BrainsWay Deep TMS™ Coding

ICD-10-CM Diagnostic Codes

ICD-10-CM codes that would commonly be used when billing for TMS treatment are shown in the tables below.

Major Depressive Disorder (MDD)

Code	Description
F32.1	Major depressive disorder, single episode, moderate
F32.2	Major depressive disorder, single episode, severe w/o psychotic features
F33.1	Major depressive disorder, recurrent, moderate
F33.2	Major depressive disorder, recurrent severe without psychotic features

Obsessive-Compulsive Disorder (OCD)

Code	Description
F42.2	Mixed obsessional thoughts and acts
F42.3	Hoarding disorder
F42.4	Excoriation (skin-picking) disorder
F42.8	Other obsessive-compulsive disorder
F42.9	Obsessive-compulsive disorder, unspecified

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Code	Description
F17.200	Nicotine dependence, unspecified, uncomplicated
F17.203	Nicotine dependence, unspecified, with withdrawal
F17.208	Nicotine dependence, unspecified, with other nicotine-induced disorders
F17.209	Nicotine dependence, unspecified, with unspecified nicotine-induced disorders
F17.210	Nicotine dependence, cigarettes, uncomplicated
F17.213	Nicotine dependence, cigarettes, with withdrawal
F17.218	Nicotine dependence, cigarettes, with other nicotine-induced disorders
F17.219	Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders
F17.220	Nicotine dependence, chewing tobacco, uncomplicated
F17.223	Nicotine dependence, chewing tobacco, with withdrawal
F17.228	Nicotine dependence, chewing tobacco, with other nicotine-induced disorders
F17.229	Nicotine dependence, chewing tobacco, with unspecified nicotine-induced disorders
F17.290	Nicotine dependence, other tobacco product, uncomplicated
F17.293	Nicotine dependence, other tobacco product, with withdrawal
F17.298	Nicotine dependence, other tobacco product, with other nicotine-induced disorders
F17.299	Nicotine dependence, other tobacco product, with unspecified nicotine-induced disorders

CPT Codes for BrainsWay Deep TMS

Code	Description
90867	**TMS Initial MT Determination & Treatment** Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management (report only once per course of treatment)
90868	**TMS Daily Treatment** Subsequent delivery and management of TMS, per session
90869	**TMS MT Re-Determination & Treatment** Subsequent motor threshold re-determination with delivery and management (should be done weekly or in case of medication or clinical changes that may alter the MT)

CPT Modifiers

CPT modifiers clarify services and procedures performed by providers. Although the CPT code and description remain unchanged, modifiers indicate that the description of the service or procedure performed has been altered. CPT modifiers are reported as two-digit numeric codes added to the five-digit CPT code.

Code	Description
-25	Significant, Separately Identifiable Evaluation and Management (E/M) Service by the Same Physician or Other Qualified Health Care Professional on the Same Day of the Procedure or Other Service Evaluation and Management codes may also be reported on the same date of service as Deep TMS Therapy
-59	Distinct Procedural Service indicates that a procedure or service was distinct or independent from other non-E/M services performed on the same day

Revenue Codes

Code	Description
900	**Behavioral Health Treatment/Services: general clarification**
914	**Psychiatric/Psychological services: individual therapy**

Initial Psychiatric Evaluation

Code	Description
90791	**Psychiatric diagnostic evaluation**
90792	**Psychiatric diagnostic evaluation with medical services**
+90785	**Interactive complexity (List separately in addition to the code for primary procedure)**

Evaluation and Management [E/M]

CPT codes of services that may be performed in conjunction on the same date as Deep TMS.

Code	Description
99202	**New Patient Office or Other Outpatient Services – Level 2** • Office or other outpatient visit for the evaluation and management of a new patient, which requires an expanded problem-focused history, an expanded problem-focused examination, and <u>straightforward</u> medical decision making. • Usually, the presenting problem(s) are of low to moderate severity. • When using time for coding, 15–29 minutes of total time is spent on the date of the encounter.
99203	**New Patient Office or Other Outpatient Services – Level 3** • Office or other outpatient visit for the evaluation and management of a new patient, which requires a detailed medical history, a detailed examination, and <u>low</u> level of medical decision making. • Usually, the presenting problem(s) are of moderate severity. • When using time for coding, 30–44 minutes of total time is spent on the date of the encounter.
99204	**New Patient Office or Other Outpatient Services – Level 4**

	- Office or other outpatient visit for the evaluation and management of a new patient, which requires a comprehensive medical history, a comprehensive examination, and <u>moderate</u> level of medical decision making. - Usually, the presenting problem(s) are of moderate to high severity. - When using time for coding, 45–59 minutes of total time is spent on the date of the encounter.
99205	**New Patient Office or Other Outpatient Services – Level 5** - Office or other outpatient visit for the evaluation and management of a new patient, which requires a comprehensive medical history, a comprehensive examination, and <u>high</u> level of medical decision making. - Usually, the presenting problem(s) are of moderate to high severity. - When using time for coding, 60–74 minutes of total time is spent on the date of the encounter.
99211	**Established Patient Office or Other Outpatient Services – Level 1** - Office or other outpatient visit for the evaluation and management of an established patient that <u>may not require the presence of a physician</u> or other qualified health care professional. Usually, the presenting problem(s) are <u>minimal</u>.
99212	**Established Patient Office or Other Outpatient Services – Level 2** - Office or other outpatient visit for the evaluation and management of an established patient, which requires TWO out of THREE of the following: (1) problem-focused history, (2) problem-focused exam, (3) <u>straightforward</u> medical decision making. - Usually, the presenting problem(s) are straightforward.

	• When using time for coding, 10–19 minutes of total time is spent on the date of the encounter.
99213	**Established Patient Office or Other Outpatient Services – Level 3** • Office or other outpatient visit for the evaluation and management of an established patient, which requires TWO out of THREE of the following: (1) problem-focused history, (2) problem-focused exam, (3) <u>low</u> level of medical decision making. • Usually, the presenting problem(s) are of low to moderate severity. • When using time for coding, 20–29 minutes of total time is spent on the date of the encounter.
99214	**Established Patient Office or Other Outpatient Services – Level 4** • Office or other outpatient visit for the evaluation and management of an established patient, which requires TWO out of THREE of the following: (1) problem-focused history, (2) problem-focused exam, (3) <u>moderate</u> level of medical decision making. • Usually, the presenting problem(s) are of moderate severity. • When using time for coding, 30–39 minutes of total time is spent on the date of the encounter.
99215	**Established Patient Office or Other Outpatient Services – Level 5** • Office or other outpatient visit for the evaluation and management of an established patient, which requires TWO out of THREE of the following: (1) problem-focused history, (2) problem-focused exam, (3) <u>high</u> level of medical decision making. • Usually, the presenting problem(s) are of high severity. • When using time for coding, 40–54 minutes of total time is spent on the date of the encounter.

Outpatient Psychotherapy

CPT codes of services that may be performed in conjunction on the same date as Deep TMS.

Code	Description
90832	**Psychotherapy 30 minutes with patient**
+90833	**Psychotherapy 30 minutes with patient and/or family member** • Add-on code to appropriate outpatient E/M code
90834	**Psychotherapy 45 minutes with patient**
+90836	**Psychotherapy 45 minutes with patient and/or family member** • Add-on code to appropriate outpatient E/M code
90837	**Psychotherapy 60 minutes with patient**
+90838	**Psychotherapy 60 minutes with patient and/or family member** • Add-on code to appropriate outpatient E/M code
90846	**Family Psychotherapy (without the patient present) 50 minutes**
90847	**Family Psychotherapy (conjoint psychotherapy with the patient present) 50 minutes**

Psychological Testing

Code	Description
96127	**Brief emotional/behavioral assessment with scoring and documentation, per standardized instrument.** • Briefly assess ADHD, depression, suicidal risk, anxiety, somatic symptom disorder, and substance abuse
96136	**Test Administration and Scoring by a Physician or Healthcare Professional** • Psychological or neuropsychological test administration/scoring by physician or other qualified healthcare professional, two or more tests, any method; first 30 minutes
96137	**Test Administration and Scoring by a Physician or Healthcare Professional** • Each additional 30 minutes to 96136
96138	**Test Administration and Scoring by a Technician** • Psychological or neuropsychological test administration/scoring by technician, two or more tests, any method; first 30 minutes
96139	**Test Administration and Scoring by a Technician** • Each additional 30 minutes to 96138