



Clover Health Intraoperative Neuromonitoring Reimbursement Policy

Policy #RP-040

Policy Title	Intraoperative Neuromonitoring Reimbursement Policy
Policy Department	Payment Strategy & Optimization
Effective Date	4/1/2020
Revision Date(s)	
Next Review Date	

Disclaimer:

Clover Health applies The Center for Medicare and Medicaid Services (CMS) criteria and guidelines, National Coverage Determinations (NCD), Local Coverage Determinations (LCD), Clover Policies, and MCG for determining medical necessity. Clover Policies are intended to provide a standard guideline but are not used to preempt providers' judgment in rendering services. Providers are expected to provide care based on best practices and use their medical judgment for appropriate care.

Description:

This policy addresses the reimbursement of Intraoperative Neuromonitoring (IONM) services performed during surgery.

Definitions:

- **Intraoperative Neuromonitoring (IONM)**
 - Is the use of electrophysiological methods to monitor the functional integrity of certain neural structures during surgery. The purpose of IONM is to reduce the risk of damage to the patient's nervous system, and to provide functional guidance to the surgeon and anesthesiologist.



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Policy:

Per the American Medical Association, Intraoperative Neuromonitoring (IONM) is the use of electrophysiological methods to monitor the functional integrity of certain neural structures during surgery. The purpose of IONM is to reduce the risk of damage to the patient's nervous system, and to provide functional guidance to the surgeon and anesthesiologist.

IONM codes are reported based upon the time spent monitoring only, and not the number of baseline tests performed or parameters monitored. In addition, time spent monitoring excludes time to set up, record, and interpret the baseline studies, and to remove electrodes at the end of the procedure. Time spent performing or interpreting the baseline neurophysiologic study(ies) should not be counted as intraoperative monitoring, as it represents separately reportable procedures.

According to The Centers for Medicare and Medicaid Services (CMS), Intraoperative neurophysiology testing (HCPCS/CPT codes 95940 and G0453) should not be reported by the physician performing an operative or anesthesia procedure since it is included in the global package. The use of either modifier 26 or TC does not apply to codes 95940 or G0453.

The American Academy of Neurology (AAN) states IONM service 95940 should be performed in Place of Service (POS) 19, 21, 22 or 24. Therefore, Clover Health will only reimburse 95940 and G0453 services when reported with POS 19, 21, 22 and 24.

Claim Codes (if applicable)

- **95940**
 - Continuous intraoperative neurophysiology monitoring in the operating room, one on one monitoring requiring personal attendance, each 15 minutes (List separately in addition to code for primary procedure)
- **G0453**
 - Continuous intraoperative neurophysiology monitoring, from outside the operating room (remote or nearby), per patient, (attention directed exclusively to one patient) each 15



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	minutes (list in addition to primary procedure)
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References
Billing and Coding: Intraoperative Neurophysiological Testing (A56722)
LCD-L35003