

Coding Update: Neurostimulators, Analysis-Programming

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The Neurostimulators, Analysis-Programming subsection guidelines, which is related to criteria used to report simple or complex programming of neurostimulators, were revised in the Current Procedural Terminology (CPT®) 2016 code set. The revised guidelines clearly describe the intent of each code in this subsection and differentiate between 'simple' vs 'complex' programming procedures (ie, identifying three or fewer parameters for simple vs four or more for complex procedures). This coding update provides an overview of the 2016 changes.

95970

Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple or complex brain, spinal cord, or peripheral (ie, cranial nerve, peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, without reprogramming

95971

simple spinal cord, or peripheral (ie, peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming

▲ 95972

complex spinal cord, or peripheral (ie, peripheral nerve, sacral nerve, neuromuscular) (except cranial nerve) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming

95974

complex cranial nerve neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming, with or without nerve interface testing, first hour

✚ 95975

complex cranial nerve neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming, each

additional 30 minutes after first hour (List separately in addition to code for primary procedure)

(Use 95975 in conjunction with 95974)

95978

Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, battery status, electrode selectability and polarity, impedance and patient compliance measurements), complex deep brain neurostimulator pulse generator/transmitter, with initial or subsequent programming; first hour

+95979

each additional 30 minutes after first hour (List separately in addition to code for primary procedure)

(Use 95979 in conjunction with 95978)

95980

Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements) gastric neurostimulator pulse generator/transmitter; intraoperative, with programming

95981

subsequent, without reprogramming

95982

subsequent, with reprogramming

Simple intraoperative or subsequent programming of the neurostimulator pulse generator/transmitter (95971) includes changes to three or fewer of the following parameters: rate; pulse amplitude; pulse duration; pulse frequency; eight or more electrode contacts; cycling; stimulation train duration; train spacing; number of programs; number of channels; alternating electrode polarities; dose time (stimulation parameters changing in time periods of minutes, including dose-lockout times); and more than one clinical feature (eg, rigidity, dyskinesia, tremor). On the other hand, complex intraoperative or subsequent programming (95972, 95974, 95975, 95978, and 95979) includes changes to more than three of the above. Codes 95974 and 95978, which are reported for the first hour of electronic analysis, requires the use of modifier 52 for analysis that is less than 31 minutes in duration.

In addition, code 95973 was identified by the American Medical Association/Specialty Society Relative Value Scale (RVS) Update Committee (RUC) Relativity Assessment Workgroup (RAW) as a code whose Medicare utilization has increased significantly. Upon review of the increased use of the code, it was found that the service as described by the code descriptor was not being reported accurately. As a result, add-on code 95973 was deleted because the findings identified that the time needed to report this service is not necessary. In addition, the codes used to report these services also do not need to reflect time within the descriptors. Therefore, code 95972 was revised to conform with current practice, and the time component was removed. ♦