

Eli's Rehab Report

Reader Question: Micro TENS Units

Question: On occasion, I will have a patient who I feel is in need of a micro TENS unit. But when I bill for a TENS fitting using code 64550-TF, the carrier denies the claim. I have been told by the insurance carrier that it is a billable code. How can I bill it properly?

Oregon Subscriber

Answer: Code 64550 is defined as the application of a surface (transcutaneous) neurostimulator. This refers to the clinician anesthetizing a nerve to control or block pain. The carrier may deny this code because it is not used to define the fitting of a TENS unit. Additionally, the carrier probably does not recognize the TF modifier because it is not an American Medical Association (AMA) listed modifier.

If you performed an examination to determine the medical necessity for this equipment, evaluation and management (E/M) codes may be used (99201-99205 for new patients, 99211-99215 for established patients). For example, the patient examination was documented with a chief complaint, brief history, history of present illness, examination of affected body area, with a minimal diagnosis and data review for a new patient, E/M code 99201 (new patient) or 99212 (established patient) could be used.

Your Medicare Part B carrier, Noridian Mutual Insurance, which is the carrier for Alaska, Arizona, Colorado, Hawaii, Iowa, Minnesota, Nevada, North Dakota, Oregon, South Dakota, Washington and Wyoming, states that 97032 (application of a modality to one or more areas; electrical stimulation [manual], each 15 minutes) can be billed one or two times for the purpose of training the patient on how to use TENS at home.

Billing with the unlisted neurological or neuromuscular diagnostic procedure code 95999 is another option. When unlisted procedure codes are used, the carrier may require a separate report describing the procedure before the carrier will consider the claim for reimbursement.

Some insurance companies also allow benefits for durable medical equipment (DME). The DME [HCPCS codes](#) for TENS units are listed as A4595 (TENS supplies, two lead, per month), E0720 (TENS; two lead, localized stimulation), and E0730 (TENS; 4 lead, larger area/multiple nerve stimulation). Other TENS [HCPCS](#) codes are E0731-E0749.

An alternate [CPT code](#) for the actual TENS unit could be 99070 (supplies and materials provided by the physician over and above those usually included with the office visit or other services rendered). This code requires that you list the supply provided (e.g., the TENS unit).