

Nerve Conduction and Needle EMG

Reimbursement and Coding Resources - 2016

TeleEMG provides some general information about billing and coding that may be applicable to services or procedures performed with the aid of the Focus EMG machine. However, TeleEMG is an equipment company and, as such, does not participate in its customers' billing and does not guarantee that procedures performed with the aid of the Focus EMG will be covered or reimbursed by any governmental or private payors. Providers must use their own judgment when deciding whether or how to bill for services and procedures provided to a patient. TeleEMG recommends that providers contact insurance carriers directly to inquire about their coding and reimbursement policies for services or procedures performed with the aid of the Focus EMG machine.

For Medicare coverage and reimbursement information for specific localities, providers may be able to find useful information through the on-line coding resources provided by the American Medical Association ("AMA"), provided at:

<https://ocm.ama-assn.org/OCM/CPTRelativeValueSearch.do>

Providers can also obtain information directly from the Centers for Medicare and Medicaid Services ("CMS"), including the Medicare Claims Processing Manual, which is available at:

<http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912.html>

For private insurance carriers, the policies of individual carriers may differ significantly from Medicare and providers should contact their insurance carriers to obtain relevant guidelines and information.

*It is the **sole responsibility** of the provider to ensure that it is in compliance with all applicable laws, regulations, coverage decisions, policies, and contractual obligations that may govern the reimbursement of services and procedures performed with the aid of the Focus EMG machine. TeleEMG makes no promise that services or procedures performed with the aid of the Focus EMG machine can be billed to any particular payor or that they will be reimbursed by any payor.*

Nerve Conduction CPT Codes

TeleEMG is aware that there have been recent changes in CPT coding regarding nerve conduction tests. As a courtesy TeleEMG is summarizing its understanding of the changes below, but providers should rely only the advice and guidance provided by their own billing and coding departments or experts. TeleEMG also urges providers to contact payors directly to obtain guidance regarding proper coding and billing.

Starting January 1, 2013, CPT Codes 95900, 95903, 95904, and 95936, which providers had used to bill for nerve conduction studies were eliminated.

Since January 1, 2013, when a provider determines that it is appropriate to bill for a nerve conduction study, the provider needs to count the number of nerves they have studied to help identify the appropriate CPT code. The provider must decide which of the following codes accurately describes the scope of the study performed:

- 95907 for the study of 1-2 nerves
- 95908 for the study of 3-4 nerves
- 95909 for the study of 5-6 nerves
- 95910 for the study of 7-8 nerves
- 95911 for the study of 9-10 nerves
- 95912 for the study of 11-12 nerves
- 95913 for the study of 13 or more nerves
- 95923 for Galvanic Skin Response
- 95925 Somato-Sensory Evoked Potentials (SSEPs)

TeleEMG urges providers to review the most current version of the AMA's CPT Code definitions to determine whether a particular code accurately describes the services or procedures provided to a patient. The AMA provides a variety of CPT Code resources at <http://www.ama-assn.org/go/cpt>.

Needle Exam CPT Codes

When Needle exam and Nerve conductions are performed on THE SAME DAY

In addition to the Nerve Conductions CPT codes above, **Code 95885**, Needle EMG each extremity, should be used **if 4 muscles or less are studied in an extremity**

If 5 muscles or more are studied in that extremity, in addition to the Nerve Conduction CPT codes above, **Code 95886**, Needle EMG each extremity, should be used.

When Needle exam & Nerve conductions are done on TWO SEPARATE DAYS

In addition to the Nerve Conductions CPT codes above, **Code 95870**, Needle EMG each extremity, should be used **if 4 muscles or less are studied in an extremity**

If 5 muscles or more are studied in that extremity, in addition to the Nerve Conductions CPT codes above:

- CPT Code 95860, Needle EMG should be used for the study of one extremity
- CPT Code 95861, Needle EMG should be used for the study of two extremities
- CPT Code 95863, Needle EMG should be used for the study of three extremities
- CPT Code 95864, Needle EMG should be used for the study of four extremities
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