



Preview questionnaire

Responsive neurostimulation for the treatment of refractory partial epilepsy

For Medicare Plus BlueSM, Blue Care Network commercial and BCN AdvantageSM

Effective Sept. 11, 2022

Responsive neurostimulation for the treatment of refractory partial epilepsy

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit authorization requests through the e-referral system.

The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

If all questions are answered, e-referral will either approve or pend the case. If the case pends and we cannot authorize it, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We may retrospectively monitor compliance with authorization requirements.

Applicable procedure codes: *61863, *61864, *61868, *61880, *61885, *61888, *95836

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See below for the questions you'll encounter in the e-referral system.

Q Does the patient have focal epilepsy?



Possible answers: Yes No N/A

Q Does the patient have focal seizures with 1 or 2 well-localized seizure foci identified?



Possible answers: Yes No N/A



**Blue Care
Network**
of Michigan

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of the Blue Cross and Blue Shield Association

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Q Does the patient have an average of three or more disabling seizures (for example, motor focal seizures, complex focal seizures or secondary generalized seizures) per month over the prior three months?

A

Possible answers: Yes No N/A

Q Has the patient tried and failed at least two appropriate antiepileptic medications at therapeutic doses?

A

Possible answers: Yes No N/A

Q Is the patient a candidate for focal resective epilepsy surgery (for example, has an epileptic focus near the eloquent cerebral cortex or, has bilateral temporal epilepsy)?

A

Possible answers: Yes No N/A

Q Does the patient have any of the contraindications below for responsive neurostimulation device placement (A-C)? A. Three or more specific seizure foci. B. Presence of primary generalized epilepsy. C. Presence of a rapidly progressive neurologic disorder.

A

Possible answers: Yes No N/A