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SHP Automated Nerve Conduction Testing

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Coverage

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See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy

Application to Products

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Policy is applicable to all products.

Authorization Requirements

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Pre-certification by the Plan is required.

Description of Item or Service

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Automated nerve conduction testing is completed by a diagnostic hand-held device in which electrodes are arranged in an array to evaluate the integrity and performance of the peripheral nervous system.

Non-invasive automatic, portable, or automated point of care nerve conduction monitoring systems (e.g., the NC-stat® System, the Brevio® NCS-Monitor, and the Advance™ System) test only distal motor latencies and conduction velocities for the purpose of electrodiagnostic testing

Exceptions and Limitations

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There is insufficient scientific evidence to support the medical necessity of automated nerve conduction testing for uses other than those listed in the clinical indications for

Clinical Indications for Procedure

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- · Automated Nerve Conduction Testing is considered medically necessary for ALL of the following:
 - · Individual has Optima Medicare
 - · Individual has diagnosis code of 1 or more of the following:
 - Carpal tunnel syndrome, right upper limb
 - Carpal tunnel syndrome, left upper limb

Document History

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- · Revised Dates:
 - · 2021: January
 - 2020: January 2016: April
 - 2015: April

 - 2013: January, May
 - 2012: November
- Reviewed Dates:
 - 2023: January
 - 2018: November 2017: December
 - · 2015: March
 - 2014: April
 - 2013: April
 - · 2012: April 。 2011: April
 - · 2010: April
 - 2009: April
- Effective Date: May 2008

Coding Information

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- · CPT/HCPCS codes covered if policy criteria is met:
 - · CPT 95905 Motor and/or sensory nerve conduction, using preconfigured electrode array(s), amplitude and latency/velocity study, each limb, includes F-wave study when performed, with interpretation and report

- · CPT/HCPCS codes considered not medically necessary per this Policy:
 - None

References

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References used include but are not limited to the following:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; Uptodate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD)

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Model Policy for Nerve Conduction Studies and Needle Electromyography. (2021, Mar). Retrieved Nov 09, 2022, from American Association of Neuromuscular & Electrodiagnostic Medicine: https://www.aanem.org/Advocacy/Position-Statements/Model-Policy-for-Needle-EMG-and-NCSs

AANEM POSITION STATEMENT: Establishing Standards for Acceptable Waveforms in Nerve. (2020), Retrieved Dec 22, 2021, from American Association of Neuromuscular and Electrodiagnostic Medicine (AANEM); https://www.aanem.org/Advocacy/Position-Statements/Standards-for-Waveforms M-N update.pdf

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Codes

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