



United Behavioral Health

Medicare Coverage Summary: Vagus Nerve Stimulation For Treatment Resistant Depression

Document Number: BH803MAVNS0520

Effective Date: May 18, 2020

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INTRODUCTION

Medicare Coverage Summaries are a set of objective and evidence-based behavioral health criteria used by medical necessity plans to standardize coverage determinations, promote evidence-based practices, and support members' recovery, resiliency, and wellbeing for Medicare behavioral health benefit plans managed by Optum®¹.

INSTRUCTIONS FOR USE

This guideline is used to make coverage determinations as well as to inform discussions about evidence-based practices and discharge planning for behavioral health benefit plans managed by Optum. When deciding coverage, the member's specific benefits must be referenced.

All reviewers must first identify member eligibility, the member-specific benefit plan coverage, and any federal or state regulatory requirements that supersede the member's benefits prior to using this guideline. In the event that the requested service or procedure is limited or excluded from the benefit, is defined differently or there is otherwise a conflict between this guideline and the member's specific benefit, the member's specific benefit supersedes this guideline. Other clinical criteria may apply. Optum reserves the right, in its sole discretion, to modify its clinical criteria as necessary using the process described in *Clinical Criteria*.

This guideline is provided for informational purposes. It does not constitute medical advice.

Optum may also use tools developed by third parties that are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice.

Optum may develop clinical criteria or adopt externally-developed clinical criteria that supersede this guideline when required to do so by contract or regulation.

VAGUS NERVE STIMULATION

VNS is a pulse generator, similar to a pacemaker, that is surgically implanted under the skin of the left chest and an electrical lead (wire) is connected from the generator to the left vagus nerve. Electrical signals are sent from the battery-powered generator to the vagus nerve via the lead. These signals are in turn sent to the brain. FDA approved VNS for treatment of refractory epilepsy in 1997 and for resistant depression in 2005.

¹ Optum is a brand used by United Behavioral Health and its affiliates.

Applicable States

This Medicare Coverage Summary is based on the following CMS National Coverage Determinations (NCDs), and is applicable to all states.

(CMS 160.18) Vagus Nerve Stimulation (VNS)

Limitations and Exclusions

Effective for services performed on or after May 4, 2007, VNS is not reasonable and necessary for resistant depression.

REFERENCES

Centers for Medicare and Medicaid Services, National Coverage Determination, Vagus Nerve Stimulation (VNS) (160.18). CMS website: www.cms.gov.

Centers for Medicare and Medicaid Services. (2019). Local Coverage Determination/Local Coverage Article, Non-Covered Services, L36219/A57641-Noridian. CMS website: www.cms.gov.

REVISION HISTORY

Date	Action/Description
October, 2014	• Version 1
May, 2015	• Version 2
June, 2016	• Version 3
June, 2017	• Version 4
January, 2018	• Version 5
May, 2019	• Version 6
May 18, 2020	• Version 7