

Part B Insider (Multispecialty) Coding Alert

HCPCS: Look for Three New HCPCS Codes Effective July 1

Plus: CMS also introduces five new HCPCS modifiers.

CMS has good news to share, and it could affect your reimbursement.

Starting July 1, Medicare payers will recognize three new HCPCS codes and five new HCPCS modifiers, according to the July 2009 HCPCS update.

The first two HCPCS codes relate to skin substitutes, as follows:

" Q4115 -- Skin substitute, Alloskin, per square centimeter

" Q4116 -- Skin substitute, AlloDerm, per square centimeter

Last fall, CMS made some HCPCS code changes to tissue and skin substitute products, moving them from the J code category to the Q codes, **Mary Hayter**, vice president of government affairs at LifeCell, which manufactures AlloDerm, tells Insider. In that transition, AlloDerm, which had been assigned code J7344 in 2006, was left without a code. We're pleased about new AlloDerm HCPCS code Q4116 since these codes are critically important for reimbursement for outpatient hospital services. Breast reconstruction, complex abdominal wall, and hernia repair patients are often treated with AlloDerm, Hayter says.

CMS doesn't indicate the specifics of how you should bill the new skin substitute codes, but odds are that previous advice from carriers on other skin substitute billing rules will apply toward these.

For instance, if your physician used four square centimeters of AlloDerm, most practices would bill using Q4116 x 4 units rather than reporting four line items of Q4116.

Without specific instruction from our carriers, that is the way I would bill these codes, says **Donna Cuifolo, CCS-P**, coding and compliance coordinator at Jamestown Area Medical Associates in New York.

Xyntha: CMS also introduced new HCPCS code Q2023 (Injection, factor VIII [anti-hemophilic factor, recombinant] [Xyntha], per I.U.).

All three of the new HCPCS codes have a coverage status of C, meaning that individual carriers will establish payment amounts.

New modifiers: CMS also debuts several new HCPCS modifiers, including modifiers PA (Surgery, wrong body part), PB (Surgery, wrong patient), and PC (Wrong surgery on patient).

To read the revised HCPCS codes, visit www.cms.hhs.gov/HCPCSReleaseCodeSets/02_HCPCS_Quarterly_Update.asp.