

## **NCD for Diathermy Treatment (150.5)**

**Publication Number**

100-3

**Manual Section Number**

150.5

**Version Number**

2

**Effective Date of this Version**

6/19/2006

**Implementation Date**

6/19/2006

**Benefit Category**

Incident to a physician's professional Service  
Physicians' Services

**Note:** This may not be an exhaustive list of all applicable Medicare benefit categories for this item or service.

**Coverage Topic**

Doctor Office Visits

**Indications and Limitations of Coverage**

**CIM 35-41**

High energy pulsed wave diathermy machines have been found to produce some degree of therapeutic benefit for essentially the same conditions and to the same extent as standard diathermy. Accordingly, where the contractor's medical staff has determined that the pulsed wave diathermy apparatus used is one which is considered therapeutically effective, the treatments are considered a covered service, but only for those conditions for which standard diathermy is medically indicated and only when rendered by a physician or incident to a

physician's professional services.

**Cross Reference**

§240.3

**Transmittal Number**

48

**Transmittal Link**

<http://www.cms.hhs.gov/transmittals/downloads/R48NCD.pdf>

**Revision History**

09/1989 - Deleted reference to Diapulse or any other brand names. Effective date 10/10/1989. (TN 42)

03/2006 - Deleted coding information. Effective date: 06/19/2006. ([TN 48](#)) (CR4278)

**Other Versions**

[Diathermy Treatment](#) - Version 1, Effective between 10/10/1989 - 06/19/2006

Source: CMS Manual 100-3 Section 150.5