trial basis for a minimum of one month (30 days), but not to exceed two months. The trial period will be paid as a rental. The trial period must be monitored by the physician to determine the effectiveness of the TENS unit in modulating the pain. For coverage of a purchase, the physician must determine that the member is likely to derive significant therapeutic benefit from continuous use of the unit over a long period of time.

A 4-lead TENS unit may be used with either 2 leads or 4 leads, depending on the characteristics of the member's pain. If it is ordered for use with 4 leads, the medical record must document why 2 leads are insufficient to meet the member's needs.

TENS used for CLBP as described in section III does not require a trial rental period or an assessment of effectiveness by the treating physician. Upon the member's enrollment into an approved study, the TENS is eligible for purchase.

Supplies

Separate allowance will be made for replacement supplies when they are reasonable and necessary and are used with a covered TENS. Usual maximum utilization is:

- 2 TENS leads - a maximum of one unit of A4595 per month
- 4 TENS leads - a maximum of two units of A4595 per month.

If the use of the TENS unit is less than daily, the frequency of billing for the TENS supply code should be reduced proportionally.

Replacement of lead wires (A4557) more often than every 12 months would rarely be reasonable and necessary.

A conductive garment (E0731) used with a TENS unit is rarely reasonable and necessary, but is covered only if all of the following conditions are met:

- It has been prescribed by the treating physician for use in delivering covered TENS treatment
- One of the medical indications outlined below is met:
 - The member cannot manage without the conductive garment because
 - There is such a large area or so many sites to be stimulated and
 - The stimulation would have to be delivered so frequently that it is not feasible to use conventional electrodes, adhesive tapes, and lead wires
 - The member cannot manage without the conductive garment for the treatment of chronic intractable pain because the areas or sites to be stimulated are inaccessible with the use of conventional electrodes, adhesive tapes, and lead wires
 - The member has a documented medical condition, such as skin problems, that preclude the application of conventional electrodes, adhesive tapes, and lead wires
 - The member requires electrical stimulation beneath a cast to treat chronic intractable pain.

A conductive garment is not covered for use with a TENS device during the trial period unless:

- The member has a documented skin problem prior to the start of the trial period; and

- The TENS is reasonable and necessary for the member.

If the criteria above are not met for E0731, it will be denied as not reasonable and necessary.

Reimbursement for supplies is contingent upon use with a covered TENS unit. Claims for TENS supplies provided when there is no covered TENS unit will be denied as not reasonable and necessary.

Effective for claims with dates of service on or after June 8, 2012 supplies provided for use with a previously covered TENS unit used for CLBP (not as part of an approved study) are not eligible for reimbursement. These supply claims will be denied as not reasonable and necessary.

CPT/HCPCS Codes

Group 1 Paragraph:

The appearance of a code in this section does not necessarily indicate coverage.

HCPCS MODIFIERS:

EY - No physician or other health care provider order for this item or service
 GA – Waiver of liability statement issued as required by payer policy, individual case

GZ – Item or service expected to be denied as not reasonable and necessary

KX - Requirements specified in the medical policy have been met

Q0 (zero) - Investigational clinical service provided in a clinical research study that is in an approved clinical research study

HCPCS CODES:

Group 1 Codes:

Code	Description
E0720	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, TWO LEAD, LOCALIZED STIMULATION
E0730	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, FOUR OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION
E0731	FORM FITTING CONDUCTIVE GARMENT FOR DELIVERY OF TENS OR NMES (WITH CONDUCTIVE FIBERS SEPARATED FROM THE PATIENT'S SKIN BY LAYERS OF FABRIC)

Group 2 Paragraph: SUPPLIES

Group 2 Codes:

Code	Description
A4557	LEAD WIRES, (E.G., APNEA MONITOR), PER PAIR
A4595	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G. TENS, NMES)

ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph: For TENS (E0720, E0730) used for CLBP when the approved clinical study (criterion III) requirements are met.

Group 1 Codes:

ICD-10 Code	Description
M40.36	Flatback syndrome, lumbar region
M40.37	Flatback syndrome, lumbosacral region
M40.46	Postural lordosis, lumbar region
M40.47	Postural lordosis, lumbosacral region
M40.56	Lordosis, unspecified, lumbar region
M40.57	Lordosis, unspecified, lumbosacral region
M41.26	Other idiopathic scoliosis, lumbar region
M41.27	Other idiopathic scoliosis, lumbosacral region
M41.56	Other secondary scoliosis, lumbar region
M41.57	Other secondary scoliosis, lumbosacral region
M42.16	Adult osteochondrosis of spine, lumbar region
M42.17	Adult osteochondrosis of spine, lumbosacral region
M43.06	Spondylolysis, lumbar region
M43.07	Spondylolysis, lumbosacral region
M43.16	Spondylolisthesis, lumbar region
M43.17	Spondylolisthesis, lumbosacral region
M43.26	Fusion of spine, lumbar region
M43.27	Fusion of spine, lumbosacral region
M43.5X6	Other recurrent vertebral dislocation, lumbar region
M43.5X7	Other recurrent vertebral dislocation, lumbosacral region
M43.8X6	Other specified deforming dorsopathies, lumbar region
M43.8X7	Other specified deforming dorsopathies, lumbosacral region

M47.16 Other spondylosis with myelopathy, lumbar region
M47.26 Other spondylosis with radiculopathy, lumbar region
M47.27 Other spondylosis with radiculopathy, lumbosacral region
M47.816 Spondylosis without myelopathy or radiculopathy, lumbar region
M47.817 Spondylosis without myelopathy or radiculopathy, lumbosacral region
M47.896 Other spondylosis, lumbar region
M47.897 Other spondylosis, lumbosacral region
M48.06 Spinal stenosis, lumbar region
M48.07 Spinal stenosis, lumbosacral region
M48.16 Ankylosing hyperostosis [Forestier], lumbar region
M48.17 Ankylosing hyperostosis [Forestier], lumbosacral region
M48.26 Kissing spine, lumbar region
M48.27 Kissing spine, lumbosacral region
M48.36 Traumatic spondylopathy, lumbar region
M48.37 Traumatic spondylopathy, lumbosacral region
M48.8X6 Other specified spondylopathies, lumbar region
M48.8X7 Other specified spondylopathies, lumbosacral region
M51.06 Intervertebral disc disorders with myelopathy, lumbar region
M51.16 Intervertebral disc disorders with radiculopathy, lumbar region
M51.17 Intervertebral disc disorders with radiculopathy, lumbosacral region
M51.26 Other intervertebral disc displacement, lumbar region
M51.27 Other intervertebral disc displacement, lumbosacral region
M51.36 Other intervertebral disc degeneration, lumbar region
M51.37 Other intervertebral disc degeneration, lumbosacral region
M51.46 Schmorl's nodes, lumbar region
M51.47 Schmorl's nodes, lumbosacral region
M51.86 Other intervertebral disc disorders, lumbar region
M51.87 Other intervertebral disc disorders, lumbosacral region
M53.2X6 Spinal instabilities, lumbar region
M53.2X7 Spinal instabilities, lumbosacral region
M53.86 Other specified dorsopathies, lumbar region
M53.87 Other specified dorsopathies, lumbosacral region
M54.16 Radiculopathy, lumbar region
M54.17 Radiculopathy, lumbosacral region
M54.30 Sciatica, unspecified side
M54.31 Sciatica, right side
M54.32 Sciatica, left side

M54.40 Lumbago with sciatica, unspecified side

M54.41 Lumbago with sciatica, right side

M54.42 Lumbago with sciatica, left side

M54.5 Low back pain

S32.000A Wedge compression fracture of unspecified lumbar vertebra, initial encounter for closed fracture

S32.000B Wedge compression fracture of unspecified lumbar vertebra, initial encounter for open fracture

S32.000D Wedge compression fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing

S32.000G Wedge compression fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing

S32.000K Wedge compression fracture of unspecified lumbar vertebra, subsequent encounter for fracture with nonunion

S32.000S Wedge compression fracture of unspecified lumbar vertebra, sequela

S32.001A Stable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture

S32.001B Stable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture

S32.001D Stable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing

S32.001G Stable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing

S32.001K Stable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with nonunion

S32.001S Stable burst fracture of unspecified lumbar vertebra, sequela

S32.002A Unstable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture

S32.002B Unstable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture

S32.002D Unstable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing

S32.002G Unstable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing

S32.002K Unstable burst fracture of unspecified lumbar vertebra, subsequent encounter for fracture with nonunion

S32.002S Unstable burst fracture of unspecified lumbar vertebra, sequela

S32.008A Other fracture of unspecified lumbar vertebra, initial encounter for closed fracture

S32.008B Other fracture of unspecified lumbar vertebra, initial encounter for

- open fracture
- S32.008D Other fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.008G Other fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.008K Other fracture of unspecified lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.008S Other fracture of unspecified lumbar vertebra, sequela
- S32.009A Unspecified fracture of unspecified lumbar vertebra, initial encounter for closed fracture
- S32.009B Unspecified fracture of unspecified lumbar vertebra, initial encounter for open fracture
- S32.009D Unspecified fracture of unspecified lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.009G Unspecified fracture of unspecified lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.009K Unspecified fracture of unspecified lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.009S Unspecified fracture of unspecified lumbar vertebra, sequela
- S32.010A Wedge compression fracture of first lumbar vertebra, initial encounter for closed fracture
- S32.010B Wedge compression fracture of first lumbar vertebra, initial encounter for open fracture
- S32.010D Wedge compression fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.010G Wedge compression fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.010K Wedge compression fracture of first lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.010S Wedge compression fracture of first lumbar vertebra, sequela
- S32.011A Stable burst fracture of first lumbar vertebra, initial encounter for closed fracture
- S32.011B Stable burst fracture of first lumbar vertebra, initial encounter for open fracture
- S32.011D Stable burst fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.011G Stable burst fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.011K Stable burst fracture of first lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.011S Stable burst fracture of first lumbar vertebra, sequela

- S32.012A Unstable burst fracture of first lumbar vertebra, initial encounter for closed fracture
- S32.012B Unstable burst fracture of first lumbar vertebra, initial encounter for open fracture
- S32.012D Unstable burst fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.012G Unstable burst fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.012K Unstable burst fracture of first lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.012S Unstable burst fracture of first lumbar vertebra, sequela
- S32.018A Other fracture of first lumbar vertebra, initial encounter for closed fracture
- S32.018B Other fracture of first lumbar vertebra, initial encounter for open fracture
- S32.018D Other fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.018G Other fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.018K Other fracture of first lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.018S Other fracture of first lumbar vertebra, sequela
- S32.019A Unspecified fracture of first lumbar vertebra, initial encounter for closed fracture
- S32.019B Unspecified fracture of first lumbar vertebra, initial encounter for open fracture
- S32.019D Unspecified fracture of first lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.019G Unspecified fracture of first lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.019K Unspecified fracture of first lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.019S Unspecified fracture of first lumbar vertebra, sequela
- S32.020A Wedge compression fracture of second lumbar vertebra, initial encounter for closed fracture
- S32.020B Wedge compression fracture of second lumbar vertebra, initial encounter for open fracture
- S32.020D Wedge compression fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.020G Wedge compression fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing

- S32.020K Wedge compression fracture of second lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.020S Wedge compression fracture of second lumbar vertebra, sequela
- S32.021A Stable burst fracture of second lumbar vertebra, initial encounter for closed fracture
- S32.021B Stable burst fracture of second lumbar vertebra, initial encounter for open fracture
- S32.021D Stable burst fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.021G Stable burst fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.021K Stable burst fracture of second lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.021S Stable burst fracture of second lumbar vertebra, sequela
- S32.022A Unstable burst fracture of second lumbar vertebra, initial encounter for closed fracture
- S32.022B Unstable burst fracture of second lumbar vertebra, initial encounter for open fracture
- S32.022D Unstable burst fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.022G Unstable burst fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.022K Unstable burst fracture of second lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.022S Unstable burst fracture of second lumbar vertebra, sequela
- S32.028A Other fracture of second lumbar vertebra, initial encounter for closed fracture
- S32.028B Other fracture of second lumbar vertebra, initial encounter for open fracture
- S32.028D Other fracture of second lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.028G Other fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.028K Other fracture of second lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.028S Other fracture of second lumbar vertebra, sequela
- S32.029A Unspecified fracture of second lumbar vertebra, initial encounter for closed fracture
- S32.029B Unspecified fracture of second lumbar vertebra, initial encounter for open fracture
- S32.029D Unspecified fracture of second lumbar vertebra, subsequent

- encounter for fracture with routine healing

S32.029G Unspecified fracture of second lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.029K Unspecified fracture of second lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.029S Unspecified fracture of second lumbar vertebra, sequela
- S32.030A Wedge compression fracture of third lumbar vertebra, initial encounter for closed fracture
- S32.030B Wedge compression fracture of third lumbar vertebra, initial encounter for open fracture
- S32.030D Wedge compression fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.030G Wedge compression fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.030K Wedge compression fracture of third lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.030S Wedge compression fracture of third lumbar vertebra, sequela
- S32.031A Stable burst fracture of third lumbar vertebra, initial encounter for closed fracture
- S32.031B Stable burst fracture of third lumbar vertebra, initial encounter for open fracture
- S32.031D Stable burst fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.031G Stable burst fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.031K Stable burst fracture of third lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.031S Stable burst fracture of third lumbar vertebra, sequela
- S32.032A Unstable burst fracture of third lumbar vertebra, initial encounter for closed fracture
- S32.032B Unstable burst fracture of third lumbar vertebra, initial encounter for open fracture
- S32.032D Unstable burst fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.032G Unstable burst fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.032K Unstable burst fracture of third lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.032S Unstable burst fracture of third lumbar vertebra, sequela
- S32.038A Other fracture of third lumbar vertebra, initial encounter for closed fracture

- S32.038B Other fracture of third lumbar vertebra, initial encounter for open fracture
- S32.038D Other fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.038G Other fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.038K Other fracture of third lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.038S Other fracture of third lumbar vertebra, sequela
- S32.039A Unspecified fracture of third lumbar vertebra, initial encounter for closed fracture
- S32.039B Unspecified fracture of third lumbar vertebra, initial encounter for open fracture
- S32.039D Unspecified fracture of third lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.039G Unspecified fracture of third lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.039K Unspecified fracture of third lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.039S Unspecified fracture of third lumbar vertebra, sequela
- S32.040A Wedge compression fracture of fourth lumbar vertebra, initial encounter for closed fracture
- S32.040B Wedge compression fracture of fourth lumbar vertebra, initial encounter for open fracture
- S32.040D Wedge compression fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.040G Wedge compression fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.040K Wedge compression fracture of fourth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.040S Wedge compression fracture of fourth lumbar vertebra, sequela
- S32.041A Stable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
- S32.041B Stable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
- S32.041D Stable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.041G Stable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.041K Stable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with nonunion

- S32.041S Stable burst fracture of fourth lumbar vertebra, sequela
- S32.042A Unstable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture
- S32.042B Unstable burst fracture of fourth lumbar vertebra, initial encounter for open fracture
- S32.042D Unstable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.042G Unstable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.042K Unstable burst fracture of fourth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.042S Unstable burst fracture of fourth lumbar vertebra, sequela
- S32.048A Other fracture of fourth lumbar vertebra, initial encounter for closed fracture
- S32.048B Other fracture of fourth lumbar vertebra, initial encounter for open fracture
- S32.048D Other fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.048G Other fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.048K Other fracture of fourth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.048S Other fracture of fourth lumbar vertebra, sequela
- S32.049A Unspecified fracture of fourth lumbar vertebra, initial encounter for closed fracture
- S32.049B Unspecified fracture of fourth lumbar vertebra, initial encounter for open fracture
- S32.049D Unspecified fracture of fourth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.049G Unspecified fracture of fourth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.049K Unspecified fracture of fourth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.049S Unspecified fracture of fourth lumbar vertebra, sequela
- S32.050A Wedge compression fracture of fifth lumbar vertebra, initial encounter for closed fracture
- S32.050B Wedge compression fracture of fifth lumbar vertebra, initial encounter for open fracture
- S32.050D Wedge compression fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.050G Wedge compression fracture of fifth lumbar vertebra, subsequent

- encounter for fracture with delayed healing
- S32.050K Wedge compression fracture of fifth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.050S Wedge compression fracture of fifth lumbar vertebra, sequela
- S32.051A Stable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
- S32.051B Stable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
- S32.051D Stable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.051G Stable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.051K Stable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.051S Stable burst fracture of fifth lumbar vertebra, sequela
- S32.052A Unstable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture
- S32.052B Unstable burst fracture of fifth lumbar vertebra, initial encounter for open fracture
- S32.052D Unstable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.052G Unstable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.052K Unstable burst fracture of fifth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.052S Unstable burst fracture of fifth lumbar vertebra, sequela
- S32.058A Other fracture of fifth lumbar vertebra, initial encounter for closed fracture
- S32.058B Other fracture of fifth lumbar vertebra, initial encounter for open fracture
- S32.058D Other fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.058G Other fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.058K Other fracture of fifth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.058S Other fracture of fifth lumbar vertebra, sequela
- S32.059A Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture
- S32.059B Unspecified fracture of fifth lumbar vertebra, initial encounter for open fracture

- S32.059D Unspecified fracture of fifth lumbar vertebra, subsequent encounter for fracture with routine healing
- S32.059G Unspecified fracture of fifth lumbar vertebra, subsequent encounter for fracture with delayed healing
- S32.059K Unspecified fracture of fifth lumbar vertebra, subsequent encounter for fracture with nonunion
- S32.059S Unspecified fracture of fifth lumbar vertebra, sequela
- S33.0XXA Traumatic rupture of lumbar intervertebral disc, initial encounter
- S33.0XXD Traumatic rupture of lumbar intervertebral disc, subsequent encounter
- S33.0XXS Traumatic rupture of lumbar intervertebral disc, sequela
- S33.100A Subluxation of unspecified lumbar vertebra, initial encounter
- S33.100D Subluxation of unspecified lumbar vertebra, subsequent encounter
- S33.100S Subluxation of unspecified lumbar vertebra, sequela
- S33.101A Dislocation of unspecified lumbar vertebra, initial encounter
- S33.101D Dislocation of unspecified lumbar vertebra, subsequent encounter
- S33.101S Dislocation of unspecified lumbar vertebra, sequela
- S33.110A Subluxation of L1/L2 lumbar vertebra, initial encounter
- S33.110D Subluxation of L1/L2 lumbar vertebra, subsequent encounter
- S33.110S Subluxation of L1/L2 lumbar vertebra, sequela
- S33.111A Dislocation of L1/L2 lumbar vertebra, initial encounter
- S33.111D Dislocation of L1/L2 lumbar vertebra, subsequent encounter
- S33.111S Dislocation of L1/L2 lumbar vertebra, sequela
- S33.120A Subluxation of L2/L3 lumbar vertebra, initial encounter
- S33.120D Subluxation of L2/L3 lumbar vertebra, subsequent encounter
- S33.120S Subluxation of L2/L3 lumbar vertebra, sequela
- S33.121A Dislocation of L2/L3 lumbar vertebra, initial encounter
- S33.121D Dislocation of L2/L3 lumbar vertebra, subsequent encounter
- S33.121S Dislocation of L2/L3 lumbar vertebra, sequela
- S33.130A Subluxation of L3/L4 lumbar vertebra, initial encounter
- S33.130D Subluxation of L3/L4 lumbar vertebra, subsequent encounter
- S33.130S Subluxation of L3/L4 lumbar vertebra, sequela
- S33.131A Dislocation of L3/L4 lumbar vertebra, initial encounter
- S33.131D Dislocation of L3/L4 lumbar vertebra, subsequent encounter
- S33.131S Dislocation of L3/L4 lumbar vertebra, sequela
- S33.140A Subluxation of L4/L5 lumbar vertebra, initial encounter
- S33.140D Subluxation of L4/L5 lumbar vertebra, subsequent encounter
- S33.140S Subluxation of L4/L5 lumbar vertebra, sequela
- S33.141A Dislocation of L4/L5 lumbar vertebra, initial encounter

S33.141D Dislocation of L4/L5 lumbar vertebra, subsequent encounter
S33.141S Dislocation of L4/L5 lumbar vertebra, sequela
S33.5XXA Sprain of ligaments of lumbar spine, initial encounter
S33.5XXD Sprain of ligaments of lumbar spine, subsequent encounter
S33.5XXS Sprain of ligaments of lumbar spine, sequela
S33.6XXA Sprain of sacroiliac joint, initial encounter
S33.6XXD Sprain of sacroiliac joint, subsequent encounter
S33.6XXS Sprain of sacroiliac joint, sequela
S34.21XA Injury of nerve root of lumbar spine, initial encounter
S34.21XD Injury of nerve root of lumbar spine, subsequent encounter
S34.21XS Injury of nerve root of lumbar spine, sequela
S34.22XA Injury of nerve root of sacral spine, initial encounter
S34.22XD Injury of nerve root of sacral spine, subsequent encounter
S34.22XS Injury of nerve root of sacral spine, sequela
S39.002A Unspecified injury of muscle, fascia and tendon of lower back, initial encounter
S39.002D Unspecified injury of muscle, fascia and tendon of lower back, subsequent encounter
S39.002S Unspecified injury of muscle, fascia and tendon of lower back, sequela
S39.012A Strain of muscle, fascia and tendon of lower back, initial encounter
S39.012D Strain of muscle, fascia and tendon of lower back, subsequent encounter
S39.012S Strain of muscle, fascia and tendon of lower back, sequela
S39.022A Laceration of muscle, fascia and tendon of lower back, initial encounter
S39.022D Laceration of muscle, fascia and tendon of lower back, subsequent encounter
S39.022S Laceration of muscle, fascia and tendon of lower back, sequela
S39.092A Other injury of muscle, fascia and tendon of lower back, initial encounter
S39.092D Other injury of muscle, fascia and tendon of lower back, subsequent encounter
S39.092S Other injury of muscle, fascia and tendon of lower back, sequela
Z00.6 Encounter for examination for normal comparison and control in clinical research program

Group 2 Paragraph: For other uses of TENS (acute post-operative pain (criterion I), chronic pain other than CLBP (criterion II)), there are no specified diagnosis codes.

Group 2 Codes: N/A

ICD-10 Codes that DO NOT Support Medical Necessity

Paragraph: For TENS used for CLBP as part of an approved study, all codes not specified above

▼ Documentation Requirements

Items in this policy may be subject to the Affordable Care Act (ACA) 6407 requirements.

The Affordable Care Act (ACA) 6407 requires that the treating physician conduct a face-to-face examination during the six month period preceding the written order. The documentation must be received by the provider prior to delivery for certain DME items. The documentation must describe a medical condition for which the DME is being prescribed.

▼ Important Note:

Northwood's Medical Policies are developed to assist Northwood in administering plan benefits and determining whether a particular DMEPOS product or service is reasonable and necessary. Equipment that is used primarily and customarily for a non-medical purpose is not considered durable medical equipment.

Coverage determinations are made on a case-by-case basis and are subject to all of the terms, conditions, limitations, and exclusions of the member's contract including medical necessity requirements.

The conclusion that a DMEPOS product or service is reasonable and necessary does not constitute coverage. The member's contract defines which DMEPOS product or service is covered, excluded or limited. The policies provide for clearly written, reasonable and current criteria that have been approved by Northwood's Medical Director.

The clinical criteria and medical policies provide guidelines for determining the medical necessity for specific DMEPOS products or services. In all cases, final benefit determinations are based on the applicable contract language. To the extent there are any conflicts between medical policy guidelines and applicable contract language, the contract language prevails. Medical policy is not intended to override the policy that defines the member's benefits, nor is it intended to dictate to providers how to direct care. Northwood Medical policies shall not be interpreted to limit the benefits afforded to Medicare or Medicaid members by law

and regulation and Northwood will use the applicable state requirements to determine required quantity limit guidelines.

Northwood’s policies do not constitute medical advice. Northwood does not provide or recommend treatment to members. Members should consult with their treating physician in connection with diagnosis and treatment decisions.

▼ **References**

TENS – Cefaly Reference

Aetna: Migraine and Cluster Headache: Nonsurgical Management

http://www.aetna.com/cpb/medical/data/400_499/0462.html

Schoenen J, Vandersmissen B, Jeanette S, et al. Migraine prevention with a supraorbital transcutaneous stimulator: A randomized controlled trial. *Neurology*. 2013;80(8):697-704.

E0766

BCBSAL: Tumor-Treating Fields Therapy for Glioblastoma

<https://www.bcbsal.org/providers/policies/final/536.pdf>

Centers for Medicare and Medicaid Services, Medicare Coverage Database, National Coverage Documents; October 2015.

National Government Services, Inc. Jurisdiction B DME MAC, Transcutaneous Electrical Nerve Stimulators (TENS). Local Coverage Determination No. L33802; revised date October 1, 2015.

National Heritage Insurance Company (NHIC), Transcutaneous Electrical Nerve Stimulators (TENS). Local Coverage Determination No. L11506. Durable Medical Equipment Medicare Administrative Carrier Jurisdiction A. Chico, CA: NHIC; revised January 1, 2011.

Applicable URAC Standard

Core 8	Staff operational tools and support
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Change/Authorization History

Revision Number	Date	Description of Change	Prepared / Reviewed by	Approved by	Review Date:
A	11-20-06	Initial Release	Rosanne Brugnani	Ken Fasse	n/a
01		Annual Review – no changes	Susan Glomb	Ken Fasse	Dec.2008

02	12-04-09	Revised- Additional supply quantities denial statement. Added: GA and GZ modifiers. Revised KX modifier. Added instructions for such a time when modifiers are implemented.	Susan Glomb	Ken Fasse	
03	12-22-09	Annual Review/ no changes	Susan Glomb	Ken Fasse	Dec.2009
04	12-03-10	Annual Review/ no changes	Susan Glomb	Ken Fasse	Dec.2010
05	07-20-11	Added Important Note to all Medical Policies	Susan Glomb	Dr. B. Almasri	
06	11-10-11	Annual Review. Added References to Policy	Susan Glomb	Dr. B. Almasri	Nov. 2011
07	04-04-12	Added reference to NH Medicaid	Susan Glomb	Dr. B. Almasri	
08	12-3-12	Annual Review – No changes	Susan Glomb	Dr. B. Almasri	Dec 12
09	12-30-13	Annual review. No changes	Susan Glomb	Dr. B. Almasri	
10	10-06-14	Added A9270- Cephaly device, which is a TENS that is applied to the forehead using a self-adhesive electrode positioned bilaterally over the upper branches of the trigeminal nerve. Non covered for use in the prophylactic treatment of episodic migraine headache.	Susan Glomb	Dr. B. Almasri	
11	11-20-14	Annual Review. Policy updated with new code effective 1-1-14 E0766 which is an Electrical Stimulation Device used for Cancer Treatment and considered experimental/investigational and not covered.. See above for an additional change which included the addition of A9270 Cephaly device. Also added: Items in this policy may be subject to the Affordable Care Act (ACA) 6407 requirements.	Susan Glomb	Dr. B. Almasri	
12	12-17-15	Annual Review. Updated policy with Medicare policy criteria. Added ICD-10 codes. References updated.	Susan Glomb	Dr. B. Almasri	