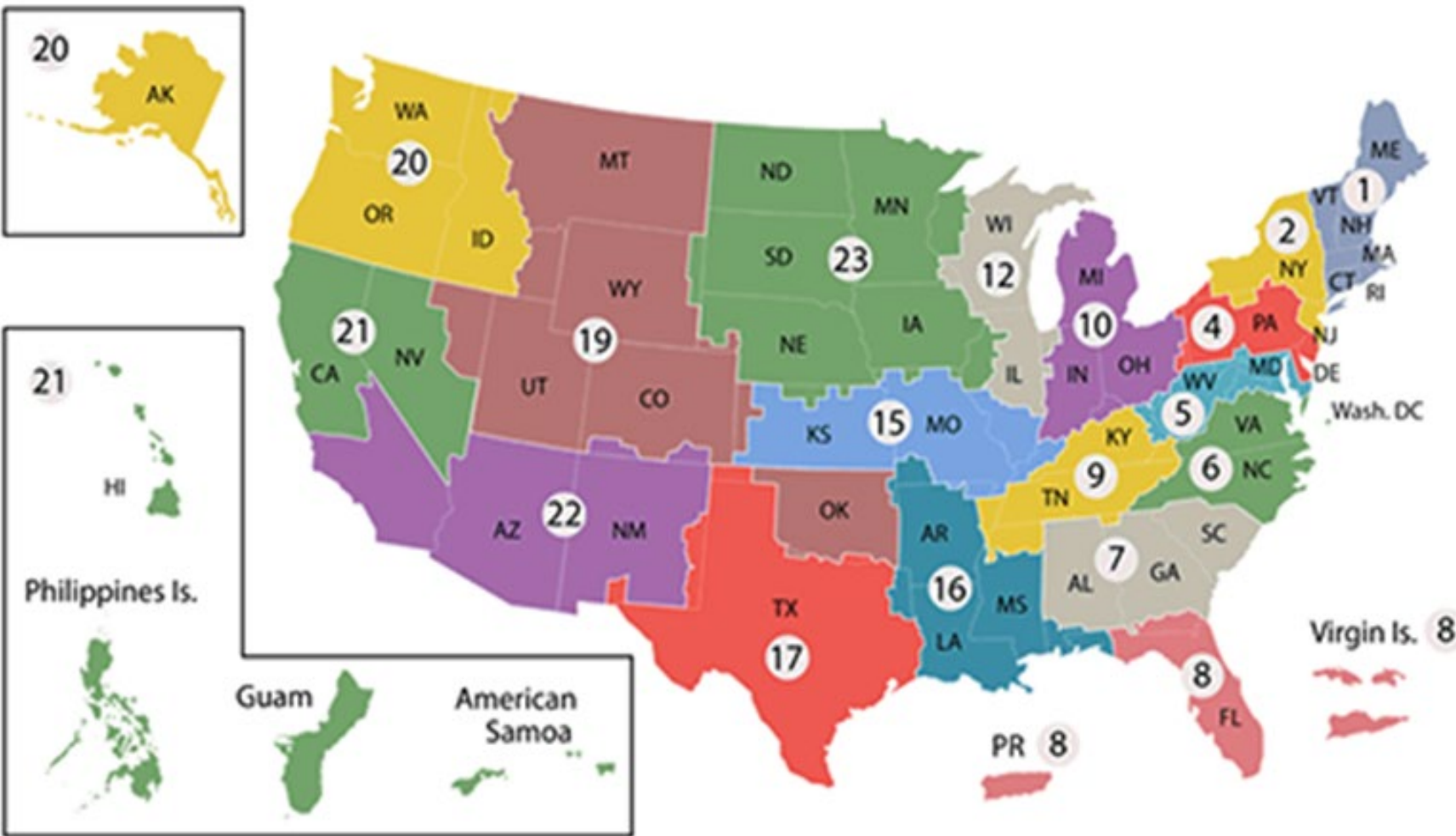


Program Leverages Clinical Expertise Aimed to Improve Access for Use of Neuromodulation for Chronic Pain

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- INTRODUCTION:** Spinal cord stimulation (SCS) offers pain relief for select patients with chronic intractable pain. A comprehensive evaluation, involving a pain physician and pain psychologist with expertise in use of neuromodulation for pain management is necessary to appropriately select patients who may benefit. In 2025, a multidisciplinary pain team at the VA Northeast Ohio Healthcare System started accepting patient consults from another VA facility as part of the Telehealth Evaluation for Neuromodulation Treatment (TENT) program. The majority of patients who were referred received pain management care from clinicians outside of the VA Healthcare system.
- METHODS:** We examined the CPT data of patients receiving SCS from VA-paid community care providers and compared the rate of pre-SCS psychological assessment prior to TENT implementation to post-TENT implementation for the years 2024 and 2025.
- RESULTS:** During the one year prior to TENT implementation (2024), 68.7% of patients receiving SCS from VA-paid community care providers underwent a pre-SCS psychological assessment (based on CPT codes), compared to 86.6% in 2025.
- Open communication between the referring and consulting sites allowed for collaborative problem-solving and facilitated program adaptation.
- DISCUSSION:** The importance of comprehensive evaluation (medical and psychological) in determining candidacy for SCS is well documented. These preliminary data suggest the TENT program may be helpful to clinicians at VA Medical Centers with limited expertise in the use of neuromodulation devices for chronic pain.

National Expansion Planned



24th Annual Pain Medicine Meeting
November 13-15, 2025 | Austin, TX



Keys to Effective Implementation

- Select initial sites based on existing collaborative relationships.
- Identify points of contact for all relevant positions.
- Start small to identify opportunities for improvement.
- Frequent communication, including an implementation meeting, emails, phone calls, and secure instant messaging.

Opportunities for Improvement

- Accessing relevant pain management medical records received via VA-paid community care in a timely manner.
- Ensuring Veterans receive adequate and timely coaching to participate in virtual appointments.

1-year post-implementation

- Patient characteristics**
- 79% consult patients have pain managed by & SCS completed by VA-paid community care.
- 21% consult patients have pain managed by VA clinicians & SCS completed by VA-paid community care.
- Program metrics**
- 53% patients found not currently appropriate for SCS (recommendations included).
- 47% patients found appropriate for SCS.
 - 53% of appropriate with MH recommendations.
- 24 days = Average time from consult placement to recommendation.

Process for Multidisciplinary Spinal Cord Stimulator Candidacy Assessments which are:
Comprehensive Evidence-Based Patient-Centered

