

Part B Insider (Multispecialty) Coding Alert

Cardiology Supply Codes: Check HCPCS 2014 to Confirm G0275 and J0152 Changes

Update adenosine unit requirements to avoid shortchanging your practice.

CMS recently posted the HCPCS 2014 file, and there are two changes in particular that cardiology practices need to know. Here are the details on non-selective renal angiography and adenosine coding to help you make the transition to 2014 reporting with ease.

Remember: Both of these changes affect claims with dates of service on or after Jan. 1, 2014.

1. Say So Long to Your Old Pal G0275

For years, one sign of the veteran cardiology coder has been knowing how to properly apply G0275 (Renal angiography, non-selective, one or both kidneys, performed at the same time as cardiac catheterization and/or coronary angiography, includes positioning or placement of any catheter in the abdominal aorta at or near the origins [ostia] of the renal arteries, injection of dye, flush aortogram, production of permanent images, and radiologic supervision and interpretation [List separately in addition to primary procedure]).

Not many other specialty coders would know to look to a G-code to report non-selective renal angiography performed with a cardiac cath for a Medicare patient.

But according to the latest HCPCS update, G0275 has been deleted effective Dec. 31, 2013. Guidance on a replacement has not yet been issued, but experts note that 75625 (Aortography, abdominal, by serialography, radiological supervision and interpretation) may be appropriate to capture a non-selective renal angiogram performed with a cardiac cath.

Code 75625 represents imaging the abdominal aorta with the catheter placed in the aorta. Similarly, G0275 essentially described a service where, after the physician performed a cardiac or coronary cath, he pulled the catheter back through the aorta, paused above the renal arteries, injected dye, and allowed it to run into the renal arteries for visualization.

Before reporting a code for this service in 2014, be sure the documentation supports medical necessity for the code you report, as you would for any other diagnostic study. Based on the diagnoses that supported G0275, possible supporting diagnoses for 2014 are hypertension (e.g., ICD-9: 401.x; ICD-10: I10) and chronic kidney disease (e.g., ICD-9: 585.x; ICD-10: N18.x).

Reality check: "Be extremely careful when coding CPT® 75625 with a heart catheterization. An injection to view the renal arteries only may not be sufficient and modifier 52 [Reduced services] will need to be applied," warns Christina Neighbors, MA, CPC, CCC, ACS-CA, a cardiology coding expert in Tacoma, Wash.

Keep in mind that the G0275 service was specific to NON-selective angiography of the renal arteries. Consequently, selective renal angiography codes 36251-36254 would not be appropriate replacements for a non-selective service. "However, if both a non-selective abdominal aortography and selective renal angiography(s) are provided, the abdominal aortography CPT® 75625 would not be coded, and CPT® 36251-36254 would be reported," Neighbors says.

2. Watch the 29 mg Difference for Adenosine Units

Another noteworthy change for cardiology coders is the deletion of J0152 (Injection, adenosine for diagnostic use, 30 mg [not to be used to report any adenosine phosphate compounds; instead use A9270]).

In its place, you'll use J0151 (Injection, adenosine for diagnostic use, 1 mg [not to be used to report any adenosine phosphate compounds, instead use A9270]).

The difference between the two codes is the number of mg per unit:

- 2013: J0152 was reported as 30 mg per unit
- 2014: J0151 is reported as 1 mg per unit.

This is a difference you can't afford to miss. If you're accustomed to reporting 1 unit for 6 mg adenosine, for example, and you accidentally report that 1 unit in 2014, you'll be losing out on 5 units of reimbursement. You should report 6 units of J0151 for 6 mg adenosine.

Tip: Adenosine is sold under brand names such as Adenoscan.

Resource: For the complete list of 2014 HCPCS changes, visit www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html.