



Medical Policies



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|-----------------|---------------------------|-----------------|---------------------------------|
| Policy Number: | E-45 | | |
| Policy Name: | Interferential Stimulator | | |
| Policy Type: | Medical | Policy Subtype: | Durable Medical Equipment (DME) |
| Effective Date: | 09-15-2025 | End Date: | 11-02-2025 |

Description

Interferential stimulation is a type of electrical nerve stimulation that uses paired electrodes of two independent circuits carrying medium-frequency alternating currents. The electrodes are aligned on the skin so that the current flowing between each pair intersects at the underlying target. This maximizes the current permeating the tissues while minimizing unwanted stimulation of cutaneous nerves.

Policy Application

All claims submitted under this policy's section will be processed according to the policy effective date and associated revision effective dates in effect on the date of processing, regardless of service date; **and/or**

All claims submitted under this policy's section will be processed according to the policy effective date and associated revision effective dates in effect on the date of service.

Criteria

Coverage is subject to the specific terms of the member's benefit plan.

Interferential stimulation is experimental/investigational.

Review of available literature reveals a lack of controlled clinical trials that prove the effectiveness of the procedure.

Procedure Codes

| | | | |
|-------|-------|-------|-------|
| A4556 | A4557 | S8130 | S8131 |
|-------|-------|-------|-------|

Professional Statements and Societal Positions Guidelines

Not Applicable

Diagnosis Codes

Not Applicable

CURRENT CODING

HCPCS:

| | | |
|-------|----------------------------|--------------------|
| A4556 | Electrodes, pair | Commercial |
| A4557 | Lead wires, pair | Commercial |
| S8130 | Interferential stim 2 chan | Commercial |
| S8131 | Interferential stim 4 chan | Commercial |
| A4556 | Electrodes, pair | Medicaid Expansion |
| A4557 | Lead wires, pair | Medicaid Expansion |
| S8130 | Interferential stim 2 chan | Medicaid Expansion |
| S8131 | Interferential stim 4 chan | Medicaid Expansion |

References

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5. Moore, JS, Gibson, PR, Burgell, RE. Neuromodulation via interferential electrical stimulation as a novel therapy in gastrointestinal motility disorders. *J Neurogastroenterol Motil.* 2018;30;24(1):19-29.
6. National Institute for Health and Care Excellence: Clinical Guidelines (NICE), 2016. Low back pain and sciatica in over 16s: Assessment and management. Accessed on June 11, 2018.
7. Lindblad K, Bergkvist L, Johansson A-C. Evaluation of the treatment of chronic chemotherapy-induced peripheral neuropathy using long-wave diathermy and interferential currents: A randomized controlled trial. *Supportive Care in Cancer.* 2016;24(6):2523-2531.
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10. Mahmoud MM, El-Nahas NG, Hamed MH, Louis NN. Interferential electrical stimulation versus pulsed electro-magnetic field in management of intermittent claudication. *Egy J Hosp Med.* 2020;80: 654-661.
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ND Committee Review

Internal Medical Policy Committee 9-21-2020 Annual Review - no changes

Internal Medical Policy Committee 9-21-2021 Annual Review - no changes

Internal Medical Policy Committee 9-28-2022 Annual Review - no changes in criteria

Internal Medical Policy Committee 9-12-2023 Annual Review - no changes in criteria

Internal Medical Policy Committee 9-17-2024 Annual Review -no changes in criteria

- Added Policy Application

Disclaimer

Current medical policy is to be used in determining a Member's contract benefits on the date that services are rendered. Contract language, including definitions and specific inclusions/exclusions, as well as state and federal law, must be considered in determining eligibility for coverage. Members must consult their applicable benefit plans or contact a Member Services representative for specific coverage information. Likewise, medical policy, which addresses the issue(s) in any specific case, should be considered before utilizing medical opinion in adjudication. Medical technology is constantly evolving, and the Company reserves the right to review and update medical policy periodically.