

Eli's Rehab Report

You Be the Coder: Return to Documentation for EMG Coding

Question: My provider performed needle EMG of two extremities along with two motor and two sensory nerve conduction studies in the office. And he documented that he did six repetitive stimulations on two other nerves. Should I use a modifier on the repetitive nerve stimulation? Should I list this as six or 12 additional units?

Florida Subscriber

Answer: It's time to look back at your documentation. Ask your provider whether he is performing neuromuscular junction (NMJ) testing.

NMJ testing (<u>CPT 95937</u>, Neuromuscular junction testing [repetitive stimulation, paired stimuli], each nerve, any one method) is a diagnostic test in which the physician repetitively stimulates the muscle(s) innervated by a specific nerve. Physicians often use NMJ to confirm myasthenia gravis (358.00-358.01).

Note: Muscle fibers of patients with myasthenia gravis are easily fatigued and thus do not respond as well as muscles in healthy individuals to repeated stimulation. By repeatedly stimulating a muscle with electrical impulses, the physician can measure the fatigability of the muscle.

According to the April 2002 CPT Assistant, "repetitive stimulation studies are used to identify and to differentiate disorders of the NMJ. This test consists of recording muscle responses to a series of nerve stimuli (at variable rates), both before, and at various intervals after, exercise or transmission of high-frequency stimuli."

Test 95937 is used "in association with motor and sensory NCSs [nerve conduction studies] of the same nerve and may be reported separately. When this study is performed, the physician's report should note characteristics of the test, including the rate of repetition of stimulation, and any significant incremental or decremental response."

You should report 95937 based on documentation of each nerve tested rather than muscles or number of stimulations.