

Part B Insider (Multispecialty) Coding Alert

CPT 2007: Implantable Ventricular Assist Devices Could Soon Be Payable

You may be able to report S&I with dye injection soon

You could have new guidance on team conferences if one proposal to the **CPT Editorial Panel** goes through.

That's just one of the new proposals that the panel considered at its June 9-10 meeting in Las Vegas. Other proposals included a new CPT Code to report vaccination for human papilloma virus (HPV) types 16 and 18, and a new code for the use of a "nasal bridle for secure placement of a nasal feeding tube." Here are more of the proposals your specialty reps submitted in Vegas:

- **Radiologists** asked for clarification that you should not bill new breast MRI code 0159T along with 3D rendering codes 76376-76377. And they also asked for a revision to the description for endoscopic third ventriculostomy code 62201 to reflect the reduced use of stereotactic navigation when a radiologist performs this procedure.

- **Pathologists** asked for revisions for DNA acid and signal amplification codes 83898, 83900, 83901, 83908 to clarify how you report strand amplification and signal amplification. They also wanted codes for monthly embryo and sperm storage. And they wanted to delete Category III code 0087T for hyaluronan building assay, and replace it with a new Category I code.

- **Orthopedists** wanted to revise the guidelines to sections of the CPT book for introduction or injection of anesthetic agent (nerve block), and destruction by neurolytic agent. They wanted to clarify that these procedures required spinal fluoroscopic guidance. Also, orthopedists proposed two new category III codes to report insertion of "posterior spinous process distraction devices."

- **Cardiologists** wanted to revise the parenthetical language after dye injection code 93545 to clarify that you should report radiographic supervision & interpretation code 93556 in addition to 93545. "Imaging supervision, interpretation and report for pulmonary angiography, aortography, and/or selective coronary angiography should be separately reported," the proposal said.

The **American College of Cardiology** wanted to revise acoustic sound heart recording codes 0068T-0070T to make them no longer add-on codes, and to reflect changes in technology for these procedures. And cardiologists wanted to convert Category III codes 0048T-0050T, for implantable ventricular assist devices, into Category I codes 3397X1-3397X3.

- **Oral surgeons** wanted to establish a CPT code for therapeutic temporomandibular joint manipulation.