

## Part B Insider (Multispecialty) Coding Alert

### Physician Notes: CMS Confirms Modifier 62 Is Required With Most TAVR Codes

**Plus: Toenail trims lead to 55-month prison sentencing for one podiatrist.**

New codes for emerging technologies are always welcome by physician practices, but when confusion reigns over how to report them, coders can grow frustrated. Such has been the case with new codes for transcatheter aortic valve replacement (TAVR) that were valid effective Jan. 1, 2013.

If you report TAVR this year, you'll report a code from the 33361-33365 series, or code 0318T (Replace aortic valve, thoracic). However, if you forget an important modifier, you could find these claims denied. "The NCD requires an interventional cardiologist and a cardiothoracic surgeon to jointly participate in the intraoperative technical aspects of TAVR," CMS notes in MLN Matters article MM8168, released Jan. 7. Therefore, "All TAVR codes must be billed with modifier 62 (Two surgeons), with the exception of the three new add-on codes (33367, 33368, and 33369), effective Jan. 1, 2013," the article notes.

In addition, these claims must have place of service (POS) code 21 (Inpatient hospital), and must have modifier Q0 (Investigational clinical service provided in a clinical research study that is an approved clinical research study) appended as well, the article notes.

To read the MLN Matters piece in its entirety, visit

<http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8168.pdf>.