

VETERANS AFFAIRS CANADA (VAC) PROGRAM OF CHOICE (POC) 06 - MEDICAL SERVICES ALL PROVINCES AND TERRITORIES

June 2024

Veterans Affairs Canada (VAC) wishes to advise you of updates to existing benefits under Program of Choice (POC) 06 – Medical Services, effective July 1, 2024.

The following revisions are effective as of July 1, 2024			
Benefit Code	Description	Revision	Benefit Information
220235	RTMS SESSIONS	Revised	Pre-authorization: MAC Prescriber: PC Frequency: 90 / CY Fee: \$250
240365	RTMS - REOCCURRENCE SESSIONS	Terminated	
240370	RTMS - MAINTENANCE SESSIONS	Terminated	

Important Notes: rTMS may be reimbursed up to \$250.00 per session, or the maximum rate contained in the applicable provincial/territorial health fee guide for the health professional that is administering the treatment (for requests exceeding \$250.00 per session, the associated provincial/territorial code(s) with fees must be submitted with the request). Any associated nTMS neuronavigational fees (i.e. MRI, etc.) will not be authorized. If the services of a technician are utilized, this should be reflected in the rate charged.

VAC will honor existing open authorizations prior to July 1, 2024, at the authorized amount. For any new authorizations on, or after July 1, 2024, the new rate limit will be in effect.

Please ensure to review Special Notes on Benefit Grid for additional information.

rTMS treatment, as defined by VAC, includes Repetitive Transcranial Magnetic Stimulation (rTMS) (as well as Deep Transcranial Magnetic Stimulation (dTMS)), neuronavigated TMS (nTMS), or the intermittent Theta-Burst (iTBS) version of rTMS.

rTMS treatment may be approved when the following conditions are met:

- It is provided as first-line treatment for treatment-resistant depression.
- The treatment is recommended by Veteran's treating psychiatrist, who confirms the diagnosis of a depressive disorder and that there have been two failed trials of treatment with two different anti-depressants.





NOTE:

- rTMS will not be authorized to treat PTSD, anxiety disorders, other specified trauma and stressorrelated disorder or unspecified trauma and stressor-related disorder unless a depressive disorder is also present.
- To avoid unnecessary delays, please ensure your pre-authorization request includes a treatment plan with:
 - Diagnosis of condition being treated; and
 - medical rationale; and
 - which antidepressants (at least 2) were trialed, and failed, prior to considering a trial of rTMS; **and**
 - results of standardized rating scale(s) used to track rTMS treatment (response/outcomes) (NOTE: for initial requests only a baseline is required); and
 - length of each session; and
 - number of sessions per week; and
 - number of weeks

Frequency and Duration

- rTMS sessions may be authorized in blocks of no more than 30 sessions at a time.
- rTMS sessions cannot exceed 90 sessions per calendar year. (On average, patients that respond to rTMS require 30-50 sessions per calendar year.)
- Requests for rTMS sessions that exceed 90 per calendar year will not be authorized.
- Treatment protocol to be established by treating psychiatrist. Providers are expected to adhere to best practice guidelines for their client-specific treatment protocols.

NOTE: Per VAC's understanding of best practice guidelines, it is recommended:

Initial/acute sessions:

- To reach maximum effect, delivered in up to 5 sessions (37.5 minutes per session) per week over 4-6 weeks.
- Alternatively, intermittent theta-burst version of rTMS (iTBS) can be delivered in approximately 15-minute sessions (with each session comprised of 3 minutes for the intermittent theta-burst, and approximately 10 to 12 minutes to complete rating scale(s), etc.).
- Additional acute sessions should commence no sooner than 3 months after the last session of the acute course of treatment.

Maintenance sessions:

- Maintenance sessions are intended to sustain the clinical response after a successful acute course of rTMS treatment and prevent the risk of relapse.
- The maintenance course of treatment would typically consist of session frequencies

less often than the acute course of rTMS treatment.

- Maintenance sessions should commence no sooner than one month after the last session of the acute course of treatment.

Provision of Treatment

rTMS must be provided by a psychiatrist directly, or a technician or other health professional under the direct supervision of the psychiatrist. Psychiatrist must:

- Be in the clinic/on-site and assume primary responsibility for the care of the Veteran; and
- Ensure the clinician/technician is in the room with the Veteran at all times to oversee the rTMS session.

Administrative Requirements

The psychiatrist is responsible for:

- The development, implementation and updating of the treatment plan; and
- reporting the details of the rTMS treatment and patient response (including results of the standardized outcome monitoring rating scales); **and**
- liaising and collaborating with the Veteran's primary treatment provider (if required); and
- maintaining the details of billing, including who provided the rTMS sessions.

PLEASE NOTE: rTMS is not a mental health service available to family members.

Providers shall charge the lesser of the rate charged by the provider to any patient paying cash for the same service/product, up to the maximum rate contained in the benefit grid and/or provincial/territorial health fee guides.

For details pertaining to fees and claims submission requirements, please refer to the Claims Submission Agreement and related supporting documentation found on the Medavie Blue Cross website at <u>www.medaviebc.ca</u> and click on the Health Professionals link. On our website you will also find important information on how to:

- register to access our secure ePay provider portal by clicking on the Register or Update link;
- sign up for direct deposit; and
- view provider guides and benefit grids, download provider payment schedules and other important information.

Should you have any questions, please contact Medavie Blue Cross at 1-888-261-4033.

Thank you for the ongoing care and service that you provide to our Veterans.