Policy References: Local Coverage Determination Transcutaneous Electrical Nerve Stimulators (TENS) (L33802) and Policy Article (A52520)

Documentation References: Standard Documentation Requirements Policy Article (PA) A55426

The treating clinician must complete the following items:

- Conduct and document a Face-to-Face Evaluation (FTF)
- Complete a 5 Element Order (5EO)
- Sign and date a detailed written order (DWO)
- Medical record documentation requirements (see below)

**Medical Documentation**

**TENS for Acute Post-Operative Pain**

- Only covered for 30 days from the day of surgery
- Record indicates date of the surgery, nature of surgery, and location and severity of pain

**TENS for Chronic pain other than low back pain**

- Etiology of pain is generally accepted as responding to TENS therapy.
- Pain has been present for at least three months
- Documentation that other appropriate treatment modalities have been tried and failed.
  - Must initially be ordered on a trial basis for minimum of 30 days but not to exceed two months.
  - If use exceeds 60 days, document that the beneficiary is likely to derive significant therapeutic benefit from continuous use of the unit over a longer period of time.

**TENS for Chronic Low Back Pain (CLBP)**

- Beneficiary has one of the diagnosis codes in the supporting Local Coverage Determination that support the medical necessity of the item (see link above); and
- Beneficiary is enrolled in an approved clinical study that meets all the requirements set out in NCD 160.27 (CMS Internet Only Manual 100-03, Chapter 1).
  - Must be initially be ordered on a trial basis for minimum of 30 days but not to exceed two months.
  - If use exceeds 60 days, document that the beneficiary is likely to derive significant therapeutic benefit from continuous use of the unit over a longer period of time.

**TENS with Four Leads**

- Document why two leads are insufficient to meet the beneficiary’s needs.
- If ordering more than 2 units per month, document medical necessity and provide that information to the supplier along with the order.

**TENS with Two Leads**

- If ordering more than 1 unit per month, document medical necessity and provide that information to the supplier along with the order.

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