

Coding Brief: Intraoperative Neurophysiology

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In the Current Procedural Terminology (CPT®) 2014 code set, several revisions were made in the Intraoperative Neurophysiology subsection of the CPT® 2014 code set

Intraoperative Neurophysiology

Codes 95940, 95941 describe ongoing neurophysiologic monitoring, testing, and data interpretation distinct from performance of specific type(s) of baseline neurophysiologic study(s) performed during surgical procedures. When the service is performed by the surgeon or anesthesiologist, the professional services are included in the surgeon's or anesthesiologist's primary service code(s) for the procedure and are not reported separately.

Recording and testing may be performed either personally or by a technologist who is physically present with the patient during the service. Supervision is performed either in the operating room or by real time connection outside the operating room. It is possible that monitoring may begin prior to incision, for example, if positioning the patient on the operating table prior to incision is a time of risk. The monitoring professional must be solely dedicated to performing the intraoperative neurophysiologic monitoring and must be available to intervene as necessary during the entire reported time period(s). Do not report these codes for automated monitoring devices that do not require continuous attendance by a professional qualified to interpret the testing and monitoring. Throughout the monitoring, there must be provisions for continuous and immediate communication directly with the operating room team in the surgical suite.

To report one or more simultaneous cases use 95941. When monitoring more than one procedure, there must be the immediate ability to transfer patient monitoring to another monitoring professional during the surgical procedure should that individual's exclusive attention be required for another procedure. Report 95941 for all remote or non-one-on-one monitoring time connected to each case regardless of overlap with other cases.

New Guidelines

Codes 95940, 95941 include only the ongoing neurophysiologic monitoring time distinct from performance of specific type(s) of baseline neurophysiologic study(s), or other services

such as intraoperative functional cortical or subcortical mapping. Codes 95940 and 95941 are reported based upon the time spent monitoring only, and not the number of baseline tests performed or parameters monitored. Moreover, time spent monitoring (95940, 95941) excludes time to set up, record, and interpret the baseline studies, and to remove electrodes at the end of the procedure. The time spent performing or interpreting the baseline neurophysiologic study(ies) should not be counted as intraoperative monitoring, as it represents separately reportable procedures. To report time spent waiting on standby for a case to start, use 99360. For procedures that last beyond midnight, report services using the day on which the monitoring began and using the total time monitored.

Code 95940 is reported per 15 minutes of service. Code 95940 requires reporting only the portion of time the monitoring professional was physically present in the operating room providing one-on-one patient monitoring, and no other cases may be monitored at the same time. Time spent in the operating room is cumulative. To determine units of service of 95940, use the total minutes monitoring in the operating room one-on-one. Report continuous intraoperative neurophysiologic monitoring in the operating room (95940) in addition to the services related to monitoring from outside the operating room (95941). Code 95941 should be used once per hour even if multiple methods of neurophysiologic monitoring are used during the time. Code 95941 requires the monitoring of neurophysiological data that is collected from the operating room continuously on-line in real time via a secure data link. When reporting 95941, real-time ability must be available through sufficient data bandwidth transfer rates to view and interrogate the neurophysiologic data contemporaneously.

Report 95941 for all cases in which there was no physical presence by the monitoring professional in the operating room during the monitoring time or when monitoring more than one case in an operating room. It is also used to report the time of monitoring physically performed outside of the operating room in those cases where monitoring occurred both within and outside the operating room. Do not report 95941 if the monitoring lasts 30 minutes or less.

Intraoperative neurophysiology monitoring codes 95940 and 95941 are each used to report the total duration of respective time spent providing each service, even if that time is not in a single continuous block. ◆