EVH Clinical Guideline 2725.CC for Cognitive Performance Testing

Guideline Number: EVH_CG_2725.CC	Applicable Codes	
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Original Date: July 1, 2020	**Last Revised Date:** August 20, 2026	**Implementation Date:** September 1, 2026

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STATEMENT

General Information

- *It is an expectation that all members receive care/services from a licensed clinician. All appropriate supporting documentation, including recent pertinent office visit notes, laboratory data, and results of any special testing must be provided. If applicable: All prior relevant imaging results and the reason that alternative imaging cannot be performed must be included in the documentation submitted.*
- *Where a specific clinical indication is not directly addressed in this guideline, medical necessity determination will be made based on widely accepted standard of care criteria. These criteria are supported by evidence-based or peer-reviewed sources such as medical literature, societal guidelines, and state/national recommendations.*
- *The guideline criteria in the following sections were developed utilizing evidence-based and peer-reviewed resources from medical publications and societal organization guidelines as well as from widely accepted standard of care, best practice recommendations.*

INDICATIONS

CountyCare considers **Cognitive Performance Testing** medically necessary for **ALL** the following indications [(1)]:

- The member currently experiences one or more of the following:
  - Significant cognitive deficit
  - Mental status abnormality
  - Behavioral change
  - Memory loss that requires quantification, monitoring of change, or differentiation of cause

  AND
- Testing regarding member's abnormality is appropriate based on the suspected or confirmed diagnosis of one or more of the following:
  - Multiple sclerosis [(2)]
  - Dementia or other cognitive impairment **AND** one or more of the following [(3)]:
    - Initial evaluation needed when diagnosis or severity of disease is unclear
    - Evaluation of other Risk Factors for Cognitive Decline when differentiation from organic worsening cannot be determined by other means, including any of the following:
      - Obstructive sleep apnea
      - Mood disorder

- Medication effect that may impair cognition
- High alcohol consumption

- Infection-associated cognitive disorders with need for evaluation of significant cognitive deterioration to determine extent of organic cause and direct therapy for any of the following:
  - HIV [4,5]
  - Lyme disease [6]
  - Herpes Simplex Encephalitis [7,8]
  - Global common infections (non-exclusive) [9]
    - Cytomegalovirus (CSV)
    - Herpes Simplex virus type 1 (HSV-1)
    - Epstein-Barr virus (EBV)
- Primary progressive aphasia [10]
- Cerebrovascular disease [11]
- Huntington disease (prodromal or active disease) [12]
- Traumatic or anoxic brain injury [13]
- Parkinson's disease [14]
- Hydrocephalus [15]
- Epilepsy [16]
- Cerebral dysfunction due to lead or other known chemical toxins exposure [17]
- Cerebral mass [18]
- Toxic effects of specific cancer treatment [19]
- Other diagnosis with strong evidence of, or known high risk for, cognitive impairment for which test results will help provide guidance regarding specific member care needs

AND

- The results of Cognitive Performance Testing are likely to impact the member's care or treatment plan

AND

- The member is able and willing to actively participate in Cognitive Performance Testing

AND

- The member is not currently undergoing chronic substance use withdrawal or chronic substance use recovery and does not have active substance use disorder.

LIMITATIONS

Face-to-face administration of the test is required.

CODING AND STANDARDS

Codes

Code	Description
96125	Standardized cognitive performance testing (eg, Ross Information Processing Assessment) per hour of a qualified health care professional's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report

Applicable Lines of Business

☐	CHIP (Children's Health Insurance Program)
☐	Commercial
☐	Exchange/Marketplace
☒	Medicaid
☐	Medicare Advantage

BACKGROUND

A qualified health care professional administers standardized cognitive performance testing to evaluate the member's immediate, recent, and remote memory; temporal and spatial orientation; general information recall; problem-solving and abstract reasoning abilities; organizational skills; and auditory processing and retention.

POLICY HISTORY

Date	Summary
August 20, 2026	• Annual Review - Replaced patient with member in the first bullet under General Statement; updated in-text citations; formatting

Date	Summary
	updates to description of procedure code 96125; updated References
November 20, 2025	• This guideline replaces PA.228.CC Cognitive Performance Testing • Editorial changes to match the formatting and layout of the new template, no changes to clinical content

LEGAL AND COMPLIANCE

Guideline Approval

Committee

Reviewed / Approved by Evolent Administrative Services Medical Policy Committee

Disclaimer

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