## Coverage Summary

### Neuropsychological Testing

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<tbody>
<tr>
<td>Approved by: UnitedHealthcare Medicare Benefit Interpretation Committee</td>
<td>Last Review Date: 02/19/2019</td>
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</tbody>
</table>

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The benefit information in this Coverage Summary is based on existing national coverage policy, however, Local Coverage Determinations (LCDs) may exist and compliance with these policies is required where applicable.

There are instances where this document may direct readers to a UnitedHealthcare Commercial Medical Policy, Medical Benefit Drug Policy, and/or Coverage Determination Guideline (CDG). In the absence of a Medicare National Coverage Determination (NCD), Local Coverage Determination (LCD), or other Medicare coverage guidance, CMS allows a Medicare Advantage Organization (MAO) to create its own coverage determinations, using objective evidence-based rationale relying on authoritative evidence (Medicare IOM Pub. No. 100-16, Ch. 4, §90.5).

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### I. COVERAGE

**Coverage Statement:** Neuropsychological testing is covered when Medicare coverage criteria are met.

**Guidelines/Notes:**

- *Medicare does not have a National Coverage Determination (NCD) for neuropsychological testing.*
- *Local Coverage Determinations (LCDs)/Local Coverage Articles (LCAs) exist and compliance with these policies is required where applicable. For state-specific LCD/LCA, see the **LCD Availability Grid (Attachment A).**
- *For states with no LCD/LCA, see the UnitedHealthcare Commercial Medical Policy for Neuropsychological Testing Under the Medical Benefit for coverage guideline.*

**(IMPORTANT NOTE): After checking the LCD Availability Grid and searching the**
Medicare Coverage Database, if no state LCD/LCA is found, then use the above referenced policy).

- Committee approval date: February 19, 2019
- Accessed June 3, 2019

For additional benefit, billing and coding information, refer to the Medicare Benefit Policy Manual Chapter 15, Section 80.2 - Psychological Tests and Neuropsychological Tests. (Accessed March 26, 2019)

II. DEFINITIONS

Neuropsychological Tests: Evaluations designed to determine the functional consequences of known or suspected brain injury through testing of the neuro-cognitive domains responsible for language, perception, memory, learning, problem solving, adaptation, and constructional praxis.

These evaluations are requested for patients with a history of psychological, neurologic or medical disorders known to impact cognitive or neurobehavioral functioning. The evaluations include a history of medical or neurological disorders compromising cognitive or behavioral functioning; congenital, genetic, or metabolic disorders known to be associated with impairments in cognitive or brain development; reported impairments in cognitive functioning; and evaluations of cognitive function as a part of the standard of care for treatment selection and treatment outcome evaluations.

LCD for Psychological and Neuropsychological Testing (L34646). (Accessed June 3, 2019)

III. REFERENCES

See above

IV. REVISION HISTORY

04/01/2019  • Updated policy introduction; added language to clarify:
    o There are instances where [the Coverage Summary] may direct readers to a UnitedHealthcare Commercial Medical Policy, Medical Benefit Drug Policy, and/or Coverage Determination Guideline (CDG)
    o In the absence of a Medicare National Coverage Determination (NCD), Local Coverage Determination (LCD), or other Medicare coverage guidance, CMS allows a Medicare Advantage Organization (MAO) to create its own coverage determinations, using objective evidence-based rationale relying on authoritative evidence (Medicare IOM Pub. No. 100-16, Ch. 4, §90.5)

02/19/2019  Annual review; definition of neuropsychological tests was updated based on the definition in the reference LCD for Psychological and Neuropsychological Testing (L34646).

09/18/2018  Updated Local Coverage Determination (LCD) Availability Grid; removed instruction to “use the applicable LCD based on member’s residence/place and type of service” (this note only applies when selecting the appropriate DME LCD Policy).

02/20/2018  Annual review; no updates.
ATTACHMENT(S)

Attachment A - LCD Availability Grid

Neuropsychological Testing

CMS website accessed June 3, 2019

<table>
<thead>
<tr>
<th>LCD ID</th>
<th>LCD Title</th>
<th>Contractor Type</th>
<th>Contractor</th>
<th>States</th>
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<td>L35101</td>
<td>Psychiatric Codes</td>
<td>A and B MAC</td>
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<td>AR, CO, DC, DE, LA, MD, MS, NJ, NM, OK, PA, TX</td>
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</tr>
<tr>
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<td>Contractor Type</td>
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<td>States</td>
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<td>L34646</td>
<td>Psychological and Neuropsychological Testing</td>
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<td>First Coast Service Options, In</td>
<td>FL, PR, VI</td>
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<td>L37633</td>
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<td>Palmetto GBA</td>
<td>AL, GA, NC, SC, TN, VA, WV</td>
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End of Attachment A