



Medica Central Coverage Policy

Policy Name: Transvaginal and Transurethral Radiofrequency (RF) Treatments of Stress Urinary Incontinence in Women MP9741

Effective Date: 10/01/2025

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica Central plans. Coverage is subject to requirements in applicable federal or state laws. Please refer to the member's plan document for other specific coverage information. If there is a difference between this general information and the member's plan document, the member's plan document will be used to determine coverage. With respect to Medicare, Medicaid, and other government programs, this policy will apply unless these programs require different coverage.

Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions may call the Provider Service Center. Please use the Quick Reference Guide on the Provider Communications page for the appropriate phone number. <https://mo-central.medica.com/Providers/SSM-employee-health-plan-for-IL-MO-OK-providers>

Medica Central coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care, and treatment.

Coverage Policy

Radiofrequency (RF) bladder neck suspension for treatment of stress incontinence in women is investigative and unproven and therefore **NOT COVERED**. There is insufficient reliable evidence in the form of high-quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Transurethral RF micro-remodeling for treatment of female stress urinary incontinence is investigative and unproven and therefore **NOT COVERED**. There is insufficient reliable evidence in the form of high-quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Note: See also related coverage policies:

- *Extracorporeal Magnetic Stimulation (EMS) for the Treatment of Urinary Incontinence*
- *Female External Urinary Catheters for Urinary Incontinence (e.g., PureWick, PrimaFit)*
- *Percutaneous Tibial Nerve Stimulation*
- *Sacral Nerve Stimulation*
- *Urethral Bulking Agents for Urinary Incontinence*
- *Vaginal Tactile Imaging*

Description

Stress incontinence is defined as the involuntary loss of urine from the urethra when pressure on the abdomen is increased without detrusor contraction. It is caused by weakness in the pelvic floor muscles and urethral sphincter. An estimated 6.5 million women in the United States have stress



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urinary incontinence. Non-surgical therapy includes pelvic exercises, nerve stimulation, and urethral bulking agents. Surgical treatments include retropubic suspension (Burch and Marshall-Marchetti-Krantz procedures), pubovaginal fascial sling, tension-free vaginal tape, and needle bladder neck suspension. The goals of surgical treatment are to improve structural support and reduce hypermobility of the bladder neck and urethra.

Radiofrequency treatments include micro-remodeling of transurethral tissue and bladder neck suspension. Remodeling consists of the application of RF energy delivered through a series of four needles arranged around a probe and inserted through the urethra into the bladder. RF energy raises the temperature of the tissue high enough to break down tissue proteins in the region of the needle but does not destroy the tissue. The principle behind the therapy is that, as healing occurs, the urethral tissue becomes firmer and therefore less likely to open involuntarily. In bladder neck suspension, RF energy is used to shrink and stabilize the endopelvic fascia.

Bladder neck suspension uses RF energy applied to endopelvic fascia to shrink and stabilize the tissue. This procedure is generally performed as outpatient surgery. Patients are discharged between two and four hours postoperatively.

FDA Approval

Laparoscopic (LP) and transvaginal (TV) RF applicators have been approved by the FDA. The SURx[®] laparoscopic and transvaginal systems (SURx, Inc., Livermore, CA) were approved in 2002 for the shrinkage and stabilization of pelvic tissue for treatment of type II stress urinary incontinence due to hypermobility in women not eligible for major corrective surgery. This device is no longer being marketed in the United States. An RF transurethral micro-remodeling system, the Renessa[®] System (Novasys Medical Inc., Newark, CA) was approved in 2005 for the treatment of female stress urinary incontinence due to hypermobility in women who have failed conservative treatment and who are not candidates for surgical therapy.

Prior Authorization

Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

Coding Considerations

Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes

- **53860** - Transurethral, radiofrequency micro-remodeling of the female bladder neck and proximal urethra for stress urinary incontinence



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