OVERVIEW
Pulsed radiofrequency is a method of denervation to treat spinal pain, but it does not destroy or damage nerves.

PRIOR AUTHORIZATION
Not applicable.

POLICY STATEMENT
BlueCHiP for Medicare and Commercial
Pulsed radiofrequency treatment for pain is considered not medically necessary because there is insufficient evidence in the published medical literature to demonstrate its safety and efficacy in the treatment of spinal pain.

MEDICAL CRITERIA
Not applicable.

BACKGROUND
Pulsed radiofrequency (RF) is a nondestructive alternative to facet joint denervation for the treatment of neck or back pain. Pulsed RF consists of short bursts of electrical current of high voltage in the RF range but without heating the tissue enough to cause coagulation. It is suggested as a possibly safer alternative to thermal RF facet denervation. Temperatures do not exceed 42°C at the probe tip versus temperatures in the 60°s C reached in thermal RF denervation, and tissues may cool between pulses. It is postulated that transmission across small unmyelinated nerve fibers is disrupted but not permanently damaged, while large myelinated fibers are not affected.

Pulsed radiofrequency does not appear to be as effective as non-pulsed radiofrequency denervation, and there is insufficient evidence to evaluate the efficacy of other methods of denervation for facet joint pain. Therefore, these techniques are considered not medically necessary.

COVERAGE
Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for applicable not medically necessary benefits/coverage.

CODING
BlueCHiP for Medicare and Commercial
At this time there are no specific CPT codes to describe pulsed radiofrequency. Providers should file using the unlisted code below:

64999

RELATED POLICIES
Not applicable.
**REFERENCES**


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