



Ohio Administrative Code

Rule 4123-6-43 Payment for transcutaneous electrical nerve stimulators and neuromuscular electrical stimulators.

Effective: September 1, 2016

(A) Payment will be approved for a transcutaneous electric nerve stimulator (TENS) unit for treatment of allowed conditions in a claim directly resulting from an allowed industrial injury or occupational disease, as provided in this rule.

(1) Prior authorization is required for TENS units and supplies. A claimant shall be provided only one TENS unit at a time. For each TENS unit request approved, the unit shall be rented for a thirty day trial period before purchase of the TENS unit. This trial period is to evaluate the medical necessity and effectiveness of the TENS treatment. TENS treatment will be discontinued at the end of the thirty day trial period month where the treatment has not proven to be medically necessary or effective. Reimbursement of rental costs will be considered only for the trial period that the TENS unit was actually used before treatment was discontinued. For each TENS unit provided, payment shall be limited to necessary disposable or rechargeable batteries, but not both.

(2) The bureau shall apply all rental payments previously made to the purchase price of the TENS unit. A TENS unit purchased and furnished to the claimant is not the personal property of the claimant, but remains the property of the bureau or self-insuring employer. The bureau or self-insuring employer reserves the right to reclaim and recover the TENS unit from the claimant at the completion of the course of TENS treatment. Once a TENS unit is purchased, the bureau or self-insuring employer will reimburse for repair or replacement of the unit upon submission of a request from the physician of record or treating provider that includes medical documentation substantiating the continued medical necessity and effectiveness of the unit.

(3) To be eligible for reimbursement under this rule, the TENS unit must be prescribed by a physician and furnished by a provider holding a current, valid, license or certificate of registration from the Ohio respiratory care board to sell or rent home medical equipment.

(B) The claimant's MCO shall regularly determine the specific TENS supplies needed by the claimant throughout the period of time authorized for TENS use. The TENS provider must receive



authorization from the claimant's MCO prior to the delivery of supplies and/or equipment. The TENS provider shall then deliver the supplies and bill the claimant's MCO after authorization is received. A self-insuring employer may, but is not required to, follow the same procedure as an MCO under this rule; provided, however, that in no event shall a self-insuring employer require a claimant to submit a written request for TENS supplies and/or equipment. The claimant's MCO shall retain documentation of the contact with the claimant substantiating the claimant's need for supplies in accordance with the time frames set forth in rule 4123-6-14.1 of the Administrative Code. The TENS provider's bill must indicate the actual date of service, reflecting the date that services or supplies were provided. The bureau, MCO, QHP, or self-insuring employer may adjust bills upon audit if the audit discloses the providers failure to comply with this rule.

(C) The TENS provider shall maintain the following records and make them available for audit upon request:

(1) Authorizations of TENS supplies or equipment received from the injured worker's MCO, and all other documentation relating to the injured worker's need for TENS supplies or equipment received by the provider prior to the delivery of the supplies or equipment, including any requests received from the injured worker, if applicable;

(2) Records of the provider's wholesale purchase of TENS supplies or equipment;

(3) Records of delivery of supplies to injured workers and of the delivery or return of TENS units;
and

(4) The TENS provider's current, valid, license or certificate of registration from the Ohio respiratory care board to sell or rent home medical equipment.

Upon request, the provider shall supply copies of the record information to the requester at no cost. Failure to provide the requested records may result in denial or adjustment of bills related to these records.

(D) The bureau shall not pay for the rental or sale of devices that are labeled by the food and drug administration (FDA) for over-the-counter use and are identified with the FDA product code



"NUH.OTC.TENS."

(E) Payment will be approved for a neuromuscular electrical stimulator (NMES) unit for treatment of allowed conditions in a claim directly resulting from an allowed industrial injury or occupational disease, as provided in the bureau's provider billing and reimbursement manual in effect on the billed date of service.