GUIDELINES
This policy does not certify benefits or authorization of benefits, which is designated by each individual policyholder contract. Paramount applies coding edits to all medical claims through coding logic software to evaluate the accuracy and adherence to accepted national standards. This guideline is solely for explaining correct procedure reporting and does not imply coverage and reimbursement.

DESCRIPTION
Attention deficit hyperactivity disorder (ADHD) is one of the most common neurobehavioral disorders of childhood. Approximately eight to ten percent of school age children are diagnosed with ADHD, and males are predominantly more affected than females. It is common for a person with ADHD to be affected by comorbidities, which are other conditions that exist simultaneously with and independent of ADHD. Examples include, but may not be limited to, oppositional defiant disorder, conduct disorder, depression, anxiety disorder and learning disabilities. Although ADHD is usually diagnosed in childhood, it often lasts into adulthood.

The behavior of children with ADHD can typically be classified into three different subtypes:

- Predominantly inattentive
- Predominantly hyperactive-impulsive
- Combined type

ADHD is characterized by a pattern of behavior, present in multiple settings (e.g., school and home), that can result in performance issues in social, educational or work settings. There is no single test to diagnose ADHD. Typically, a diagnosis is made by a comprehensive exam that assesses the onset and course of symptoms consistent with ADHD. A functional assessment, if conducted, evaluates both the severity of impairment and the pervasiveness of symptoms occurring in different environments.

The parameters for diagnosing ADHD are found in the Fifth Edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), published by the American Psychiatric Association (APA). The DSM-5 includes a set of diagnostic criteria that indicate the symptoms that must be present to establish the diagnosis of ADHD.

There are several types of specialists qualified to diagnose and treat ADHD. Examples include, but may not be limited to, child psychiatrists, family physicians, pediatricians, psychiatrists or neurologists. The treatments for ADHD may involve pharmacotherapy and nonpharmacologic therapy, including such interventions as individual and/or family psychotherapy.

POLICY
Services for the assessment or treatment of attention-deficit/hyperactivity disorder (ADHD) do not require prior authorization if covered. Please see below.

Procedure code 96127 may only be billed with a limit of two units per date of service.

For Functional Magnetic Resonance Imaging (fMRI) (70554, 70555 & 96020) please see PG0035 Outpatient Advanced Imaging Authorization for coverage determination.

For Transcranial Magnetic Stimulation (TMS) (90867 & 90868) please see PG0294 Transcranial Magnetic Stimulation (TMS) for coverage determination.

For Health and Behavioral Assessment/Intervention (96150-96155) please see PG0330 The Health and Behavioral Assessment- Intervention for coverage determination.

For Chiropractic Services & Spinal Manipulation (98940-98943) please see PG0150 Chiropractic Services & Spinal Manipulation for coverage determination.

HMO, PPO, Individual Marketplace, Elite, Advantage
Services provided by a psychiatrist, psychologist or other behavioral health professionals may be subject to the provisions of the applicable behavioral health benefit.
Assessment and treatment for comorbid behavioral health and/or medical diagnoses and associated symptoms and/or conditions may be covered under applicable medical and behavioral health benefit plans.

Services for the assessment or treatment of attention-deficit/hyperactivity disorder (ADHD) that are considered primarily educational or training in nature or focused on improving academic or work performance are not covered under many benefit plans.

When not otherwise excluded, Paramount covers medically necessary services for the treatment of ADHD when the criteria of the Diagnostic and Statistical Manual of Mental Health Disorders, Fifth Edition (DSM-5) are met.

Coverage of medications related to the treatment of ADHD is subject to the pharmacy benefit of the applicable benefit plan.

Paramount does not cover any of the following services, because each is considered educational in nature and/or not medically necessary for the assessment and/or treatment of ADHD (this list may not be all-inclusive):

- Intelligence Quotient (IQ) testing
- education and achievement testing
- educational intervention (e.g., classroom environmental manipulation, academic skills training, and parental training)
- neuropsychological testing

Paramount does not cover the following procedures/services, because each is considered experimental, investigational or unproven for the assessment and/or treatment of ADHD (these lists may not be all-inclusive):

**Assessment:**
- actometer
- computerized electroencephalogram (EEG) (e.g., brain mapping, neurometrics, or quantitative electroencephalography [QEEG], Neuropsychiatric EEG-Based Assessment Aid [NEBA] System)
- computerized tests of attention and vigilance
- event-related potentials (i.e., evoked potential studies)
- hair analysis
- neuromaging (e.g., computerized tomography [CT], magnetic resonance imaging [MRI], positron emission tomography [PET] and single-photon emission computerized tomography [SPECT])
- Quotient ADHD Test/System

**Treatment:**
- acupuncture/acupressure
- anti-candida albicans and antifungal medications
- anti-motion sickness medication
- auditory integration therapy
- chiropractic manipulation
- cognitive rehabilitation
- dietary treatments
- Dore program/Dyslexia Dyspraxia Attention Treatment (DDAT)
- EEG biofeedback/neurofeedback
- herbal remedies
- intensive behavioral intervention programs (e.g., early intensive behavior intervention [EIBI] intensive behavior intervention [IBI], Lovaas therapy, applied behavior analysis [ABA])
- megavitamin therapy
- metronome training
- movement therapy
- Neuro-Emotional Technique (NET)
- sensory integration therapy
- transcranial magnetic stimulation/cranial electrical stimulation
- vision therapy

**CODING/BILLING INFORMATION**
The appearance of a code in this section does not necessarily indicate coverage. Codes that are covered may have selection criteria that must be met. Payment for supplies may be included in payment for other services rendered.

**CPT CODES**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>70450</td>
<td>Computed tomography, head or brain; without contrast material</td>
</tr>
</tbody>
</table>
Card Sorting Test), per hour of the psychologist's or physician's time, both face
Neuropsychological testing (eg, Halstead
language, memory, planning and problem solving, and visual spatial abilities), per hour of the psychologist's or physician's
Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, eg, acquired
psychopathology, eg, MMPI), administered by a computer, with qualified health care professional interpretation and report
Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual
abilities, personality and
and report
Neurofunctional testing selection and administration during noninvasive imaging functional brain mapping, with test
Digital analysis of electroencephalogram (EEG) (eg, for epilepti
Visual evoked potential (VEP) testing central nervous system, checkerboard or flash
Electroencephalogram (EEG); all night recording
Electroencephalogram (EEG); including recording awake and drowsy
Electroencephalogram (EEG) extended monitoring; greater than 1 hour
Electroencephalogram (EEG) extended monitoring; 41
Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording)
Computerized dynamic posturography
Computed tomography, head or brain; without contrast material(s)
Computed tomography, head or brain; without contrast material, followed by contrast material(s) and further sections
Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing
Magnetic resonance angiography, head; without contrast material(s)
Magnetic resonance angiography, head; without contrast material(s), followed by contrast material(s) and further sequences
Magnetic resonance imaging, brain (including brain stem); without contrast material
Magnetic resonance imaging, brain (including brain stem); with contrast material(s)
Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration
Magnetic resonance imaging, brain, functional MRI; requiring physician or psychologist administration of entire neurofunctional testing
Magnetic resonance spectroscopy
Brain imaging, less than 4 static views;
Brain imaging, less than 4 static views; with vascular flow
Brain imaging, minimum 4 static views;
Brain imaging, minimum 4 static views; with vascular flow
Brain imaging, tomographic (SPECT)
Brain imaging, positron emission tomography (PET); metabolic evaluation
Brain imaging, positron emission tomography (PET); perfusion evaluation
Psychiatric diagnostic evaluation
Psychiatric diagnostic evaluation with medical services
Psychotherapy, 30 minutes with patient and/or family member
Psychotherapy, 30 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Psychotherapy, 45 minutes with patient and/or family member
Psychotherapy, 45 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Psychotherapy, 60 minutes with patient and/or family member
Psychotherapy, 60 minutes with patient and/or family member when performed with an evaluation and management service (List separately in addition to the code for primary procedure)
Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management
Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment;; subsequent delivery and management, per session
Orthoptic and/or pleoptic training with continuing medical direction and evaluation
Computerized dynamic posturography
Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording)
Electroencephalogram (EEG) extended monitoring; 41-60 minutes
Electroencephalogram (EEG) extended monitoring; greater than 1 hour
Electroencephalogram (EEG); including recording awake and drowsy
Electroencephalogram (EEG); including recording awake and asleep
Electroencephalogram (EEG); all night recording
Visual evoked potential (VEP) testing central nervous system, checkerboard or flash
Digital analysis of electroencephalogram (EEG) (eg, for epileptic spike analysis)
Neurofunctional testing selection and administration during noninvasive imaging functional brain mapping, with test administered entirely by a physician or other qualified healthcare professional (i.e. psychologist), with review of test results and report
Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report
Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI and WAIS), with qualified health care professional interpretation and report, administered by technician, per hour of technician time, face-to-face
Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI), administered by a computer, with qualified health care professional interpretation and report
Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities), per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report
Neuropsychological testing (eg, Halstead-Reitan Neuropsychological Battery, Wechsler Memory Scales and Wisconsin Card Sorting Test), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>96119</td>
<td>Neuropsychological testing (eg, Halstead-Reitan Neuropsychological Battery, Wechsler Memory Scales and Wisconsin Card Sorting Test), with qualified health care professional interpretation and report, administered by technician, per hour of technician time, face-to-face</td>
</tr>
<tr>
<td>96120</td>
<td>Neuropsychological testing (eg, Wisconsin Card Sorting Test), administered by a computer, with qualified health care professional interpretation and report</td>
</tr>
<tr>
<td>96125</td>
<td>Standardized cognitive performance testing (eg, Ross Information Processing Assessment) per hour of a qualified health care professional's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report</td>
</tr>
<tr>
<td>96127</td>
<td>Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument</td>
</tr>
<tr>
<td>96150</td>
<td>Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment</td>
</tr>
<tr>
<td>96151</td>
<td>Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; re-assessment</td>
</tr>
<tr>
<td>96152</td>
<td>Health and behavior intervention, each 15 minutes, face-to-face; individual</td>
</tr>
<tr>
<td>96153</td>
<td>Health and behavior intervention, each 15 minutes, face-to-face; group (2 or more patients)</td>
</tr>
<tr>
<td>96154</td>
<td>Health and behavior intervention, each 15 minutes, face-to-face; family (with the patient present)</td>
</tr>
<tr>
<td>96155</td>
<td>Health and behavior intervention, each 15 minutes, face-to-face; family (without the patient present)</td>
</tr>
<tr>
<td>97532</td>
<td>Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient, each 15 minutes</td>
</tr>
<tr>
<td>97533</td>
<td>Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes</td>
</tr>
<tr>
<td>98940</td>
<td>Chiropractic manipulative treatment (CMT); spinal, one to two regions</td>
</tr>
<tr>
<td>98941</td>
<td>Chiropractic manipulative treatment (CMT); spinal, three to four regions</td>
</tr>
<tr>
<td>98942</td>
<td>Chiropractic manipulative treatment (CMT); spinal, five regions</td>
</tr>
<tr>
<td>98943</td>
<td>Chiropractic manipulative treatment (CMT); extraspinal, one or more regions</td>
</tr>
</tbody>
</table>

**REVISION HISTORY EXPLANATION**
07/14/15: Policy created to reflect most current clinical evidence per Medical Policy Steering Committee.

**REFERENCES/RESOURCES**
Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
Ohio Department of Medicaid [http://jfs.ohio.gov/](http://jfs.ohio.gov/)
Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets
Industry Standard Review
Hayes, Inc.