

Part B Insider (Multispecialty) Coding Alert

New Codes: CMS Gives An Extra 50 CM To Gastric Bypass Surgeons

The addition means fewer denials for procedures

Not only did CPT Codes 2005 include two new codes for laparoscopic gastric restrictive procedures (43644-43645), it also resolved a problem that had long bedeviled bariatric surgeons.

In the past, the descriptors for open gastric bypass codes 43842-43848 specified that the "limb" in a roux-en-y procedure must be 100 cm or less, notes **Susan Hvizdash** physician education specialist for the department of surgery at **UPMC Presbyterian-Shadyside** in Pittsburgh. Some surgeons like to remove more of the intestine, resulting in a longer "limb," up to 150 or 160 cm, she explains.

"We were getting a lot of denials," she recalls, especially for the laparoscopic procedure, for which providers had to submit documentation. The carriers saw that the limb was longer than 100 cm and denied the claim because they deemed a longer limb "experimental."

But for 2005, the code descriptors for both open and laparoscopic roux-en-y procedures specify that the limb can be up to 150 cm. This means virtually all of Hvizdash's surgeons' claims will be covered.

CPT still doesn't include a code for gastric banding, another form of gastric restriction surgery, notes **Mary Lou Walen**, coding expert at the **American Bariatric Surgery Association**. Also, a new device known as a gastric pacemaker, manufactured by Transneuronix, has shown great promise in treating morbid obesity, but it still doesn't have a code either, Walen says.