

## 2012 Physician Reference Guide for Coding of TMS Therapy

#### TMS Therapy

90867 Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management.

(Report only once per course of treatment)

(Do not report 90867 in conjunction with 95928, 95929, 90868, 90869)

- 90868 Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; subsequent delivery and management, per session
- 90869 Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; subsequent motor threshold re-determination with delivery and management

(Do not report 90869 in conjunction with 90867, 90868)

(If a significant, separately identifiable Evaluation and Management, medication management, psychotherapy or psychotherapy with evaluation and management service is performed, the appropriate E/M, psychotherapy, psychotherapy with E/M service or 90862 may be reported in addition to 90867-90869. Evaluation and management activities directly related to cortical mapping, motor threshold determination, delivery and management of TMS are not separately reported.)

Please Note: The Final Rule for the Medicare Physician Fee Schedule (MPFS) for calendar year 2012, recently published by the Centers for Medicare and Medicaid Services (CMS), includes three new Category I CPT codes for physician reimbursement for TMS procedures that will replace the two Codes used in CY 2011. For further information, please refer to Medicare's website by accessing: https://www.cms.gov/physician/resched/p/shm/itemdetail.asp?//temid=CMS12S3669

#### Psychiatric Services

These are existing codes that may be applicable for use in conjunction with performing TMS Therapy when appropriate for the patient's individual case.

- 90801 Psychiatric diagnostic interview examination (May be applicable during a course of TMS Therapy.)
- 90802 Interactive psychiatric diagnostic interview examination using play equipment, physical devices, language interpreter, or other mechanisms of communication (May be applicable for assessing if a patient is appropriate for TMS Therapy.)
- 90862 Pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy (May be applicable during a course of TMS Therapy.)

#### Modifiers

Modifiers indicate that a service was altered in some way from the stated CPT descriptor without changing the definition. CPT modifiers are two-digit alphanumeric codes listed after a procedure code and separated from the CPT code by a hyphen.

- Modifier 25 This is used to indicate significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service.
- Please Note: Evaluation and Management (E/M) codes may also be applicable for use in conjunction with performing TMS Therapy. Please refer to the proper coding resources for the full descriptions and guidelines.

Personner: 2012 CPT Current Procedural Terminology Professional Editor, American Medical Association \*Federal Register Notwards XX, 2011, Vol. XX, No. XXX (CXX, XXXX)

Centers for Medicare & Medicard Derivine, Website accessed on November 14, 2011 159, News 201, post-Thispatoid Section 2

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# **2013 Tms Reference Guide**

**Mark Steyvers** 

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#### **Table of Contents 2013 Tms Reference Guide**

- 1. Understanding the eBook 2013 Tms Reference Guide
  - The Rise of Digital Reading 2013 Tms Reference Guide
  - Advantages of eBooks Over Traditional Books
- 2. Identifying 2013 Tms Reference Guide
  - Exploring Different Genres
  - o Considering Fiction vs. Non-Fiction
  - Determining Your Reading Goals
- 3. Choosing the Right eBook Platform
  - Popular eBook Platforms
  - Features to Look for in an 2013 Tms Reference Guide
  - User-Friendly Interface
- 4. Exploring eBook Recommendations from 2013 Tms Reference Guide
  - Personalized Recommendations
  - 2013 Tms Reference Guide User Reviews and Ratings
  - 2013 Tms Reference Guide and Bestseller Lists

- 5. Accessing 2013 Tms Reference Guide Free and Paid eBooks
  - 2013 Tms Reference Guide Public Domain eBooks
  - 2013 Tms Reference Guide eBook Subscription Services
  - 2013 Tms Reference Guide Budget-Friendly Options
- 6. Navigating 2013 Tms Reference Guide eBook Formats
  - o ePub, PDF, MOBI, and More
  - 2013 Tms Reference Guide Compatibility with Devices
  - 2013 Tms Reference Guide Enhanced eBook Features
- 7. Enhancing Your Reading Experience
  - Adjustable Fonts and Text Sizes of 2013 Tms Reference Guide
  - Highlighting and Note-Taking 2013 Tms Reference Guide
  - Interactive Elements 2013 Tms Reference Guide
- 8. Staying Engaged with 2013 Tms Reference Guide
  - Joining Online Reading Communities
  - Participating in Virtual Book Clubs
  - Following Authors and Publishers 2013 Tms Reference Guide
- 9. Balancing eBooks and Physical Books 2013 Tms Reference Guide
  - Benefits of a Digital Library
  - ∘ Creating a Diverse Reading Collection 2013 Tms Reference Guide
- 10. Overcoming Reading Challenges
  - Dealing with Digital Eye Strain
  - Minimizing Distractions
  - Managing Screen Time
- 11. Cultivating a Reading Routine 2013 Tms Reference Guide
  - Setting Reading Goals 2013 Tms Reference Guide
  - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of 2013 Tms Reference Guide
  - Fact-Checking eBook Content of 2013 Tms Reference Guide
  - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks
- 14. Embracing eBook Trends
  - Integration of Multimedia Elements
  - Interactive and Gamified eBooks

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