## ✓ MetroPlusHealth

November 18, 2025

TO: Behavioral Health Providers

SUBJECT: Medicaid Update – New York State Medicaid Coverage of Therapeutic

**Transcranial Magnetic Stimulation** 

IMPACTED PLANS: Medicaid, SNP, HARP, CHP, QHP, EP, Gold, and Gold Care

Dear MetroPlusHealth Provider,

**Effective November 1, 2025**, Therapeutic Transcranial Magnetic Stimulation (TMS) is a covered benefit under Current Procedural Terminology (CPT) codes "90867", "90868" and "90869" for treatment resistant Major Depressive Disorder (MDD).

Transcranial Magnetic Stimulation **must** be performed by a qualified psychiatrist with specialized training and certification for treating persistent depressive disorder when other treatments fail. Treatment resistance is defined as two trials of a therapeutic dose of two different antidepressants.

These services are covered for the following conditions when first-line treatments have been unsuccessful:

Diagnosis Code	Diagnosis Code Description	
F32.2	MDD, single episode, severe without psychotic features.	
F33.2	MDD, recurrent severe without psychotic features.	

<u>Note:</u> Prior authorization is required, for more information see link: https://metroplus.org/providers/provider-resources/provider-authorization TMS is not a first line therapy for depression and is not covered for certain conditions. Reimbursement for Medicaid is available for:

- Medicaid members aged 18 and older
- Members diagnosed with treatment resistant MDD

•	CPT Code	CPT Code Description
90867		Therapeutic repetitive TMS initial planning visit; includes initial procedures such as cortical mapping, motor threshold determination, delivery, and management.
90868		Therapeutic repetitive TMS treatment; subsequent delivery and management, per session.
90869		Re-determination of motor threshold during TMS. This code is used for subsequent assessments of the motor threshold, which is the minimum intensity of electrical pulses required to elicit a desired response in brain activity.

Note: CPT codes "90867", "90868" and "90869" may not be billed on the same date-of-service.

For more information, please refer to this Medicaid update regarding TMS at <a href="https://www.health.ny.gov/health\_care/medicaid/program/update/2025/no07\_2025-07.htm">https://www.health.ny.gov/health\_care/medicaid/program/update/2025/no07\_2025-07.htm</a>.

If you have any questions regarding this memo, please contact MetroPlusHealth at <a href="mailto:ProviderRelationsOps@metroplus.org">ProviderRelationsOps@metroplus.org</a>.

Thank you.

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