NEUROPACE

Outpatient Hospital Codes

AS OF JANUARY 1, 2017

CPT® Codes

	CODE	DESCRIPTION	APC	STATUS INDICATOR**	MEDICARE RELATIVE WEIGHT
Generator Replacement Only	61885*	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array	5463	J1	237.2750
	61886*	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to two or more electrode arrays	5464	J1	360.5682
Removal of Generator Only	61888	Revision or removal of cranial neurostimulator pulse generator or receiver	5462	J1	76.5682
Analysis and Programming	95970	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple or complex brain, spinal cord, or peripheral (i.e., cranial nerve, peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/ transmitter, without reprogramming	5734	Q1	1.3330
	95971	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple spinal cord, or peripheral (i.e., peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming	5742	S	1.4556
	95978	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, battery status, electrode selectability and polarity, impedance and patient compliance measurements), complex deep brain neurostimulator pulse generator/transmitter, with initial or subsequent programming; first hour	5742	S	1.4556
	95979	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, battery status, electrode selectability and polarity, impedance and patient compliance measurements), complex deep brain neurostimulator pulse generator/transmitter, with initial or subsequent programming; each additional 30 minutes after first hour (List separately in addition to code for primary procedure)	N/A	N	N/A

C Codes

	C1767	Generator, neurostimulator (implantable), non-rechargeable

Other HCPCS II Device Codes

	L8686	Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension
	L8688	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension

* Medicare requires hospitals to report C codes when billing for certain outpatient procedures. Non-Medicare payers may require either C codes or other HCPCS Level II codes.

** Payment status indicator provides information on how a procedure is paid in the Medicare. Status Indicator (J1) = Hospital Part B services paid through a comprehensive APC; (Q1) = Separately payable if not billed on the same date of service as a HCPCS code assigned status indicator "S," "T," or "V"; (S) = Significant procedure, not subject to multiple procedure discount; (N) = Payment is packaged into payment for other services.

ICD-10-CM Diagnosis Codes	
CODE	**DESCRIPTION**
G40.011	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, with status epilepticus
G40.019	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, without status epilepticus
G40.111	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, with status epilepticus
G40.119	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, without status epilepticus
G40.211	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, with status epilepticus
G40.219	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, without status epilepticus

Important Notes

Analysis and programming may be furnished by a provider, with or without support from a manufacturer's representative. Neither the payer nor the patient should be billed for services rendered by the manufacturer representative. Contact your local Medicare contractor or payer for interpretation of applicable policies.

Medicare requires hospitals to bill appropriate C codes for all procedures that use implantable medical devices and are assigned to a device-intensive Ambulatory Payment Classification (APC). Correct coding is important for receiving appropriate reimbursement and for setting future reimbursement rates for device-intensive APCs.

About NeuroPace and the RNS® System

NeuroPace was founded to design, develop, manufacture and market implantable devices for the treatment of neurological disorders by responsive brain stimulation. The company's first product is the RNS® System, a cranially implanted responsive neurostimulator for the treatment of medically intractable partial onset seizures in adults with epilepsy. NeuroPace received approval from the U.S. Food and Drug Administration (FDA) for the RNS® System in November 2013.

FDA Indication for Use

The RNS® System is an adjunctive therapy in reducing the frequency of seizures in individuals 18 years of age or older with partial onset seizures who have undergone diagnostic testing that localized no more than 2 epileptogenic foci, are refractory to two or more antiepileptic medications, and currently have frequent and disabling seizures (motor partial seizures, complex partial seizures and/or secondarily generalized seizures). The RNS® System has demonstrated safety and effectiveness in patients who average 3 or more disabling seizures per month over the three most recent months (with no month with fewer than two seizures), and has not been evaluated in patients with less frequent seizures.

℞ Only

See labeling for prescribing information, including indications, contraindications, warnings, precautions and adverse events.

This document has been prepared for providers using the RNS® System, and is intended for informational purposes only. NeuroPace does not promise or guarantee coverage or any level of payment by any third party payer. While NeuroPace believes this information to be correct, it is subject to change at any time. As with all reimbursement claims, providers are solely responsible for determining the appropriate codes, modifiers and charges for services provided. NeuroPace recommends that you contact your local payer with questions regarding coding and payment guidelines.

The 2017 Medicare status indicators, relative weights and list of device-intensive APCs can be found in the Federal Register, Volume 81, Number 219, November 14, 2016.

455 N. Bernardo Ave., Mountain View, CA 94043 | Reimbursement Hotline 866.726.3876 | Reimbursement Fax 866.387.7971