Transurethral Radiofrequency Micro-Remodeling for Female Stress Urinary Incontinence

Definition

The procedure uses radiofrequency energy to generate controlled heat at low temperatures in tissue targets within the lower urinary tract. The heat denatures collagen in the tissue at multiple small treatment sites. Upon healing, the treated tissue is firmer, increasing resistance to involuntary leakage at times of heightened intra-abdominal pressure, such as laughing, coughing or during exercise, thereby reducing or eliminating SUI episodes.

Guideline

Female members are eligible for coverage of transurethral radiofrequency tissue remodeling for the treatment of stress urinary incontinence (SUI) when the following criteria are met:

1. Moderate to severe SUI in a member unable or unwilling to undergo surgery
2. Failure of a stepped approach consisting of conservative methods include the following:
   a. Lifestyle changes (e.g., weigh loss, diet)
   b. Behavioral methods (e.g., bladder training, pelvic muscle exercises)¹
   c. Pharmacologic therapy (e.g., antimuscarinics)
   d. Other minimally invasive adjunctive approaches (e.g., continence pessaries, non-implantable pelvic floor electrical stimulation)²

Limitations/Exclusions

1. RFA repeated within < 1 year is not considered medically necessary
2. RFA for pregnant women is not considered medically necessary
3. Use of the transvaginal radiofrequency bladder neck suspension (SURx Transvaginal System®) for SUI is not considered medically necessary, as its use is investigational

¹ Behavioral methods may not be effective in the presence of cognitive impairment.
² Sacral stimulators, where electrodes are placed percutaneously adjacent to the S3 dorsal roots, are not appropriate for SUI-type incontinence.
Applicable Procedure Codes

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

Applicable ICD-10 Codes

N39.3  Stress incontinence (female) (male)

References


Specialty-matched clinical peer review.