

TENS Coding Procedure

TENS

Transcutaneous Electrical Nerve Stimulation (TENS) is a trusted, clinically-proven, noninvasive therapy used for the management of, and relief from, chronic (long-term) intractable pain and post-surgical and post-trauma acute pain.

Indications for TENS

- Relief of chronic (long-term) intractable pain
- Reduce Muscle Guarding
- Relief of post-surgical acute pain
- Relief of post-trauma acute pain

Documentation - to ensure the likelihood of reimbursement, justification of medical necessity for TENS must be substantiated; the following documentation should be provided:

- Letter of Medical Necessity (prescription, diagnosis codes, ABN etc.)
- Treatment Records should include (if applicable):
 1. Therapy History – including records relative to treatment
 2. Presenting Symptoms and Complaints
 3. Diagnosis of Condition(s)
 4. Lab Test Results
 5. X-Rays/MRIs
 6. Patient Follow-Up Progress (i.e., successful use, compliance, etc.)
 7. Recommended Plan of Care

Ultimately, the clinician must exercise his or her own judgment when documenting treatment plans assessment.

Please contact Criterion if any of the above forms are required. A Criterion Representative will contact you directly if additional information regarding claims submission is required.

See Following Page for TENS Codes

TENS Codes

| TENS | ICD-9 Code |
|--|-------------------|
| Unit Code | |
| TENS Unit | E0730 |
| **see following page for other applicable codes | |
| Conditions - Neck and Back | |
| Cervical Spondylosis | 721 |
| Lumbosacral Spondylosis | 721.3 |
| Cervical Disc Displacement | 722 |
| Lumbar Disc Displacement | 722.1 |
| Cervical Disc Degeneration | 722.4 |
| Lumbar/Lumbosacral Disc Degeneration | 722.52 |
| Disc Degeneration | 722.6 |
| Post Laminectomy Syndrome | 722.83 |
| Cervicalgia | 723.1 |
| Brachial Neuritis | 723.4 |
| Spinal Stenosis/Lumbar | 724.02 |
| Pain in Thoracic Spine | 724.1 |
| Lumbago | 724.2 |
| Sciatica | 724.3 |
| Lumbosacral Neuritis | 724.4 |
| Backache | 724.5 |
| Other Back Symptoms | 724.8 |
| Myalgia/Myositis | 729.1 |
| Neuralgia/Neuritis | 729.2 |
| Sprain/Thoracic Region | 847.1 |
| Sprain/Lumbar Region | 847.2 |
| Conditions - Upper Extremity | |
| Joint Pain/Shoulder | 719.41 |
| Lateral Epicondylitis | 726.32 |
| Pain in Limb | 729.5 |
| Shoulder Region DIS NEC | 726.2 |
| Sprain/ Rotator Cuff | 840.4 |
| Sprain/Supraspinatus | 840.6 |
| Conditions - Lower Extremity | |
| Chondromalacia Patella | 717.7 |
| Joint Pain/Leg | 719.46 |
| Joint Pain/Pelvis | 719.45 |
| Local Osteoarthritis/Leg | 715.16 |
| Osteoarthritis/Leg | 715.96 |
| Pain in Limb | 729.5 |
| Sprain/Cruciate Ligament (Knee) | 844.2 |
| Other Conditions | |
| Muscle/Ligament DIS NEC | 728.9 |
| Myalgia/Myositis | 729.1 |
| Neuralgia/Neuritis NOS | 729.2 |
| Pain in Limb | 729.5 |
| Serum Reaction | 999.5 |
| Post Surgical State | V45.89 |
| **IFC and HVPC are both billed as TENS | |

Other Applicable Billing Codes:

- **97002** – Physical therapy re-evaluation
- **64550** – Application of surface (Transcutaneous) Neurostimulator – TENS / NMES. This is commonly referred to as “fitting”. This is when you instruct the patient as to where to place electrodes (box in area of treatment) and inform them of warnings, etc.
- **97032** – Application of a modality to one or more areas; **electrical stimulation** (manual), each 8-20 minutes (per area) [Modality used to apply electrical current to a specific area. Attended electrical stimulation is also referred to as manual stimulation. Attended stimulation calls for the application of stimulation for shorter or more specific time frames and at varying degrees of current.] *Example: If patient has two areas of pain (i.e. cervical and lumbar) you would spend 8-20 minutes on each area and bill for your time spent on each area.*
- **97014** – Electrical stimulation (unattended) – (one or more areas) [The application of electrical stimulation to specific areas. The term unattended means that the patient is positioned and the appropriate type of stimulation is applied to an area, over a specific time period. Nerve and muscle stimulation can be useful in any disorder in which the patient has lost or never had adequate voluntary control over skeletal muscle. Until such time as the patient achieves useful control, it is most helpful to use this type of stimulation along with other interventions such as passive exercise. *Example: If patient has two areas of pain (i.e. cervical and lumbar) you would spend 8-20 minutes on each area and bill for your time spent on each area.*

Criterion has compiled all applicable coding information regarding Criterion Products for your convenience. The provider is responsible for determining coverage, submitting appropriate codes, modifiers and charges for the services rendered. The clinician must use independent judgment when deciding which codes most accurately describe the products and/or services provided.

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