United Healthcare Community Plan

Transcranial Magnetic Stimulation (TMS)

As of August 2, 2024, Louisiana Medicaid has begun covering Transcranial Magnetic Stimulation (TMS) for the treatment of major depression, following FDA approval.

TMS is a noninvasive method of delivering electrical stimulation to the brain. A magnetic field is delivered through the skull, where it induces electric currents that affect neuronal function. TMS can be performed in an office setting as it does not require anesthesia and does not induce a convulsion.

TMS is considered medically necessary when all of the following criteria are met:
1. Member is 18 years of age or older; AND
2. Diagnosis of major depressive disorder (DSM 5 diagnostic terminology); AND
3. Failure or intolerance to psychopharmacologic agents, choose ONE of the following: a. Failure of psychopharmacologic agents, BOTH of the following:
    1) Lack of clinically significant response in the current depressive episode to four trials of agents from at least two different agent classes; AND
    2) At least two of the treatment trials were administered as an adequate course of mono- or poly-drug therapy with antidepressants, involving standard therapeutic doses of at least six weeks duration. b. The member is unable to take anti-depressants due to ONE of the following:
    1) Drug interactions with medically necessary medications; OR
    2) Inability to tolerate psychopharmacologic agents, as evidenced by trials of four such agents with distinct side effects in the current episode; AND
4. No contraindications to TMS are present (see section on contraindications); AND
5. Electroconvulsive therapy has previously been attempted, is medically contraindicated, or has been offered and declined by the member.

Important Notes:
1. TMS is approved only for major depression, not for persistent depressive disorder.
2. Hard copy supporting documentation is not required.
    - UHC agrees that we will conduct post-processing audits as needed.
3. Maintenance therapy is considered not medically necessary, as there is insufficient evidence to support this treatment at the present time.

Retreatment

Retreatment is considered medically necessary when the following criteria is met:

1. Current major depressive symptoms have worsened by 50 percent from the prior best response of the PHQ-9 score; AND
2. Prior treatment response demonstrated a 50 percent or greater reduction from baseline depression scores; AND
3. No contraindications to TMS are present (see section on contraindications).

Contraindications

- Individuals who are actively suicidal.
- Individuals with a history of or risk factors for seizures during TMS therapy.
- Individuals with vagus nerve stimulators or implants controlled by physiologic signals, including pacemakers, and implantable cardioverter defibrillators.
- Individuals who have conductive, ferromagnetic, or other magnetic-sensitive metals implanted in their head within 30 cm of the treatment coil (e.g. metal plates, aneurysm coils, cochlear implants, ocular implants, deep brain stimulation devices, and stents).
- Individuals who have active or inactive implants (including device leads), including deep brain stimulators, cochlear implants, and vagus nerve stimulators.
- Individuals with active psychoses or catatonia where a rapid clinical response is needed.
- History of seizure disorder except seizures induced by ECT.
- Metal implants or devices present in the head or neck.
- Substance use at the time of treatment.
- Diagnosis of severe dementia.
- Diagnosis of severe cardiovascular disease A referral from a psychiatrist is required and must be submitted prior to treatment.

The Medicaid procedure file has been updated to reflect this change, and the fee-for-service (FFS) fee schedule has been updated on the Louisiana Medicaid website. UnitedHealthcare Community Plan has updated its system to reflect the new rates.

LDH has published Informational Bulletin 24-27 for your reference IB24-27_Revised_10.28.24.pdf (la.gov).

For questions or concerns regarding any bulletin, contact UnitedHealthcare Community Plan at 1-866-675-1607.