Medical Policy
Neurofeedback

Table of Contents
• Policy: Commercial
• Policy: Medicare
• Authorization Information
• Coding Information
• Description
• Policy History
• Information Pertaining to All Policies
• References

Policy Number: 515
BCBSA Reference Number: 2.01.28
NCD/LCD: NA

Related Policies
• Treatment of Urinary Incontinence #308
• Biofeedback for the Treatment of Headache #152
• Biofeedback as a Treatment of Urinary Incontinence #173
• Biofeedback for Miscellaneous Indications #187
• Biofeedback as a Treatment of Chronic Pain #210

Policy
Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity
Medicare HMO BlueSM and Medicare PPO BlueSM Members

Neurofeedback is INVESTIGATIONAL.

Prior Authorization Information
Pre-service approval is required for all inpatient services for all products.
See below for situations where prior authorization may be required or may not be required for outpatient services.
Yes indicates that prior authorization is required.
No indicates that prior authorization is not required.
N/A indicates that this service is primarily performed in an inpatient setting.

<table>
<thead>
<tr>
<th>Outpatient</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial Managed Care (HMO and POS)</td>
<td>This is not a covered service.</td>
</tr>
<tr>
<td>Commercial PPO and Indemnity</td>
<td>This is not a covered service.</td>
</tr>
<tr>
<td>Medicare HMO BlueSM</td>
<td>This is not a covered service.</td>
</tr>
<tr>
<td>Medicare PPO BlueSM</td>
<td>This is not a covered service.</td>
</tr>
</tbody>
</table>
Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement. Please refer to the member’s contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.

Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.

### CPT Codes

<table>
<thead>
<tr>
<th>CPT codes</th>
<th>Code Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90875</td>
<td>Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy; approx 20-30 minutes</td>
</tr>
<tr>
<td>90876</td>
<td>Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy; approx 45-50 minutes</td>
</tr>
<tr>
<td>90901</td>
<td>Biofeedback training by any modality</td>
</tr>
</tbody>
</table>

### Neurofeedback

Neurofeedback (also known as EEG biofeedback) describes techniques of providing feedback about neuronal activity, as measured by electroencephalogram (EEG), in order to teach patients to self-regulate brain activity. Neurofeedback may utilize several techniques in an attempt to normalize unusual patterns of brain function in patients with central nervous system (CNS) disorders.

Neurofeedback differs from traditional forms of biofeedback in that the information fed back to the patient (via EEG tracings) is a direct measure of global neuronal activity, or brain state, compared to feedback of the centrally regulated physiologic processes, such as tension of specific muscle groups or skin temperature. The patient may be trained to either increase or decrease the prevalence, amplitude, or frequency of specified EEG waveforms (e.g., alpha, beta, theta waves), depending on the changes in brain function associated with the particular disorder. It has been proposed that training of slow cortical potentials can regulate cortical excitability and that using the EEG as a measure of CNS functioning can help train patients to modify or control their abnormal brain activity.

Neurofeedback is being explored for the treatment of a variety of disorders including attention deficit/hyperactivity disorder, learning disabilities, traumatic brain injury, seizure disorders, menopausal hot flashes, panic and anxiety disorders, fibromyalgia, tinnitus, substance abuse disorders, depression, stress management, and sleep disorders.

### Summary

The scientific evidence does not permit conclusions concerning the effect of the technology on health outcomes; a number of questions regarding clinical efficacy remain to be answered before applying neurofeedback techniques to patients with ADHD, insomnia, epilepsy, Tourette syndrome, autism spectrum disorder, fibromyalgia, migraine headache, substance abuse disorder, or other neurologic disorders. Neurofeedback is considered investigational.

### Policy History

<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/2017</td>
<td>New references added from BCBSA National medical policy.</td>
</tr>
<tr>
<td>8/2015</td>
<td>New references added from BCBSA National medical policy.</td>
</tr>
<tr>
<td>9/2014</td>
<td>New references added from BCBSA National medical policy.</td>
</tr>
<tr>
<td>10/2013</td>
<td>New references from BCBSA National medical policy.</td>
</tr>
</tbody>
</table>
Information Pertaining to All Blue Cross Blue Shield Medical Policies
Click on any of the following terms to access the relevant information:

Medical Policy Terms of Use
Managed Care Guidelines
Indemnity/PPO Guidelines
Clinical Exception Process
Medical Technology Assessment Guidelines

References