NEUROPACE

Neurosurgery Codes

AS OF JANUARY 1, 2018

CPT® Codes

	CODE	DESCRIPTION	MEDICARE RVUs FACILITY
Cortical Strip Lead Implantation	61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical	28.79
	61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical	45.91
Depth Lead Implantation	61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g., thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array	44.89
	61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g., thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	8.37
Generator Implantation or Replacement	61885	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array	14.94
	61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays	24.58
	64999	Unlisted procedure, nervous system	N/A
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	0.69
	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	1.17
	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	5.51
Revision or Removal of Electrodes or Generator	61880	Revision or removal of intracranial neurostimulator electrodes	16.55
	61888	Revision or removal of cranial neurostimulator pulse generator or receiver	11.58

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.

According to CPT guidelines, complex programming is defined as changes to four or more parameters. The parameters include: rate, pulse amplitude, pulse duration, pulse frequency, eight or more electrode contacts, cycling, stimulation train duration, train spacing, number of programs, number of channels, alternating electrode polarities, dose time, or more than one clinical feature. In addition, CPT guidelines instruct providers to append modifier -52 to code 95978 if complex programming lasts less than 31 minutes.

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 2018 Medicare RVUs can be found in the Federal Register, Volume 82, Number 219, November 15, 2017. The complete Medicare Physician Fee Schedule can be found at www.cms.gov/apps/physician-fee-schedule/overview.aspx.

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