# Reimbursement Policy: Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Tremor (Commercial and Medicare)



POLICY NUMBER	EFFECTIVE DATE	APPROVED BY
R20250032	1/01/2025	RPC (Reimbursement Policy Committee)

## IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY:

ConnectiCare has policies in place that reflect billing or claims payment processes unique to our health plans. Current billing and claims payment policies apply to all our products, unless otherwise noted. ConnectiCare will inform you of new policies or changes in policies through updates to the Provider Manual and/or provider news. The information presented in this policy is accurate and current as of the date of this publication.

The information provided in ConnectiCare's policies is intended to serve only as a general reference resource for services described and is not intended to address every aspect of a reimbursement situation. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates, physician or other provider contracts, the member's benefit coverage documents and/or other reimbursement, medical or drug policies. Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by ConnectiCare due to programming or other constraints; however, ConnectiCare strives to minimize these variations.

ConnectiCare follows coding edits that are based on industry sources, including, but not limited to; CPT guidelines from the American Medical Association, specialty organizations, and CMS including NCCI and MUE. In coding scenarios where there appears to be conflicts between sources, we will apply the edits we determine are appropriate. ConnectiCare uses industry-standard claims editing software products when making decisions about appropriate claim editing practices. Upon request, we will provide an explanation of how ConnectiCare handles specific coding issues. If appropriate coding/billing guidelines or current reimbursement policies are not followed, ConnectiCare may deny the claim and/or recoup claim payment.

### Overview:

The purpose of this policy is to outline coding and reimbursement guidelines for Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Tremor (CPT code 61715). ConnectiCare will reimburse for MRgFUS when reimbursement guidelines indicated below are met.

### **Guidelines:**

Effective 1/01/2025, ConnectiCare has aligned with CMS and requires Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Tremor to be reported with CPT code 61715.

Physicians and/or other health care professionals are expected to submit codes that best represent the services provided based on the American Medical Association (AMA) and CMS guidelines. ConnectiCare may request medical records; the submitted medical record must support the use of the selected ICD-10-CM code(s). The submitted CPT/HCPCS code must describe the service performed.

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# **Applicable Codes:**

CPT Code	Description
61715	Collection of blood specimen from a completely implantable venous access device

# Allowable ICD-10 Codes:

ICD-10 Code	Description
G20.A1	Parkinson's disease without dyskinesia, without mention of fluctuations
G20.A2	Parkinson's disease without dyskinesia, with fluctuations
G20.B1	Parkinson's disease with dyskinesia, without mention of fluctuations
G20.B2	Parkinson's disease with dyskinesia, with fluctuations
G20.C	Parkinsonism, unspecified

## References

- 1. Centers for Medicare and Medicaid Services, Medicare Coverage Database, Billing and Coding: Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Tremor, <a href="https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=57435&ver=12">https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=57435&ver=12</a>
- 2. American Medical Association, Current Procedural Terminology (CPT®) and associated publications
- 3. Centers for Medicare and Medicaid Services, CMS Manual System and other publications and services

# **Revision history**

DATE	REVISION
12/2024	New Policy