

Part B Insider (Multispecialty) Coding Alert

Fee Schedule: New CMS Fee Schedule Update Brings Good News for Some Bilateral Surgery Coding Pros

Plus: Medicare releases new sleep study HCPCS codes, changes descriptor on INR testing HCPCS code

If you've been in the habit of hearing bad news from Medicare, it's time to turn that ship around -- a new transmittal opens the door to bilateral payment for two codes.

Effective for dates of service starting Oct. 6, Medicare has changed the bilateral indicator for both 15878 (Suction assisted lipectomy; upper extremity) and 15879 (...lower extremity) from "0," which means that bilateral payment will not be allowed with these codes, to "1," which indicates that bilateral payment is allowable.

CMS outlined the information in Transmittal 1580, which includes several changes that take effect in October.

Professional Components Adjust

CMS also changes some professional/technical component (PC/TC) rules in the new transmittal.

For example, codes 92557 (Comprehensive audiometry threshold evaluation and speech recognition) and 92567 (Tympanometry [impedance testing]) previously had PC/TC indicators of "0" (Physician service with no TC or 26 modifier), but it's been changed to "9" (Concept of professional/technical component does not apply).

Possible rationale: This change is most likely related to the fact that audiologists must now secure their own NPIs and ancillary staff may perform the procedures that these codes describe under a physician's supervision, says **Barbara J. Cobuzzi, MBA, CPC-OTO, CPC-H, CPC-P, CPC-I, CHCC**, president of **CRN Healthcare Solutions**, a coding and reimbursement consulting firm in Tinton Falls, N.J. The new PC/TC indicator removes the word "physician" from these codes

Look for 3 New HCPCS Codes

CMS also reveals several new HCPCS codes in the transmittal. The following new codes will debut effective retroactive to March 13:

- G0398 -- Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart rate, airflow, respiratory effort and oxygen saturation
- G0399 -- Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/ airflow, 1 ECG/heart rate and 1 oxygen saturation
- G0400 -- Home sleep test (HST) with type IV portable monitor, unattended; minimum of 3 channels

Note Descriptor Change

CMS intends to clarify the allowed frequency of INR testing by adding several new words to the G0250's descriptor.

Whereas the code used to note that it should be used "per four tests," it now carries the following descriptor:

- G0250 -- Physician review, interpretation, and patient management of home INR testing for a patient with either mechanical heart valve(s), chronic atrial fibrillation, or venous thromboembolism who meets Medicare coverage criteria; includes face-to-face verification by the physician at least once a year (e.g. during an evaluation and management

service) that the patient uses the device in the context of the management of the anticoagulation therapy following initiation of the home INR monitoring; not occurring more frequently than once a week

To read the CMS transmittal, visit <http://www.cms.hhs.gov/transmittals/downloads/R1580CP.pdf>