

SPINAL CORD STIMULATION - TEST TRIAL PORTION

Policy # 47

Implementation Date: 6/1/08

Review Date:

Revision Date: 9/3/14, 5/9/19

Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial, Select Health Advantage (Medicare/CMS), and Select Health Community Care (Medicaid/CHIP) plans. Refer to the "Policy" section for more information.

Description

Spinal cord stimulation (SCS) uses low voltage electrical pulses from electrodes placed in the epidural space of the dorsal column of the spinal cord to block the sensation of pain. These pulses block the pain signals from reaching the brain and replace the pain sensation with a tingling feeling.

Implantation of the spinal cord stimulator is typically a two-step process. Initially, lead(s) containing the electrodes are temporarily implanted in the epidural space, allowing a test trial period of stimulation. Once treatment effectiveness has been confirmed, new lead(s), an extension (conductor) wire, and radio-receiver or transducer are permanently implanted.

The leads used for the test trial portion of spinal cord stimulation are percutaneously placed, under moderate sedation in an office and may contain from 4 to 8 electrodes within the body of the lead itself (i.e., much like rope lighting). Occasionally, 2 leads will be placed for complex pain patterns, such as bilateral pain or pain extending from the limbs to the trunk. In these cases, 16 electrodes are identified.

COMMERCIAL PLAN POLICY AND CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)

Payment for the services detailed in this Reimbursement Policy are conditional upon meeting the coverage criteria outlined in Select Health's Medical Policies.

Prior to July 1, 2014, Select Health will reimburse providers for the supply of the lead(s) used for the test trial portion of the spinal cord stimulation process provided to our members at invoice cost per lead, plus a reasonable amount to cover inventory costs. The cost of the lead(s) will be verifiable by a copy of the appropriate dated invoice. Select Health will also reimburse providers for the supply of the trial test kit (i.e., belt, battery, handbook, and discharge information) provided to our members at the current allowable.

Effective July 1, 2014, Select Health follows the CMS policy that will **not separately** reimburse providers for the lead(s) or the kit.

SELECT HEALTH ADVANTAGE (MEDICARE/CMS)

Prior to April 1, 2014, Select Health will reimburse providers for the supply of the lead(s) used for the test trial portion of the spinal cord stimulation process provided to our members at invoice cost per lead, plus a reasonable amount to cover inventory costs. The cost of the lead(s) will be verifiable by a copy of the appropriate dated invoice. Select Health will also reimburse providers for the supply of the trial test kit (i.e., belt, battery, handbook, and discharge information) provided to our members at the current allowable.

Effective April 1, 2014, Select Health Advantage follows the CMS policy that will **not separately** reimburse providers for the lead(s) or the kit.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care **will follow the commercial plan policy.**

Applicable Codes

Code	Description
C1897	Lead, neurostimulator test kit (implantable)
C1778	Lead, neurostimulator (implantable)
L8680	Implantable neurostimulator electrode, each

Sources

1. ICD-9-CM Coding Guidelines. (2013, January 1). Retrieved July 8, 2014, from https://www.encoderpro.com/epro/physicianDoc/pdf/i9v1/i9_guidelines.pdf
2. Encoder Pro. (1998, June 1). Pain Management: Spinal Cord Stimulation. *CPT® Assistant*, pp. 1.
3. Encoder Pro. (2011, April 1). Spinal Neurostimulator: Removal, Insertion, Replacement, and Analysis. *CPT® Assistant*, pp. 10-11.
4. CMS. (2014, March 11). MLN Matters - April Quarterly Update for 2014 Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule. Retrieved September 3, 2014, from <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8645.pdf>
5. Medtronic. (2014, March 25). Spinal Cord Stimulation Office Trials. Retrieved September 3, 2014, from http://professional.medtronic.com/wcm/groups/mdtcom_sg/@mdt/@neuro/documents/documents/scs-trials-medicare2014.pdf
6. CMS. (2014, August 6). HCPCS Quarterly Update. Retrieved September 3, 2014, from http://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/HCPCS_Quarterly_Update.html

Disclaimer

This document is for informational purposes only and should not be relied on in the diagnosis and care of individual patients. Medical and Coding/Reimbursement policies do not constitute medical advice, plan preauthorization, certification, an explanation of benefits, or a contract. Members should consult with appropriate healthcare providers to obtain needed medical advice, care, and treatment. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the member's individual benefit plan that is in effect at the time services are rendered.

The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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Members may contact Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call Select Health Provider Relations at (801) 442-3692.

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