CareSource

MEDICAL POLICY STATEMENT
Georgia Medicaid

Policy Name & Number	Date Effective
Peripheral Nerve Stimulators for Treatment of Pain-GA MCD-MM-1429	11/01/2026
Policy Type	
MEDICAL	

Medical Policy Statements are developed from a review of the available evidence-based, clinical information based on and supported by clinical guidelines from medical specialties, peer-reviewed medical and scientific studies, nationally recognized utilization and technology assessment guidelines, and other medical management industry standards to aid in determining the medical necessity of a service. Medically necessary services are defined in the plan-specific Evidence of Coverage, Member Handbooks, Provider Manuals, Medical Policy Statements, and/or other plan policies and procedures.

Medical Policy Statements do not guarantee an authorization or payment of services. Please refer to the plan contract (e.g., Evidence of Coverage, Member Handbook) for the service(s) referenced in the Medical Policy Statement. Except as otherwise required by law, if there is a conflict between the Medical Policy Statement and the plan contract and/or provider agreement, then the plan contract and/or provider agreement will be the controlling document. Reasonable discretion may be used in interpreting and applying this Policy Statement to services provided in a particular case, and the policy may be modified at any time. Medical Policy Statements may be superseded by federal and state laws and regulations, as applicable. In the case of a discrepancy between the Policy Statement's effective date and any applicable legal or regulatory requirement, the law or regulation will govern.

Coverage for mental health and substance use disorder (MH/SUD) benefits are provided at the same level as coverage for medical and surgical (M/S) benefits, as required by the Mental Health Parity and Addiction Equity Act (MHPAEA). MH/SUD benefits are not subject to limits or requirements that are more restrictive than those that apply to M/S benefits.

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A. Subject

Peripheral Nerve Stimulators for Treatment of Pain

B. Background

The role of peripheral nerves as sources of pain and avenues of treatment when conservative therapy has failed is being more extensively explored than in previous years. Neuromodulation of peripheral nerves to treat refractory pain is one such area of interest. The neuromodulation of peripheral nerves to reduce pain is commonly known as peripheral nerve stimulation (PNS), peripheral nerve field stimulation (PNFS), and percutaneous-electrical nerve field stimulation (PENFS). It has been developed as a minimally invasive pain management modality intended to manage acute and chronic pain.

The proposed mechanism of action, referred to as the gate control theory, involves a method by which stimulation of large-diameter sensory neurons reduces transmission of painful stimuli from small nociceptive fibers to the brain. The stimulation system is placed adjacent to the nerve, a process commonly known as remote selective targeting. The lead is connected to a small, wearable stimulator. Depending on the device, the wearer may be able to adjust the level of stimulation using Bluetooth technology.

C. Definitions

- **Acute Pain** – Pain lasting 4 weeks or less.
- **Chronic Pain** – A distressing feeling often caused by intense or damaging stimuli (pain) lasting more than 90 days, considered beyond normal healing time.
- **Sub-acute Pain** – Pain lasting between 4 and 12 weeks.

D. Policy

I. Any drug, biologic, device, diagnostic, product, equipment, procedure, treatment, service, or supply used in or directly related to the diagnosis, evaluation, or treatment of a disease, injury, illness, or other health condition which CareSource determines in its sole discretion to be experimental or investigational is not covered by CareSource.

II. Peripheral nerve stimulators are considered experimental and investigational and are unproven for all indications for the reduction of acute, sub-acute, and chronic pain.

III. Peripheral nerve stimulators are not covered. This includes but is not limited to:
   A. IB-Stim (NeurAxis)
   B. Moventis PNS
   C. Nalu Neurostimulation System
   D. Nerivio
   E. SPRINT PNS System
   F. StimQ PNS System
   G. StimRouter Neuromodulation System

E. Conditions of Coverage
N/A

F. Related Policies/Rules
Medical Necessity Determinations
Experimental and Investigational Item or Service

G. Review/Revision History

	DATE	ACTION
Date Issued	02/15/2023	Approved at Committee.
Date Revised	01/17/2024 06/05/2024 05/07/2025 01/28/2026	Annual Review: references updated; Approved at Committee Revised Background, added D. III. A. Approved at Committee Annual review, references updated. Approved at Committee Annual review, added Nerivio to D. III. Approved at Committee
Date Effective	11/01/2026	
Date Archived		

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