

Medical Coverage Policy | Topographic Brain Mapping



EFFECTIVE DATE: 04|20|2010
POLICY LAST UPDATED: 08|04|2015

OVERVIEW

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

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Not applicable

POLICY STATEMENT

BlueCHiP for Medicare and Commercial Products

Topographic brain mapping is considered not medically necessary as there is insufficient peer-reviewed scientific literature that demonstrates that the procedure/service is effective.

COVERAGE

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

BACKGROUND

TBM, sometimes referred to as brain electrical activity mapping (BEAM), involves the computerized analysis and topographic display of 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

BlueCHiP for Medicare and Commercial Products

The following code is considered not medically necessary:

S8040

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, October 2015

Provider Update, August 2014

Provider Update, August 2013

Provider Update, June 2012

Provider Update, June 2011
Provider Update, June 2010

REFERENCES

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

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