

CPT Code	90901 Bio-Feedback.
HCPCS Code	E0746 Electromyography (EMG), biofeedback device

Some insurance companies pay directly for the biofeedback insurance code 90901. Other may allow it to be paid from a Health Savings Account. Billing should have “alternative medicine” to treatment description. Neurofeedback uses the same CPT billing code as biofeedback – 90901, which is gaining increasing coverage. Insurance companies may be restrictive about which diagnostic codes are used with 90901.

If a doctor documents referral or suggested Neurofeedback (also known as EEG biofeedback) treatments for specific patients and/or diagnosis, that could help insurances to cover the treatment.

Medically Necessary:

Biofeedback therapy supervised by a physician or licensed practitioner is considered medically necessary for the following conditions:

- Cancer pain
- Chronic back pain as part of a rehabilitation program
- Chronic constipation
- Fecal incontinence
- Levator ani syndrome, also known as anorectal pain syndrome
- Migraine or tension headaches
- Urinary incontinence

Investigational and Not Medically Necessary:

Biofeedback therapy is considered investigational and not medically necessary for all other conditions.

Neurofeedback, also known as electroencephalogram (EEG) biofeedback, is considered investigational and not medically necessary for all conditions including, but not limited to: asthma, attention-deficit hyperactivity disorder, autistic spectrum disorders, cardiovascular conditions, cluster headaches, epilepsy, post-traumatic stress disorder, substance use disorders, and traumatic brain injury.

The use of home biofeedback devices is considered investigational and not medically necessary for all conditions.