

Part B Insider (Multispecialty) Coding Alert

Part B Payment: CMS Offers Bilateral Pay Boost for 10 Procedures

Plus: G9157 is now payable under the Fee Schedule.

Not all fee schedule changes are bad news.

In the case of the Q2 updates to the Medicare Physician Fee Schedule, CMS offers payment boosts for several procedures, including catheter placement and cardiac Doppler monitoring. Although the Q2 updates have an official implementation date of April 1, many of the changes are effective retroactive to Jan. 1, 2013.

Bilateral Boosts

You'll now be able to collect more when you perform selective catheter placement (36222-36228) bilaterally. Previously, the bilateral procedure indicator on these codes was "0," which meant that no additional payment was assigned when surgeons performed the procedure on both sides. However, effective Jan. 1, 2013, the bilateral indicator is "1," so you can append modifier 50 (Bilateral procedure) and the payment amount will be 150 percent of the fee schedule RVUs.

The same good news awaits for codes 23000 (Removal of subdeltoid calcareous deposits, open), 32997 (Total lung lavage; unilateral), and 32998 (Ablation therapy for reduction or eradication of one or more pulmonary tumor[s] including pleura or chest wall when involved by tumor extension, percutaneous, radiofrequency, unilateral), which will all be billable with modifier 50 going forward. The payment for the bilateral procedures will be 150 percent of the fee schedule amount.

Positive Payment News for This G Code

CMS will now allow payment for G9157 (Transesophageal Doppler use for cardiac monitoring), making its procedural status code now "A" (active) going forward, which means that it will be payable once RVUs are assigned to it. In addition, the procedure has been assigned a PC/TC indicator of "2," meaning the professional component only will be paid (modifiers 26 and TC are not valid with this code). This is effective Jan. 1, 2013, so your MAC should pay claims retroactively for dates of service on or after Jan. 1.

CMS also revised the descriptors of several CPT® codes as part of the Q2 updates. You can read the document in its entirety at

www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8169.pdf.