

Eli's Rehab Report

News Brief: Medicare Halts Payment for sNCT Test

PM&R practices that use sensory nerve conduction threshold testing (sNCT) to diagnose conditions such as carpal tunnel syndrome (354.0) should be aware that CMS issued a national noncoverage decision for this test.

CMS transmittal AB-02-066, released on May 2, 2002, states that "insufficient scientific or clinical evidence" exists to consider the device reasonable and necessary. This decision is effective for dates of service on or after Oct. 1, 2002.

PM&R practitioners who perform sNCT (which uses a combination of nerve conduction study and TENS techniques) have been billing for it with 95904 (Nerve conduction, amplitude and latency/velocity study, each nerve; sensory), 95925 (Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper limbs) or 95999 (Unlisted neurological or neuromuscular diagnostic procedure).

Beginning Oct. 1, PM&R practices should no longer bill Medicare for sNCT, although some private payers may still cover it. Of course, the standard nerve conduction studies described in CPT Codes 2002 by codes 95900-95904 are still covered as before.

Ironically, the new HCPCS code G0255 (Current perception threshold/sensory nerve conduction threshold test [sNCT], per limb, any nerve) was recently established to denote use of the sNCT test. However, its introduction in no way means that the test is payable. Medicare carriers will deny G0255 beginning on Oct. 1.