

Automated Nerve Conduction Testing

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Effective Date 5/2008

Next Review Date 1/9/2024

<u>Coverage Policy</u> Medical 250

<u>Version</u> 4

Member-specific benefits take precedence over medical policy and benefits may vary across plans. Refer to the individual's benefit plan for details *.

Purpose:

This policy addresses the medical necessity of Automated Nerve Conduction Testing

Description & Definitions:

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.

Criteria:

Automated Nerve Conduction Testing is considered not medically necessary for any indication.

Coding:

Medically necessary with criteria:

Coding	Description
	None

Considered Not Medically Necessary:

Coding	Description
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.

U.S. Food and Drug Administration (FDA) - approved only products only.

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Document History:

Revised Dates:

- 2021: January
- 2020: January
- 2016: April
- 2015: April
- 2013: January, May
- 2012: November

Reviewed Dates:

- 2024: January
- 2023: January
- 2022: January
- 2018: November
- 2017: December
- 2015: March
- 2014: April
- 2013: April
- 2012: April
- 2011: April
- 2010: April
- 2009: April

Effective Date:

May 2008

References:

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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(2023). Retrieved Dec 2023, from MCG 27th Edition: https://careweb.careguidelines.com/ed27/index.html

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https://guidelines.carelonmedicalbenefitsmanagement.com/?s=Nerve+Conduction+Studies&et_pb_searchform_s_ubmit=et_search_proccess&et_pb_search_cat=11%2C1%2C96&et_pb_include_posts=yes_

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Model Policy for Nerve Conduction Studies and Needle Electromyography. (2022). Retrieved Dec 2023, from American Association of Neuromuscular & Electrodiagnostic Medicine: https://www.aanem.org/docs/default-

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National Coverage Determination (NCD) Sensory Nerve Conduction Threshold Tests (sNCTs)160.23. (2004). Retrieved Dec 2023, from Centers for Medicare & Medicaid Services: <a href="https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=270&ncdver=2&keyword=nerve%20conduction&keywordType=starts&areald=all&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1

Nc-Stat® System (NeuroMetrix Inc.) For Noninvasive Nerve Conduction Testing Of Upper Extremity Neuropathy. (2009). Retrieved Dec 2023, from Hayes: https://evidence.hayesinc.com/report/htb.ncstat

Special Notes: *

Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are solely responsible for diagnosis, treatment, and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving, and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

Services mean both medical and behavioral health (mental health) services and supplies unless We specifically tell You otherwise. We do not cover any services that are not listed in the Covered Services section unless required to be covered under state or federal laws and regulations. We do not cover any services that are not Medically Necessary. We sometimes give examples of specific services that are not covered but that does not mean that other similar services are covered. Some services are covered only if We authorize them. When We say You or Your We mean You and any of Your family members covered under the Plan. Call Member Services if You have questions.

Keywords:

SHP Automated Nerve Conduction Testing, SHP Medical 250, quantitative sensory testing, Medical 127, peripheral nervous system, nerve damage, neuropathy, nerves, nerve conduction studies, NCS, electrodiagnostic testing

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