	<p>POLICIES AND PROCEDURES</p>
<p>Policy #: 404-1611</p>	<p>Lead Department: Utilization Management</p>
<p>Title: Transcutaneous Electrical Nerve Stimulation (TENS) Unit Authorization Review Process</p>	
<p>Original Date: 04/01/2000</p>	<p>Date Published: 12/10/2024</p>
<p>Approved by: Utilization Management Workgroup (UMWG)</p>	

Purpose:

To describe Central California Alliance for Health’s (the Alliance) authorization review process for a transcutaneous electrical nerve stimulators (TENS) unit.

Policy:

The Alliance considers TENS medically necessary durable medical equipment (DME) when used as an adjunct or as an alternative to the use of pain medications either in the treatment of acute post-operative pain in the first 30 days after surgery, or for certain types of chronic, intractable pain not adequately responsive to other methods of treatment including, as appropriate, physical therapy and pharmacotherapy. However, TENS is considered investigational for acute pain (less than 3 months duration) other than post-operative pain. TENS is also considered investigational for acute and chronic headaches, deep abdominal pain, hip fracture pain, neuropathic pain, pelvic pain, temporomandibular joint (TMJ) pain, neck pain, shoulder pain, elbow pain or wrist pain because there is inadequate scientific evidence to support its efficacy for these specific types of pain.


When the Alliance determines that a TENS unit is medically necessary, it will authorize a 1 month rental on a *trial* basis. If the TENS unit has proven to be effective during this initial rental period, purchase of this unit may be considered.

Definitions:

California Children’s Services: CCS is a state program for children with certain diseases or health problems. Through this program, children up to 21 years of age can get the health care and services they need for CCS-eligible conditions. CCS also provides medical therapy services that are delivered at public schools through their Medical Therapy Unit (MTU).


Transcutaneous Electrical Nerve Stimulation (TENS): One of a number of therapeutic modalities used to treat pain symptoms using high frequency electrical stimulation of the nerve to disrupt the pain signal so that pain is no longer felt.

Whole Child Model (WCM): The purpose of the WCM program is to incorporate services covered by the CCS Program into Medi-Cal managed care for Medi-Cal-eligible CCS Program members. Managed care plans (MCPs) operating in WCM counties will integrate Medi-Cal managed care and CCS Program administrative functions to provide comprehensive treatment of the whole child and care coordination in the areas of primary, specialty, and behavioral health for CCS-eligible and non-CCS-eligible conditions.

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Procedures:

1. Screening Requirement
 - a) All providers perform appropriate baseline health assessments and diagnostic evaluations that provide sufficient clinical detail to establish, or raise a reasonable likelihood, that a member has a CCS eligible medical condition. Providers will refer potential CCS-eligible members to the CCS program per Alliance Policy 404-1319 – *Screening and Referral of Medically Eligible Children to California Children’s Services (CCS) Program*.
 - b) Health Services staff will screen for California Children Services (CCS) eligibility. Health Services staff members will refer potential CCS-eligible members to the CCS program per Alliance Policy 404-1319– *Screening and Referral of Medically Eligible Children to California Children’s Services (CCS) Program*.
2. Authorization requests will be reviewed by the prior authorization nurse. Part of the review will include determination whether a request is for **initial** TENS unit use or for **continued** use:
 - a. Prescription: For CCS WCM members, durable medical equipment that will be used for the treatment of a member’s CCS eligible condition may be authorized when prescribed by a CCS paneled physician who is approved to treat the member’s CCS eligible medical condition.
 - b. If an authorization request is for *initial* use and necessary medical documentation is included, the Alliance will approve a 1 month trial rental, along with a notation that follow-up authorization requests will require documentation regarding patient compliance and effectiveness of pain management.
 - c. If the authorization request submitted is for *continued* TENS rental or purchase: the authorization request will require documentation addressing patient use, compliance and effectiveness of TENS unit. If medically indicated and documentation is supportive of continued need, the authorization request may be approved for purchase, and TENS units may be replaced every three years.
 - d. An authorization request may be deferred when documentation indicates that the patient is not using this equipment and/or it is ineffective for pain relief. The member

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may be asked to be re-assessed by the primary care physician to determine whether there is continued need for this equipment and/or to explore other pain management modalities. The deferred authorization request may be re-submitted along with a copy of the physician's evaluation recommending continued/on-going use of the TENs unit.

3. Authorization requests for electrodes will be approved with a limit of 2 packages or 8 electrodes per month. Manufacturer information indicates that the life expectancy of an electrode under normal use is 21 days. Most TENs units have 4 electrode attachments. Requests for additional electrodes will need to be submitted along with an explanation of medical necessity. (e.g. more than one TENs unit in use resulting in additional leads).

References:

Alliance Policies:

- 405-1319 – Screening and Referral of Medically Eligible Children to California Children's Services (CCS) Program
- 404-1601 – Durable Medical Equipment (DME) Authorization

Impacted Departments:

- Claims
- Member Services
- Provider Services

Regulatory:

Legislative:

Contractual (Previous Contract):

Contractual (2024 Contract):

DHCS All Plan Letter:

NCQA:

Supersedes:

Other References:

American College of Occupational and Environmental Medicine, ACOEM Guidelines for TENS unit use.


Attachments:

Lines of Business This Policy Applies To

- ☐ DSNP
- ☒ Medi-Cal
- ☒ Alliance Care IHSS

LOB Effective Dates

- (01/01/2026 – present)
- (01/01/1996 – present)
- (07/01/2005 – present)

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Revision History:

Reviewed Date	Revised Date	Changes Made By	Approved By
05/19/2020	05/19/2020	Lorna Metzger, RN Prior Auth Supervisor	UMWG
05/17/2022	05/17/2022	Tisa Llamas, RN Prior Auth Supervisor	UMWG
01/27/2023	1/27/2023	Tammy Brass, RN UM Director	UMWG
10/19/2023	10/19/2023	Azura Sanchez UM Admin Assistant	
11/06/2024	11/06/2024	Tisa Llamas RN Prior Authorizations Supervisor	UMWG