



**Subject:** Sacral Nerve Stimulation for Urinary Voiding Dysfunction and/or Fecal Incontinence\*

**Effective Date:** October 23, 2007

**Department(s):** Utilization Management

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**Policy:** Sacral nerve stimulation for urinary voiding dysfunction and/or fecal incontinence is reimbursable under Plans administered by QualCare, Inc.

**Objective:** To assure proper and consistent reimbursement and to delineate criteria for coverage of a specific intervention.

**Procedure:**

**A. Voiding Dysfunction**

1. Sacral nerve stimulation is covered for the following types of urinary voiding dysfunction that have been present for at least 12 months and interfere with activities of daily living:

- a. Urinary urge incontinence (**ICD-9 788.31; ICD-10 N39.41**)
- b. Non-obstructive urinary retention (**ICD-9 788.20, 788.21, 788.29; ICD-10 R33.8, R33.9, R39.14**)
- c. Urinary urgency/urinary frequency syndrome (**ICD-9 788.41; ICD-10 R35.0**)

2. Sacral nerve stimulation is covered only after failure of, or in the presence of contraindications to or intolerance of, the following:

- a. For urge incontinence or urgency/frequency syndrome: pharmacotherapy, (e.g., anticholinergics) or behavioral therapy (e.g., pelvic floor exercise, biofeedback)
- b. For non-obstructive urinary retention: pharmacotherapy (e.g., alpha-blockers, cholinergics), intermittent catheterization

3. Prior to implantation of a permanent sacral nerve stimulator for voiding dysfunction, there must be a trial of the device that results in at least a 50% decrease in symptoms as measured through voiding diaries. Implantation of a trial device requires the presence of criterion 2.a or 2.b above.

## **B. Fecal incontinence**

1. Sacral nerve stimulation is covered for chronic fecal incontinence (**ICD-9 787.6; ICD-10 R15.9**) that interferes with activities of daily living.

2. Sacral nerve stimulation is covered only after failure of, or in the presence of contraindications to or intolerance of the following:

- a. Pharmacotherapy (e.g., anticholinergics), biofeedback, dietary management, strengthening exercises.

3. Prior to implantation of a permanent sacral nerve stimulator for fecal incontinence, there must be a 2- to 3-week trial of a temporary stimulator with significant benefit as reported by the patient.

C. The applicable **CPT codes** are:

1. for the temporary device: **64561 (percutaneous implantation of neurostimulator electrodes)**

2. for the permanent device: **64581 (incision for implantation of neurostimulator electrodes)**
3. for the generator: **64590 (insertion or replacement of peripheral...neurostimulator pulse generator or receiver)**
4. **64595 (revision or removal of peripheral...neurostimulator pulse generator or receiver)**

D. The applicable **HCPCS codes** for the stimulator pulse generators are: **L8685, L8686, L8687, L8688, L8689, L8695, C1767, C1778, C1897**

E. Sacral nerve stimulation procedures are considered same-day surgery. Any request for sacral nerve stimulation other than as a same-day surgery procedure requires medical review.

#### References

Talley NJ, Grover S, Eds. UpToDate- Fecal incontinence in adults: Management. Version 11.0 Updated April 2018. Uptodate.com

Zerbib F, Siproudhis L, Lehur PA, Germain C et al. Randomized clinical trial of sacral nerve stimulation for refractory constipation. *Br J Surg.* 2017;104(3):205-213(Feb)

Rydningen M, Dehli T, Wilsgaard T, Rydning A, et al. Sacral neuromodulation compared with injection of bulking agents for faecal incontinence following obstetric anal sphincter injury - a randomized controlled trial. *Colorectal Dis.* 2017;19(5):O134-O144(May)

Paquette IM, Varma MG, Kaiser AM, Steele SR, Rafferty JF. The American Society of Colon and Rectal Surgeons' Clinical Practice Guideline for the Treatment of Fecal Incontinence. *Dis Colon Rectum.* 2015;58(7):623-36(Jul)

Thaha MA, Abukar AA, Thin NN, Ramsanahie A, Knowles CH. Sacral nerve stimulation for faecal incontinence and constipation in adults. *Cochrane Database Syst Rev.* 2015;(8):CD004464(Aug)

Noblett K, Siegel S, Mangel J, Griebeling TL, Sutherland SE, Bird ET, et al. Results of a prospective, multicenter study evaluating quality of life, safety, and efficacy of sacral neuromodulation at twelve months in subjects with symptoms of overactive bladder. *Neurourol Urodyn.* 2014 Dec 24. doi:

Brown SR, Wadhawan H, Nelson RL. Surgery for faecal incontinence in adults. *Cochrane Database Syst Rev.* 2013;(7):CD001757(Jul)

Thin NN, Horrocks EJ, Hotouras A, Thaha MA, et al. Systematic review of the clinical effectiveness of neuromodulation in the treatment of faecal incontinence. *Br J Surg.* 2013;100(11):1430-47(Oct)

Schreiner L, dos Santos TG, deSouza AB, Nygaard CC, da Silva Filho IG. Electrical stimulation for urinary incontinence in women: a systematic review. *Int Braz J Urol.* 2013;39(4):454-64 (Aug)

Leroi AM, Lenne X, Dervaux B, et al. Outcome and cost analysis of sacral nerve modulation for treating urinary and/or fecal incontinence. *Ann Surg.* 2011;253(4):720-732(Apr)

Wexner SD, Collier JA, Devroede G, Hull T, McCallum R, Chan M, et al. Sacral nerve stimulation for fecal incontinence: results of a 120-patient prospective multicenter study. *Ann Surg.* 2010 Mar;251(3):441-9.(Mar)

El-Gazzaa G, Zutshi M, Salcedo L, *et al.* Sacral neuromodulation for the treatment of fecal incontinence and urinary incontinence in female patients : Long-term follow-up. *Int J colorectal Dis* 2009;24(12):1377-1381 (Dec)

deMiguel M, Oteiza F, Ciga MA, *et al.* Sacral nerve stimulation for the treatment of faecal incontinence following low anterior resection for rectal cancer. *Colorectal Dis.* 2009;Oct 19 (Epub ahead of print)

Boyle DJ, Knowles CH, Lunniss PJ, *et al.* Efficacy of sacral nerve stimulation for fecal incontinence in patients with anal sphincter defects. *Dis Colon Rectum* 2009;52(7):1234-1239 (Jul)

Matzel KE, Lux P, Heuer S, *et al.* Sacral nerve stimulation for faecal incontinence : Long-term outcome. *Colorectal Dis.* 2009;11(6):636-641 (Jul)

Meurette G, La Torre M, Regenet N, *et al.* Value of sacral nerve stimulation in the treatment of severe faecal incontinence : A comparison to the artificial bowel sphincter. *Colorectal Dis* 2009;11(6):631-635 (Jul)

Edden Y, Wexner SD. Therapeutic devices for fecal incontinence: Dynamic graciloplasty, artificial bowel sphincter and sacral nerve stimulation. *Expert Rev Med Devices* 2009;6(3):307-312 (May)

Altomare DF, Ratto C, Ganio E., *et al.* Long-term outcome of sacral nerve stimulation for fecal incontinence. *Dis Colon Rectum* 2009;52(1):11-17 (Jan)

Chan MK, Tjandra JJ. Sacral nerve stimulation for fecal incontinence: External anal sphincter defect vs intact anal sphincter. *Dis Colon Rectum* 2008;51(7):1015-1024 (Jul)

Tjandra JJ, Chan MK, Yeh CH, *et al.* Sacral nerve stimulation is more effective than optimal medical therapy for severe fecal incontinence : A randomized, controlled study. *Dis Colon Rectum* 2008;51(5):494-502 (May)

Dudding TC, Parés D, Vaizey CJ, *et al.* Predictive factors for successful sacral nerve stimulation in the treatment of faecal incontinence : A 10-year cohort analysis. *Colorectal Dis* 2008;10(3):249-256 (Mar)

Blandon RE, Gebhart JB, Lightner DJ, *et al.* Re-operation rates after permanent sacral nerve stimulation for refractory voiding dysfunction in women. *BJU Int.* 2008;101(9):1119-23 (May)

White WM, Dobbmeyer-Dittrich C, Klein FA, *et al.* Sacral nerve stimulation for treatment of refractory urinary retention: Long-term efficacy and durability. *Urology* 2008;71(1):71-74 (Jan)

Nitti VW, Blaivas JG. Urinary Incontinence: Epidemiology, Pathophysiology, Evaluation, and Management Overview. Ch 60 in Weing AJ, ed-in-chief, Kavoussi LR, Novick AC, Partin AW, *et al.* *Campbell-Walsh Urology* 9<sup>th</sup> ed. Philadelphia. Saunders Elsevier. 2007.

Aboseif SR, Kim DH, Rieder JM, *et al.* Sacral neuromodulation: Cost considerations and clinical benefits. *Urology* 2007;70(6):1069-1073 (Dec)

Van Kerrebroeck PE, van Voskuilen AC, Heesakkers JP, *et al.* Results of sacral neuromodulation therapy for urinary voiding dysfunction: Outcomes of a prospective, worldwide clinical study. *J Urol* 2007;178(5):2029-2034 (Nov)

Wallace PA, Lane FL, Noblett KL. Sacral nerve neuromodulation in patients with underlying neurologic disease. *Am J Obstet Gynecol* 2007;197(1):96.e1-5 (Jul)

Goh M, Diokno AC. Sacral neuromodulation for nonobstructive urinary retention – Is success predictable? *J Urol* 2007;178(1):197-199 (Jul)

Leng WW, Morrisroe SN. Sacral Nerve Stimulation for the Overactive Bladder. *Urol Clin N Amer* 2006;33(4):491-501 (Nov)

Van Voskuilen AC, Oerlemans DJ, Weil EH, *et al.* Long term results of neuromodulation by sacral nerve stimulation for lower urinary tract symptoms: a retrospective single center study. *Eur Urol* 2006;49(2):366-372 (Feb)

Elkelini M, Hassouna MM. Canadian Experience in Sacral Neuromodulation. *Urol Clin N Amer* 32(1):41-49 (Feb)

Daneshgari F, Moy ML. Current Indications for Neuromodulation. *Urol Clin N Amer* 32(1):37-40 (Feb)

Siegel SW. Selecting Patients for Sacral Nerve Stimulation. *Urol Clin N Amer* 32(1):19-26 (Feb)

Das AK, Carlson AM, Hull M. Improvement in depression and health-related quality of life after sacral nerve stimulation therapy for treatment of voiding dysfunction. *Urol* 2004;64(1):62-68 (Jul)

Drafted By/Date: B. Fisher, MD 09/07/07  
Approved By/Date: QM Committee 10/23/07  
Revised By/Date: B. Fisher, MD 10/26/09  
Approved By/Date: QM Committee 12/08/09  
Reviewed w/o Revision By/Date: M. McNeil, MD 11/23/11  
Approved By/Date: QM Committee 12/13/11  
Reviewed w/o Revision By/Date: M. McNeil, MD 11/26/13  
Approved By/Date: QM Committee 1/28/14  
Revised By/Date: M. McNeil, MD 08/11/16  
Approved By/Date: QM Committee 08/23/16  
Reviewed w/o Revision By/Date: MMcNeil, MD 05/14/18  
Approved By/Date: QM Committee 06/19/18

\*Consistent with Summary Plan Description (SPD). When there is discordance between this policy and the SPD, the provisions of the SPD prevail.