

Related Change Request (CR) #: 3339

Medlearn Matters Number: MM3339

Related CR Release Date: June 18, 2004

Related CR Transmittal #: 15

Effective Date: April 1, 2004

Implementation Date: April 1, 2004

NCD: Sensory Nerve Conduction Threshold Test (sNCTs)

Provider Types Affected

Physicians, suppliers, and providers

Provider Action Needed

This instruction reaffirms the existing Medicare noncoverage policy on any type of Sensory Nerve Conduction Threshold Test (sNCT), and the device(s) used to perform the test, to diagnose sensory neuropathies or radiculopathies. This instruction constitutes a technical correction to previously issued Change Request (CR) 2988, and CR2988 should be discarded and replaced with this instruction. CR2988 was issued on March 19, 2004.

Background

As a result of reconsideration, this instruction reaffirms the existing Medicare noncoverage policy on any type of Sensory Nerve Conduction Threshold Test (sNCT), and the device(s) used to perform the test, to diagnose sensory neuropathies or radiculopathies.

The revision to Section 160.23 of Pub. 100-03 is a National Coverage Determination (NCD), and NCDs are binding on all Medicare carriers, fiscal intermediaries, quality improvement organizations, health maintenance organizations, competitive medical plans, and health care prepayment plans. Under 42 CFR 422.256(b), an NCD that expands coverage is also binding on a Medicare Advantage Organizations. In addition, an administrative law judge may not review an NCD. (See the Social Security Act, Section 1869(f)(1)(A)(i))

Note that this instruction constitutes a technical correction to previously issued Change Request (CR) 2988. CR2988 should be discarded and replaced with this instruction.

Implementation

The implementation date for this instruction is April 1, 2004.

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Related Instructions

The updated manual instructions are also included in the official instruction issued to your carrier, and it can be found by going to:

http://www.cms.hhs.gov/manuals/transmittals/comm_date_dsc.asp

From that Website, look for CR3339 in the CR NUM column on the right, and click on the file for that CR.

If you have any questions, please contact your carrier/intermediary at their toll-free number, which may be found at:

<http://www.cms.hhs.gov/medlearn/tollnums.asp>.

Additional Information

The following is the revision to the Medicare National Coverage Determinations Manual, Pub. 100-03, Chapter 1 (Coverage Determinations), Section 160 (Nervous System), Subsection 160.23 (Sensory Nerve Conduction Threshold Tests (sNCTs)). Revised sections are ***bolded and italicized***.

Medicare National Coverage Determinations Manual

Chapter 1 - Coverage Determinations

160 - Nervous System

160.23 - Sensory Nerve Conduction Threshold Tests (sNCTs)

160.23 - Sensory Nerve Conduction Threshold Tests (sNCTs)

A. General

Sensory Nerve Conduction Threshold Tests (sNCT) is a psychophysical assessment of both central and peripheral nerve functions. It measures the detection threshold of accurately calibrated sensory stimuli. This procedure is intended to evaluate and quantify function in both large and small caliber fibers for the purpose of detecting neurologic disease. Sensory perception and threshold detection are dependent on the integrity of both the peripheral sensory apparatus and peripheral-central sensory pathways. In theory, an abnormality detected by this procedure may signal dysfunction anywhere in the sensory pathway from the receptors, the sensory tracts, the primary sensory cortex, to the association cortex.

This procedure is different and distinct from assessment of nerve conduction velocity, amplitude and latency. It is also different from short-latency somatosensory evoked potentials.

Effective October 1, 2002, CMS initially concluded that there was insufficient scientific or clinical evidence to consider the sNCT test and the device used in performing this test reasonable and necessary within the meaning of section 1862(a)(1)(A) of the law.

Therefore, sNCT was noncovered.

Effective April 1, 2004, based on a reconsideration of current Medicare policy for sNCT, CMS concludes that ***the use of any type of sNCT device (e.g. "current output" type device used to perform current perception threshold (CPT), pain perception threshold (PPT), or pain tolerance threshold (PTT) testing or "voltage input" type device used for voltage-nerve conduction threshold (v-NCT) testing) to diagnose sensory neuropathies or radiculopathies in Medicare beneficiaries is not reasonable and necessary.***

B. Nationally Covered Indications

Not applicable.

C. Nationally Noncovered Indications

All uses of sNCT to diagnose sensory neuropathies or radiculopathies are noncovered.

(This NCD last reviewed ***June*** 2004.)

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