

# 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 October–November 2019**

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

#### **Updates**

##### ***Billing and Coding: Molecular Pathology Procedures (A56199)***

Added ICD-10-CM diagnosis code D45 to the “ICD-10 Codes that Support Medical Necessity” section-Group 14, effective for services rendered on or after 10/15/2019.

##### ***Billing and Coding: Non-Invasive Vascular Studies (A56758)***

The following codes were omitted from the previous revision and have been added to ICD-10 Codes that Support Medical Necessity- Group 4: I82.451, I82.452, I82.453, I82.461, I82.462, I82.463, I82.551, I82.552, I82.553, I82.561, I82.562, and I82.563.

##### ***Billing and Coding: Scanning Computerized Ophthalmic Diagnostic Imaging (SCODI) (A56537)***

The following ICD-10-CM Diagnoses codes have been added to the “ICD-10 Codes that Support Medical Necessity” section, Group 2, and can be used in conjunction with CPT code 92133 (posterior segment-optic nerve) only, effective for services rendered on or after 10/15/2019: H53.461, H53.462, H53.47.

##### ***Polysomnography and Sleep Studies – Medical Policy Article (A53019)***

A correction is being made to add a 45 day notice which was inadvertently missed with the update posted on 10/10/2019. A 45 day notice will be given beginning 10/31/2019 through 12/15/2019.

##### ***Self-Administered Drug Exclusion List - Medical Policy Article (A53021/A53022)***

The article has been updated to add: Abaloparatide (Tymlos™) (C9399, J3590), Sarilumab (Kevzara®)(C9399, J3590), Semaglutide (Ozempic®) (C9399, J3590), Fremanezumab-vfrm (Ajoovy™) (J3031), Erenumab-aoooe (Aimovig®) (C9399, J3590), Insulin Glargine (Lantus Solostar®) (C9399, J3490), Galcanezumab-gnlm (Emgality®) (C9399, J3590), Adalimumab-adbm (Cyltezo®) (C9399, J3490), lanadelumab (Takhzyro™) (J0593), Abatacept (Orencia®) (C9399, J3590) effective for dates of service on or after 12/01/2019. An end-date of 12/01/2019 has been added for Pasireotide LA (J2502).

##### ***Minimally-Invasive Surgical (MIS) Fusion of the Sacroiliac (SI) Joint (L36406)***

The link to the NASS Coverage Policy was corrected.

#### **No Codes Format**

The following LCDs were converted to the new “no-codes” format. There has been no change in coverage with these revisions:

- L37851 – Biomarker Testing for Neuroendocrine Tumors/Neoplasms
- L33646 – Botulinum Toxins
- L33585 – Breast Imaging: Breast Echography (Sonography)/Breast MRI/Ductography

- L33394 – Drugs and Biologicals, Coverage of, for Label and Off-Label Uses
- L33584 – Implantable Miniature Telescope (IMT)
- L35937 – Lumbar Epidural Injections
- L37421 – Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Essential Tremor
- L36406 – Minimally-invasive Surgical (MIS) Fusion of the Sacroiliac (SI) Joint
- L33396 – Posterior Tibial Nerve Stimulation for Voiding Dysfunction
- L35080 – Select Minimally Invasive GERD Procedures
- L35076 – Stereotactic Radiation Therapy: Stereotactic Radiosurgery (SRS) and Stereotactic Body Radiation Therapy (SBRT)
- L36039 – Total Joint Arthroplasty
- L33398 – Transcranial Magnetic Stimulation
- L33578 – Transrectal Ultrasound
- L37929 – Transvenous Phrenic Nerve Stimulation in the Treatment of Central Sleep Apnea
- L36831 – Visual Electrophysiology Testing
- L33576 – Urodynamics

### **New Coding Format Article**

These articles were revised to convert to the new coding format, and to remove Bill Types and Revenue Codes:

- A52848 – Billing and Coding: Botulinum Toxins
- A52849 – Billing and Coding: Breast Imaging: Breast Echography (Sonography)/Breast MRI/Ductography
- A56863 – Billing and Coding: Select Minimally Invasive GERD Procedures
- A56874 – Billing and Coding: Stereotactic Radiation Therapy: Stereotactic Radiosurgery (SRS) and Stereotactic Body Radiation Therapy (SBRT)

### **New Billing and Coding Articles**

- A57059 – Billing and Coding: Biomarker Testing for Neuroendocrine Tumors/Neoplasms
- A57411 – Billing and Coding: Implantable Miniature Telescope (IMT)
- A57494 – Billing and Coding: Lumbar Epidural Injections
- A57435 – Billing and Coding: Magnetic Resonance Image Guided High Intensity Focused Ultrasound (MRgFUS) for Essential Tremor
- A57431 – Billing and Coding: Minimally-invasive Surgical (MIS) Fusion of the Sacroiliac (SI) Joint
- A57453 – Billing and Coding: Posterior Tibial Nerve Stimulation for Voiding Dysfunction
- A57428 – Billing and Coding: Total Joint Arthroplasty
- A57528 – Billing and Coding: Transcranial Magnetic Stimulation
- A57427 – Billing and Coding: Transrectal Ultrasound
- A57548 – Billing and Coding: Transvenous Phrenic Nerve Stimulation in the Treatment of Central Sleep Apnea
- A57455 – Billing and Coding: Urodynamics
- A57060 – Billing and Coding: Visual Electrophysiology Testing

## **CMS Articles for Part A and Part B Providers**

### **Notification of the 2020 Dollar Amount in Controversy Required to Sustain Appeal Rights for an Administrative Law Judge Hearing or Federal District Court Review**

The amount that must remain in controversy for ALJ hearing requests filed on or before 12/31/2019 is \$160. **This amount will increase to \$170 for ALJ hearing requests filed on or after 1/1/2020.** The amount that must remain in controversy for reviews in Federal District Court requested on or before 12/31/2019 is \$1,630. **This amount will increase to \$1,670 for appeals to Federal District Court filed on or after 1/1/2020.**