

Local Coverage Article: Billing and Coding: Outpatient Therapy Biofeedback Training (A53352)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Noridian Healthcare Solutions, LLC	01111 - MAC A	01111 - MAC A	J - E	California - Entire State
Noridian Healthcare Solutions, LLC	01112 - MAC B	01112 - MAC B	J - E	California - Northern
Noridian Healthcare Solutions, LLC	01182 - MAC B	01182 - MAC B	J - E	California - Southern
Noridian Healthcare Solutions, LLC	01211 - MAC A	01211 - MAC A	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	01212 - MAC B	01212 - MAC B	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	01311 - MAC A	01311 - MAC A	J - E	Nevada
Noridian Healthcare Solutions, LLC	01312 - MAC B	01312 - MAC B	J - E	Nevada
Noridian Healthcare Solutions, LLC	01911 - MAC A	01911 - MAC A	J - E	American Samoa California - Entire State Guam

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
				Hawaii Nevada Northern Mariana Islands

Article Information

General Information

Article ID

A53352

Original Effective Date

10/01/2015

Article Title

Billing and Coding: Outpatient Therapy Biofeedback Training

Revision Effective Date

01/01/2020

Article Type

Billing and Coding

Revision Ending Date

N/A

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

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Retirement Date

N/A

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CMS National Coverage Policy

N/A

Article Guidance

Article Text:

The amount of time the therapist, physician, or non-physician practitioner (NPP) spends working with a patient must be accurately documented in the medical record to support the units billed on a claim (for both untimed and time-based code services). Providers should be aware of the provision and billing requirements for each Current Procedural Terminology (CPT[®]) code billed.

CPT[®] code 90901 or 90912 or 90913 should be as appropriate billed when biofeedback training is provided. Biofeedback training consists of the amount of time that the biofeedback modality is attached to the patient with the feedback results to be used and/or analyzed by the patient and/or clinician. Separate billing for concurrently applied modalities and/or procedures during biofeedback training is not appropriate. For example, a therapist may provide a combination of biofeedback and therapeutic exercises during the same 15 minutes to treat a patient. In these instances, the therapeutic exercises are considered to be a component of the biofeedback training and should not be separately billed. Providers should only bill the appropriate biofeedback training code for these combined services.

Example 1

Treatment=60 Minutes	
Treatment	Biofeedback Training= 60 minutes
	Therapeutic Exercises while on Biofeedback Modality and Electrical stimulation
Bill	Biofeedback Training one (1) unit

Example 2

Treatment=60 Minutes	
Treatment	Biofeedback Training= 45 minutes
	Therapeutic Exercises without Biofeedback Training-15 minutes
Bill	Biofeedback Training= one (1) unit
	Therapeutic Exercises=one (1) unit

Treatment for Urinary Incontinence

Medicare covers biofeedback for the treatment of stress and/or urge incontinence in cognitively intact patients when documentation supports a previously failed trial of pelvic muscle exercise (PME) training. A failed trial is observed when no significant clinical improvement in urinary incontinence is noted after completing four weeks of a physician prescribed plan of PME. Medical record documentation of the failed PME trial must be present to justify coverage for biofeedback.

When biofeedback training is provided, the most appropriate biofeedback code (90901 or 90912 or 90913) should be billed. Similarly, separate billing for concurrently applied modalities and/or procedures during biofeedback training is not appropriate. For example, a therapist may provide a combination of neuromuscular electrical stimulation (NMES), biofeedback, and therapeutic exercises *during the same* 15 minutes to treat a patient with urinary incontinence. In these instances, the therapeutic exercises and the NMES are considered to be a component of the biofeedback training and should not be billed separately. Providers should only bill the appropriate biofeedback training code for these combined services.

Example 1

Treatment=60 Minutes	
Treatment	Biofeedback Training= 60 minutes
	Electrical Stimulation= 15 minutes
	Therapeutic Exercises while on Biofeedback Modality and Electrical stimulation
Bill	Biofeedback Training one (1) unit

Example 2

Treatment=60 Minutes	
Treatment	Biofeedback Training= 45 minutes
	Electrical Stimulation while on Biofeedback Modality= 15minutes
	Therapeutic Exercises without Biofeedback or Electrical Stimulation = 15 minutes
Bill	Biofeedback Training= one (1) unit
	Therapeutic Exercises= one (1) unit

Example 3

Treatment=60 Minutes	
Treatment	Biofeedback Training= 45 minutes
	Electrical Stimulation while not on Biofeedback Modality= 15minutes
	Therapeutic Exercises during same 15 minute interval
Bill	Biofeedback Training= one (1) unit
	Therapeutic Exercises (or attended Electrical Stimulation)= one (1) unit

Sources

- CMS Internet Only Manual (IOM) National Coverage Determinations (NCD) Manual, Publication 100-03, Chapter 1, Sections 30.1 and 30.1.1
- CMS IOM National Coverage Determinations (NCD) Manual, Publication 100-03, Chapter 1, Section 160.12
- CMS IOM Medicare Claims Processing Manual, Publication 100-04, Chapter 5, Section 20(B)

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

CODE	DESCRIPTION
90901	BIOFEEDBACK TRAINING BY ANY MODALITY
90912	BIOFEEDBACK TRAINING, PERINEAL MUSCLES, ANORECTAL OR URETHRAL SPHINCTER, INCLUDING EMG AND/OR MANOMETRY, WHEN PERFORMED; INITIAL 15 MINUTES OF ONE-ON-ONE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL CONTACT WITH THE PATIENT
90913	BIOFEEDBACK TRAINING, PERINEAL MUSCLES, ANORECTAL OR URETHRAL SPHINCTER, INCLUDING EMG AND/OR MANOMETRY, WHEN PERFORMED; EACH ADDITIONAL 15 MINUTES OF ONE-ON-ONE PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL CONTACT WITH THE PATIENT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)

CPT/HCPCS Modifiers

N/A

ICD-10 Codes that Support Medical Necessity

N/A

ICD-10 Codes that DO NOT Support Medical Necessity

N/A

Additional ICD-10 Information

N/A

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

N/A

Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

Other Coding Information

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
01/01/2020	R2	<p>Converted article to a Billing and Coding article.</p> <p>Add 'physician and NPP' to the qualified provider as per CPT[®] described as "sometimes" therapy codes, which can be provided by physician/NPP outside a therapy plan of care and to ensue the article encompasses both Part A and Part B.</p> <p>Deleted codes in the examples.</p> <p>Added CMS IOM Medicare Claims Processing Manual, Publication 100-04, Chapter 5, Section 20(B) under Sources.</p>
08/06/2018	R1	<p>This final article effective 8/6/2018, combines JEA A53350 into the JEB A53352 article so that both JEA and JEB contract numbers will have the same final Medicare Coverage Database (MCD) article number A53352.</p>

Associated Documents

Related Local Coverage Document(s)

N/A

Related National Coverage Document(s)

N/A

Statutory Requirements URL(s)

N/A

Rules and Regulations URL(s)

N/A

CMS Manual Explanations URL(s)

N/A

Other URL(s)

N/A

Public Version(s)

Updated on 11/06/20 with effective dates 01/01/2020 - N/A

[Updated on 07/26/18 with effective dates 08/06/2018 - 12/31/2019](#)

[Updated on 07/23/14 with effective dates 10/01/2015 - N/A](#)

Keywords

N/A