

Local Coverage Article: Noncoverage of Peripheral Nerve Field Stimulation – Coding and Billing (A55530)

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This article is being republished with a new Effective Date because the 45 days' notice of the original Final LCD effective date did not get published in a timely manner. The new effective date is 11/02/2018.

Contractor Information

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

Article Information

General Information

Article ID

A55530

Original Article Effective Date

08/27/2018

Article Title

Noncoverage of Peripheral Nerve Field Stimulation –
Coding and Billing

Revision Effective Date

N/A

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

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Revision Ending Date

N/A

Retirement Date

N/A

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Article Guidance

Article Text:

Noridian has found the current peer-reviewed data is insufficient to warrant the medical necessity of coverage for Peripheral Nerve Field Stimulation (PNFS), also known as Peripheral Subcutaneous Field Stimulation (PSFS) for any condition. Therefore, this service will not be covered for any condition.

To bill for denial, providers must bill CPT® code 64999 for both the trial and permanent insertion of the electrode array when billing for these procedures and report the following information.

Part B claims

- Enter 1 units of service (UOS)
- Enter Peripheral Nerve Field Stimulation, PNFS, Peripheral Subcutaneous Field Stimulation, or PSFS adjacent to the CPT® code 64999 and whether the procedure is for a permanent or trial in the comment/narrative field/types:
 - Loop 2400 or SV101-7 for the 5010A1 837P
 - Item 19 for paper claim

Part A claims

- Enter 1 UOS
- Enter Peripheral Nerve Field Stimulation, PNFS, Peripheral Subcutaneous Field Stimulation, or PSFS adjacent to the CPT® code 64999 and whether the procedure is for a permanent or trial in the comment/narrative field/types:
 - Line SV02-7 for 837 in electronic claim
 - Block 80 on the UB04 claim form

Coding Information

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.

CODE	DESCRIPTION
999x	Not Applicable

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 policy, 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 policy should be assumed to apply equally to all Revenue Codes.

N/A

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

CODE	DESCRIPTION
64999	UNLISTED PROCEDURE, NERVOUS SYSTEM

ICD-10 Codes that are Covered

N/A

ICD-10 Codes that are Not Covered

N/A

Revision History Information

N/A

Associated Documents

Related Local Coverage Document(s)

LCD(s)

L34328 - Peripheral Nerve Stimulation

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)

Keywords

- Part A
- Part B
- electronic claim form
- Peripheral
- Nerve
- Field
- Stimulation
- Item 19
- UB04
- 64999