

**INSPIRE CRANIAL NERVE (HYPOGLOSSAL) STIMULATION FOR OBSTRUCTIVE SLEEP APNEA
COMMONLY BILLED CODES: ANALYSIS AND TITRATION
Effective January 1, 2018**

CPTⁱ Codes: Analysis and Titration

PROCEDURE	CODE	DESCRIPTION
Electronic analysis	95971	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple spinal cord, or peripheral (ie, peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming
Complex programming, first hour	95974	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); complex cranial nerve neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming, with or without nerve interface testing, first hour
Complex, each additional 30 min	95975	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); complex cranial nerve neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming, each additional 30 minutes after first hour (list separately in addition to code for primary procedure)

Hospital APC Codesⁱⁱ

CPT CODE	APC CODE	STATUS INDICATOR ⁱⁱⁱ	DESCRIPTION
95971	5742	S	Level 2 Electronic Analysis of Devices
95974	5742	S	Level 2 Electronic Analysis of Devices
95975	N/A	N	

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ⁱⁱ Device C-codes are HCPCS Level II codes and are maintained by the Centers for Medicare and Medicaid Services. Centers for Medicare and Medicaid Services. Healthcare Common Procedure Coding System. <http://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html>. Accessed November 30, 2015.

ⁱⁱⁱ Q1 - Packaged APC payment if billed on the same date of service as a HCPCS code assigned status indicator "S," "T," "V," or "X". S - Paid under OPPS; separate APC payment. N – No additional payment; payment included in line items with APCs for incidental service.