Medica Coverage Policy

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<th>Policy Name:</th>
<th>Lower Limb Functional Electrical Stimulation Rehabilitation Therapy</th>
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<td>Effective Date:</td>
<td>12/1/2016</td>
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Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare, Medicaid and MinnesotaCare members, this policy will apply unless these programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

Coverage Policy

Functional electrical stimulation (FES) rehabilitation therapy using stationary equipment is COVERED when used as one component of a comprehensive facility-based rehabilitation program.

FES rehabilitation therapy using stationary equipment as stand-alone therapy in a facility-based rehabilitation program is investigative and therefore NOT COVERED.

FES ergometric cycles used in the home setting are investigative and therefore NOT COVERED.

Description

Functional electrical stimulation (FES), a form of neuromuscular electrical stimulation, is a rehabilitation technique purported to enhance movement or function of organs, muscles, and extremities by applying electrical current to peripheral nerves. FES devices used for lower extremity rehabilitation are available as upright units, supine units, or as bicycles designed for use in both the clinic and home setting. In the clinic setting, FES is used as one component of a comprehensive therapy program. These programs consist of a mix of multiple therapeutic modalities depending on the individual’s condition and the extremity being treated. Components might include: bracing/splinting, physical therapy, occupational therapy, speech therapy, locomotor training, functional balance training, aquatic therapy, spinal unloading therapy, and/or wheelchair assessment.

FES is applied while the individual is executing a physical task, with the intent of having an orthotic effect with the potential of lasting improvement in muscle function. FES is intended to have an orthotic effect and has the potential to have lasting effects on muscle function. FES is suggested for use during the active rehabilitation phase for adults and children with neurologic dysfunction caused by impaired motor neuron function when peripheral nerve function is preserved (e.g., spinal cord injury, brain injury, cerebral palsy). Although largely used for exercise, it is suggested as therapy to assist with breathing, cardiovascular function, grasping, transferring, standing and/or walking.

An FES system uses a microprocessor-based electronic stimulator that determines what level of stimulation is provided. Delivery channels for individual pulses are provided by a set of electrodes applied to the neuromuscular system. Current is applied percutaneously by placing the electrodes on the individual’s skin over the muscle(s) to be activated. In individuals with weak or paralyzed muscles, FES is intended to allow muscles to function and perform activities by facilitating muscle contractions and activity.
FES ergometric cycling in the home setting incorporates stationary cycling with stimulation to promote exercise, with the intent of strengthening muscle contractions through repetitive pedaling. The continued succession of leg muscle contractions is believed to provide active aerobic exercise to individuals who cannot move on their own, with the intention of improving heart and lung function, strength, and circulation while building muscle mass.

**FDA Approval**
Many FES devices have received FDA approval. Certain devices are classified as Class III devices requiring complete PMA approval, while others are classified as Class II devices requiring 510(k) approval.

Examples of FDA approved devices include, but are not limited to:
1. RT300-S (adult version) and RT300-SP (Pediatric version) FES bicycle (Restorative Therapies, Inc.)
2. RT600 Upright FES Device System (Restorative Therapies, Inc.)
3. ERGYS (Therapeutic Alliances, Inc.)

**Prior Authorization**
Prior authorization is not required. However, services with specific coverage criteria may be reviewed retrospectively to determine if criteria are being met. Retrospective denial may result if criteria are not met.

**Coding Considerations**
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

**HCPC Codes**
E0770 - Functional electrical stimulator, transcutaneous stimulation of nerve and/or muscle groups, any type, complete system, not otherwise specified

Original Effective Date: 12/1/2016
Re-Review Date(s):