

GUIDELINES FOR RESPONDING TO MEDICARE'S
CERTIFICATE OF MEDICAL NECESSITY FOR TENS UNIT PURCHASE

After the trial period, the TENS unit needs to be purchased or returned. If your patient is doing well with the TENS unit, Medicare requires that you complete a new CMN (Certificate of Medical Necessity), answering questions 1 through 6.

SECTION B

Respond to the length of need and the diagnosis codes (ICD-9)

Question 1 – For chronic pain, the medical record must document the location of the pain, the duration of time the patient has had the pain, and the presumed etiology of the pain.

Question 2 – When a TENS unit is prescribed for chronic, intractable pain, the pain must have been present for at least three months.

Question 3 – The presumed etiology of the pain must be a type that is accepted as responding to TENS therapy. Examples of conditions for which a TENS unit are not considered to be medically necessary are (not all-inclusive): headache, visceral abdominal pain, pelvic pain, and TMJ pain.

Question 4 – Other appropriate treatment modalities must have been tried and failed, and the medical record must document what treatment modalities have been used.

Question 5– Your patient has received a trial period with the TENS unit. This CMN is coming to you following that trial period.

Question 6 – For coverage of a purchase, the physician must determine that the patient is likely to derive significant therapeutic benefit from continuous use of the unit over a long period of time. The physician's records must document a reevaluation of the patient at the end of the trial period, must indicate how often the patient used the TENS unit, the typical duration of use each time, and the results.

PLEASE SIGN AND DATE THE BOTTOM OF THE FORM - THANK YOU!