

Medicare Monthly Review

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Contact information can be found on our website.
Medicare policies can be accessed from the Medical Policy Center section of our website. Providers without access to the Internet can request hard copies from National Government Services.

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This bulletin should be shared with all health care practitioners and managerial members of the providers/suppliers staff. Bulletins issued during the last two years are available at no cost from our website.

CMS publishes the Quarterly Provider Update (QPU) at the beginning of each quarter to inform providers and suppliers:

- Regulations and major policies under development during the quarter
- Regulations and major policies completed or cancelled
- New or revised manual instructions

National Government Services – Articles for Part A and Part B Providers

Local Coverage Determination and Article Revisions: August 2019

The medical policies and related articles can be found in our [Medical Policy Center](#).

LCD Revisions for August 2019

Please note that consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCDs listed below and placed in related Billing and Coding Articles. These articles have been created or updated to accompany each LCD. The article numbers are included in the information below:

Cardiac Catheterization and Coronary Angiography (L33557) (A52850)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A52850**. There has been no change in coverage with this LCD revision.

Cardiac Computed Tomography (CCT) and Coronary Computed Tomography Angiography (CCTA) (L33559) (A52851)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A52851**. There has been no change in coverage with this LCD revision.

Cardiovascular Nuclear Medicine (L33560) (A56743)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56743**. There has been no change in coverage with this LCD revision.

Cataract Extraction (L33558) (A56554)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56554**. There has been no change in coverage with this LCD revision.

Corneal Pachymetry (L33630) (A56548)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56548**. There has been no change in coverage with this LCD revision.

Debridement Services (L33614) (A56617)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been

removed from the LCD and placed in the related **Billing and Coding Article, A56617**. There has been no change in coverage with this LCD revision.

To provide clarity the following sentence was added to Coverage Limitations:

Debridement area greater than 10% is limited to those practitioners who are licensed to perform surgery above the ankle, since the amount of skin required is more than that contained on both feet.

Incision and Drainage (I&D) of Abscess of Skin, Subcutaneous and Accessory Structures (L33563) (A56766)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56766**. There has been no change in coverage with this LCD revision.

Magnetic Resonance Angiography (MRA) (L33633) (A56747)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56747**. There has been no change in coverage with this LCD revision.

Non-Invasive Vascular Studies (L33627) (A56758)

Consistent with Change Request 10901, all coding information, national coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56758**. There has been no change in coverage with this LCD revision.

Nonvascular Extremity Ultrasound (L33619) (A56787)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56787**. There has been no change in coverage with this LCD revision.

Ophthalmic Biometry for Intraocular Lens Power Calculation (L33621) (A56549)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56549**. There has been no change in coverage with this LCD revision.

Ophthalmology: Posterior Segment Imaging (Extended Ophthalmoscopy and Fundus Photography) (L33567) (A56678)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56678**. There has been no change in coverage with this LCD revision.

Pain Management (L33622) (A52863)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been

removed from the LCD and placed in the related **Billing and Coding Article, A52863**. There has been no change in coverage with this LCD revision.

Panretinal (Scatter) Laser Photocoagulation (L33628) (A56550)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56550**. There has been no change in coverage with this LCD revision.

Scanning Computerized Ophthalmic Diagnostic Imaging (SCODI) (L34380) (A56537)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56537**. There has been no change in coverage with this LCD revision.

The following ICD-10-CM codes were added to the related **Billing and Coding Article, (A56537)** to support the medical necessity of CPT code 92134- Group 3, effective for services rendered on or after 8/1/2019: H33.301- H33.303; H33.311- H33.313; H33.321- H33.323; H33.331- H33.333.

Transesophageal Echocardiography (TEE) (L33579) (A52868)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A52868**. There has been no change in coverage with this LCD revision.

Transthoracic Echocardiography (TTE) (L33577) (A56781)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56781**. There has been no change in coverage with this LCD revision.

Treatment of Varicose Veins of the Lower Extremity (L33575) (A52870)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A52870**. There has been no change in coverage with this LCD revision.

Visual Fields Testing (L33574) (A56551)

Consistent with Change Request 10901, all coding information, National coverage provisions and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56551**. There has been no change in coverage with this LCD revision.

Urine Drug Testing (L36037) (A56761)

Consistent with Change Request 10901, all coding information, National coverage provisions, and Associated Information (Documentation Requirements, Utilization Guidelines) have been removed from the LCD and placed in the related **Billing and Coding Article, A56761**. There has been no change in coverage with this LCD revision.

Article Revisions

Bevacizumab - Related to LCD L33394 (A52370)

Based on compendia review, ICD-10-CM code C85.89 has been added to the Group 1 code list effective for dates of service on or after 08/01/2019.

Bortezomib – Related to LCD L33394 (A52371)

Based on compendia review, ICD-10-CM code D47.Z2 has been added effective for dates of service on or after 08/01/2019.

Filgrastim, Pegfilgrastim, Tbo-filgrastim and biosimilars - Related to LCD L33394 (A52408)

Based on compendia review, the following updates have been made. The indications below have been added for filgrastim, filgrastim-sndz and filgrastim-aafi:

- for patients who present with acute exposure to myelosuppressive doses of radiation
- hematopoietic cell transplant for
 - mobilization of hematopoietic progenitor cells in combination with plerixafor in the autologous setting for patients with non-Hodgkin lymphoma or multiple myeloma
 - mobilization of donor hematopoietic progenitor cells (preferred) or for granulocyte transfusion in the allogeneic setting
 - supportive care in the post-transplant setting

ICD-10-CM codes T66.XXXA, T66.XXXD and T66.XXXS have been added to Group 4 for filgrastim, filgrastim-sndz and filgrastim-aafi effective for dates of service on or after 08/01/2019.

The following indication has been added for Tbo-filgrastim:

- for patients who present with acute exposure to myelosuppressive doses of radiation

ICD-10-CM codes T66.XXXA, T66.XXXD and T66.XXXS have been added to Group 5 for Tbo-filgrastim effective for dates of service on or after 08/01/2019.

Intravenous Immune Globulin (IVIG) - Related to LCD L33394 (A52446)

ICD-10-CM codes D80.2, D80.4, D80.6, D80.7, D81.5, D82.1, D82.4, D83.1 and G11.3 have been added effective for dates of service on or after 08/13/2019 based on updates made in Transmittal 259.

Nivolumab - Related to LCD L33394 (A54862)

Based on compendia review, ICD-10-CM code C7A.1 has been added effective for dates of service on or after 08/01/2019.

Paclitaxel (e.g., Taxol®/Abraxane™) - Related to LCD L33394 (A52450)

Based on compendia review, an indication for gastric cancer, refractory to first line fluoropyrimidine-containing chemotherapy has been added for albumin-bound paclitaxel. ICD-10-CM codes C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8 and D37.1 have been added effective for dates of service on or after 08/01/2019. An indication for cutaneous melanoma has been added for paclitaxel.

National Government Services – Articles for Home Health and Hospice Providers

2019 Home Health and Hospice Medicare Summit

The third annual Home Health and Hospice Medicare Summit is fast approaching. Do not miss this opportunity to hear from the experts on upcoming payment, policy and Medicare regulations. This two-day conference will offer education on targeted probe and educate, provider enrollment, audit and reimbursement, MSP, clinical documentation and billing and disaster preparedness.

National Government Services assembled a panel of experts to meet your educational needs. Experts from NGS, National Association for Home Care & Hospice, National Hospice and Palliative Care Organization and some state associations will be on hand to answer your questions. Make sure to stop by and visit our exhibitors and hear about their valuable industry product(s) and service information.

Day one of the Summit will offer a panel of experts to discuss the payment and policy changes effective in fiscal year 2020 for both home health and hospice providers. NGS assembled a panel of experts to provide up-to-date information and most importantly discuss and answer questions. The expert panel includes:

- Judi Lund Person, Vice President of Regulatory and Compliance, NHPCO
- Katie Wehri, Director, Home Care & Hospice Regulatory Affairs, NAHC
- Theresa Forster, Vice President for Hospice Policy & Programs, NAHC
- Corrinne Ball, Provider Outreach and Education Hospice Consultant, NGS
- Lauri Domingo, Provider Outreach and Education Home Health Consultant, NGS
- Christa Shipman, Provider Outreach and Education Home Health Consultant, NGS

This dynamic partnership will allow you to hear directly from your MAC and National Associations about regulatory changes that may impact your agency. You may presubmit questions for this session via email to: j6.provider.training@anthem.com

Day two will include Michael Dorris, NGS Jurisdiction Affairs Manager, who will provide the most up-to-date Medicare hot topics from CMS and legislative leaders on improving the original Medicare and Medicare home health and hospice benefits for Medicare providers and beneficiaries.

The breakout session will provide detailed information and updates in the areas of audit and reimbursement, provider enrollment, medical review, clinical documentation, billing, disaster preparedness and MSP. The 2019 Medicare Summit Event Program will provide you will detailed information including courses, speaker biographies and photos.

Date: September 17th and 18th
Venue: The Orleans Hotel and Conferencing Center
4500 Tropicana Avenue
Las Vegas, Nevada 89103