

Medical Coverage Policy | Topographic Brain Mapping



EFFECTIVE DATE: 04|20|2010
POLICY LAST UPDATED: 11|05|2019

OVERVIEW

Topographic brain mapping (TBM) is an extension of conventional electroencephalography.

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Not applicable

POLICY STATEMENT

BlueCHiP for Medicare

Topographic brain mapping is not covered as the evidence is insufficient to determine the effects of the technology on health outcomes.

Commercial Products

Topographic brain mapping is considered not medically necessary as the evidence is insufficient to determine the effects of the technology on health outcomes.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate section of the Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable not medically necessary/not covered benefits/coverage.

BACKGROUND

TBM, sometimes referred to as brain electrical activity mapping (BEAM), involves the computerized analysis and topographic display of electroencephalogram (EEG) rhythms and evoked potential data on a color video screen. A wide assortment of maps can be created to represent different measurement patterns. The purpose of TBM is to identify patterns that distinguish pathological groups from normal ones.

There is no scientific literature to support the use of TBM, therefore, topographic brain mapping is considered not medically necessary.

CODING

The following HCPCS code is not covered for BlueCHiP for Medicare and not medically necessary for Commercial Products:

S8040 Topographic brain mapping

S8040 is the correct code for topographic brain mapping and must be used. Use of a CPT code in its place would be considered incorrect coding.

RELATED POLICIES

Not applicable

PUBLISHED

Provider Update, January 2020
Provider Update, May 2018
Provider Update, May 2017
Provider Update, May 2016
Provider Update, October 2015

REFERENCES

Blue Cross and Blue Shield Association. Topographic Brain Mapping 2.01.10. Policy archived July 2009

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