



Harmony Behavioral Health, Inc.

Harmony Behavioral Health of Florida, Inc.

Harmony Health Plan of Illinois, Inc.

HealthEase of Florida, Inc.

*'Ohana Health Plan, a plan offered by
WellCare Health Insurance of Arizona, Inc.*

WellCare Health Insurance of Illinois, Inc.

WellCare Health Insurance of New York, Inc.

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WellCare of Ohio, Inc.

WellCare of Texas, Inc.

WellCare Prescription Insurance, Inc.

Visual Evoked Potential Studies

Policy Number: HS-102

Original Effective Date: 5/7/2009

Revised Date(s): 8/11/2009; 8/20/2010;
8/2/2011

DISCLAIMER

The Clinical Coverage Guideline is intended to supplement certain standard WellCare benefit plans. The terms of a member's particular Benefit Plan, Evidence of Coverage, Certificate of Coverage, etc., may differ significantly from this Coverage Position. For example, a member's benefit plan may contain specific exclusions related to the topic addressed in this Clinical Coverage Guideline. When a conflict exists between the two documents, the Member's Benefit Plan always supersedes the information contained in the Clinical Coverage Guideline. Additionally, Clinical Coverage Guidelines relate exclusively to the administration of health benefit plans and are NOT recommendations for treatment, nor should they be used as treatment guidelines. The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

APPLICATION STATEMENT

The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

BACKGROUND

Visual evoked potentials (VEPs) constitute the brain's electrical response to a visual stimulus and are indicative of lesions in the visual pathway, including in the optic nerves. Standard VEP testing uses three scalp electrodes over the occipital cortex to measure response to a reversing black and white checkerboard pattern and are thus referred to as pattern onset VEPs or PVEPs. Rather than a reversing pattern, the stimulus may be a series of stroboscope flashes; this type of VEP is called flash VEP (FVEP). PVEP is more common, more reliable, and more sensitive to disorders of the ocular pathway than FVEP. Other variants are focal VEPs, in which restricted areas of the visual field are tested one at a time; motion VEPs, in which a pattern is shifted from side to side; and multifocal VEPs (mfVEPs), which test many visual field locations independently and concurrently and produce a topographical representation of defects. Demyelinating diseases, such as multiple sclerosis are associated with abnormal VEPs. VEPs identify involvement of the visual pathway that may or may not result in actual visual disturbances. The type of VEP abnormality usually thought to be associated with MS is an increase in latency (delayed response) rather than amplitude reduction. Although cranial MRI is considered the best single contributor to a diagnosis of MS, VEP testing can provide additional information when MRI findings are too few, or in individuals in whom MRI abnormalities would have less specificity.

A more important role for VEP testing may be for monitoring or predicting the clinical progression of MS. The most common clinical measure of disability in MS, the Expanded Disability Status Scale (EDDS) score, is not highly reliable and has limitations due to its ordinal scale, its imprecise definitions, and the possibility of unmasking during patient-physician interaction. VEP testing does not have these limitations.

POSITION STATEMENT

Visual evoked potentials (VEPs) **are considered medically necessary** for ANY of the following indications:

- Monitoring multiple sclerosis disease progression in members with a confirmed diagnosis after MRI has been completed; **OR**,
- Identify persons at increased risk for developing clinically definite multiple sclerosis; **OR**,
- Assessing response to treatment in members with multiple sclerosis; **OR**,
- To localize the cause of a visual field defect not explained by lesions seen on CT or MRI, metabolic disorders, or infectious disease

Visual evoked potentials (VEPs) **are considered experimental and investigational** for ANY of the following indications:

- Routine screening of infants; **OR**,
- Assessment of vision in a child who has potential visual disturbance and is unable to cooperate with standard visual testing; **OR**,
- Detection of glaucoma; **OR**,
- Evaluation of the visual pathways in neurodegenerative diseases; **OR**,
- Any indication not listed in the medically necessary list above

CODING**Covered CPT® Codes**

95930 Visual evoked potential (VEP) testing central nervous system, checkerboard or flash

ICD-9-CM Procedure Codes - No applicable code

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HCPCS Codes - No applicable code

Covered ICD-9-CM Diagnosis Codes

- 340** Multiple Sclerosis
- 368.40** Visual field defect, unspecified
- V17.2** Family History of Neurological Disease, specifically Multiple Sclerosis

Non-Covered ICD-9-CM Diagnosis Codes

- V80.0** Special Screening for Neurological eye conditions
- V80.1** Special Screen for Glaucoma
- V80.2** Special Screening for Other Eye conditions; cataract, congenital anomaly of eye; senile macular lesions
- V72.0** Examination of Eyes and vision

*Current Procedural Terminology (CPT®) ©2010 American Medical Association: Chicago, IL.

REFERENCES

Peer Reviewed

1. Hayes Directory. Visual Evoked Potentials for Diagnosing and Monitoring Glaucoma. February 16, 2006.
2. Hayes Directory. Visual Evoked Potentials in the Diagnosis/Prognosis of Multiple Sclerosis. March 1, 2006.
3. Visual Evoked Potentials Standard (2004). Odom, etal, Documenta Ophthalmologia, 108, 115-123.

Government Agencies, Professional and Medical Organizations

1. Centers for Medicare and Medicaid Services (CMS), National Coverage Determination (NCD) for Evoked Response tests (160.10). January 15, 1980.

Other

1. Pediatric Coding Alert, Avoid 99173 Bundles by Offering Readily Paid VEP Vision Testing. The Coding Institute, 11 (6), 2008.

HISTORY AND REVISIONS

Date	Action
12/1/2011	<ul style="list-style-type: none">• New template design approved by MPC.
8/2/2011	<ul style="list-style-type: none">• Approved by MPC.