



MLN Matters



Information for Medicare Fee-for-Service Health Care Professionals

MLN Matters Number: MM3505

Related Change Request (CR) #: 3505

Related CR Release Date: October 1, 2004

Effective Date: January 1, 2004

Related CR Transmittal #: R306CP

Implementation Date: October 4, 2004

Full Replacement of CR 3415, 3rd Update to the 2004 Medicare Physician Fee Schedule Database. CR 3415 Is Rescinded

Note: This article was revised to contain web addresses that conform to the new CMS website and to show they are now MLN Matters articles. All other information remains the same.

Provider Types Affected

Physicians, providers, and suppliers

Provider Action Needed

Physicians, providers, and suppliers should note the changes to the Medicare Physician Fee Schedule Database and identify those changes that affect their practice.

Background

Payment files were issued to carriers based upon the November 7, 2003, and January 7, 2004, Final Rules. This instruction amends those payment files and replaces CR3415.

CR3415 included changes to the Professional Component/Technical Component (PC/TC) indicator for Current Procedural Terminology (CPT) codes 96400, 96408, 96425, 96520, and 96530 from a 5 to 0.

Changes to the PC/TC indicator for these codes should not have been included.

Implementation

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

The implementation date for this instruction is October 4, 2004.

Additional Information

The actual changes to the fee schedule involve numerous CPT/HCPCS codes and the actual effective dates vary. These changes to the revised 3rd Update to the 2004 Medicare Physician Fee Schedule Database are described in the following table.

Changes to Revised 3rd Update to the 2004 Medicare Physician Fee Schedule Database

CPT/ HCPCS	ACTION
G0336	<p>Description: PET imaging, brain imaging for the differential diagnosis of Alzheimer's disease with aberrant features vs. fronto-temporal dementia Short Descriptor: PET imaging brain Alzheimer's Procedure Status = C PC/TC = 1 Site of Service = 1 Global Surgery = XXX Multiple Procedure Indicator = 0 Bilateral Procedure Indicator = 0 Assistant at Surgery Indicator = 9 Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Type of Service = 4 Diagnostic Supervision = 9 Note: Effective for services performed on or after September 15, 2004.</p>
G0336 - TC	<p>Description: PET imaging, brain imaging for the differential diagnosis of Alzheimer's disease with aberrant features vs. fronto-temporal dementia Short Descriptor: PET imaging brain Alzheimer's Procedure Status = C PC/TC = 1 Site of Service = 1 Global Surgery = XXX Multiple Procedure Indicator = 0 Bilateral Procedure Indicator = 0 Assistant at Surgery Indicator = 9 Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Type of Service = 4 Diagnostic Supervision = 9 Note: Effective for services performed on or after September 15, 2004</p>
G0336 - 26	<p>Description: PET imaging, brain imaging for the differential diagnosis of Alzheimer's disease with aberrant features vs. fronto-temporal dementia Short Descriptor: PET imaging brain Alzheimer's Procedure Status = A WRVU = 1.50</p>

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CPT/ HCPCS	ACTION
	<p>Non-Facility PE RVU = .51 Facility PE RVU = .51 Malpractice RVU = .05 PC/TC = 1 Site of Service = 1 Global Surgery = XXX Multiple Procedure Indicator = 0 Bilateral Procedure Indicator = 0 Assistant at Surgery Indicator = 9 Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Type of Service = 4 Diagnostic Supervision = 9 Note: Effective for services performed on or after September 15, 2004</p>
G0341	<p>Description: Percutaneous islet cell transplant, includes portal vein catheterization and infusion (To report imaging bill 75887 or 75885) Short Descriptor: Percutaneous islet cell trans Procedure Status = A WRVU = 6.98 Non-Facility PE RVU = 2.73 Facility PE RVU = 2.73 Malpractice RVU = 0.48 PC/TC = 0 Site of Service = 1 Global Surgery = 000 Multiple Procedure Indicator = 2 Bilateral Procedure Indicator = 0 Assistant at Surgery Indicator = 9 Co-Surgery Indicator = 1 Team Surgery Indicator = 0 Type of Service = 2 Diagnostic Supervision = 9 Note: Effective for services performed on or after October 1, 2004</p>
G0342	<p>Description: Laparoscopy for islet cell transplant, includes portal vein catheterization and infusion Short Descriptor: Laparoscopy Islet cell Trans Procedure Status = A WRVU = 11.92 Non-Facility PE RVU = 5.32 Facility PE RVU = 5.32 Malpractice RVU = 1.46 PC/TC = 0 Site of Service = 1 Global Surgery = 090 Pre Op = 0.09 Intra Op = 0.81 Post Op = 0.10 Multiple Procedure Indicator = 2 Bilateral Procedure Indicator = 0</p>

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CPT/ HCPCS	ACTION
	Assistant at Surgery Indicator = 2 Co-Surgery Indicator = 1 Team Surgery Indicator = 0 Type of Service = 2 Diagnostic Supervision = 9 Note: Effective for services performed on or after October 1, 2004
G0343	Description: Laparotomy for islet cell transplant, includes portal vein catheterization and infusion Short Descriptor: Laparotomy Islet cell transp Procedure Status = A WRVU = 19.85 Non-Facility PE RVU = 8.82 Facility PE RVU = 8.82 Malpractice RVU = 2.05 PC/TC = 0 Site of Service = 1 Global Surgery = 090 Pre Op = 0.09 Intra Op = 0.81 Post Op = .10 Multiple Procedure Indicator = 2 Bilateral Procedure Indicator = 0 Assistant at Surgery Indicator = 2 Co-Surgery Indicator = 1 Team Surgery Indicator = 0 Type of Service = 2 Diagnostic Supervision = 9 Note: Effective for services performed on or after October 1, 2004
23410	Bilateral Status Indicator = 1
33979	Bilateral Status Indicator = 0
33980	Bilateral Status Indicator = 0
52320	Endobase Code = 52000
52325	Endobase Code = 52000
52327	Endobase Code = 52000
52327	Bilateral Status Indicator = 1
52330	Endobase Code = 52000
52332	Endobase Code = 52000
52334	Endobase Code = 52000
52341	Endobase Code = 52000
52342	Endobase Code = 52000
52343	Endobase Code = 52000
52344	Endobase Code = 52000
69440	Bilateral Surgery Indicator = 1
69450	Bilateral Surgery Indicator = 1
69501	Bilateral Surgery Indicator = 1
69502	Bilateral Surgery Indicator = 1

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CPT/ HCPCS	ACTION
69505	Bilateral Surgery Indicator = 1
69511	Bilateral Surgery Indicator = 1
69530	Bilateral Surgery Indicator = 1
69535	Bilateral Surgery Indicator = 1
69540	Bilateral Surgery Indicator = 1
69550	Bilateral Surgery Indicator = 1
69552	Bilateral Surgery Indicator = 1
69554	Bilateral Surgery Indicator = 1
69601	Bilateral Surgery Indicator = 1
69602	Bilateral Surgery Indicator = 1
69603	Bilateral Surgery Indicator = 1
69604	Bilateral Surgery Indicator = 1
69605	Bilateral Surgery Indicator = 1
69610	Bilateral Surgery Indicator = 1
69620	Bilateral Surgery Indicator = 1
69631	Bilateral Surgery Indicator = 1
69632	Bilateral Surgery Indicator = 1
69633	Bilateral Surgery Indicator = 1
69635	Bilateral Surgery Indicator = 1
69636	Bilateral Surgery Indicator = 1
69637	Bilateral Surgery Indicator = 1
69641	Bilateral Surgery Indicator = 1
69642	Bilateral Surgery Indicator = 1
69643	Bilateral Surgery Indicator = 1
69644	Bilateral Surgery Indicator = 1
69645	Bilateral Surgery Indicator = 1
69646	Bilateral Surgery Indicator = 1
69650	Bilateral Surgery Indicator = 1
69660	Bilateral Surgery Indicator = 1
69661	Bilateral Surgery Indicator = 1
69662	Bilateral Surgery Indicator = 1
69666	Bilateral Surgery Indicator = 1
69667	Bilateral Surgery Indicator = 1
69670	Bilateral Surgery Indicator = 1
69700	Bilateral Surgery Indicator = 1
69711	Bilateral Surgery Indicator = 1
69714	Bilateral Surgery Indicator = 1
69715	Bilateral Surgery Indicator = 1
69717	Bilateral Surgery Indicator = 1
69718	Bilateral Surgery Indicator = 1
69720	Bilateral Surgery Indicator = 1
69725	Bilateral Surgery Indicator = 1
69740	Bilateral Surgery Indicator = 1

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CPT/ HCPCS	ACTION
69745	Bilateral Surgery Indicator = 1
69799	Bilateral Surgery Indicator = 1
69801	Bilateral Surgery Indicator = 1
69802	Bilateral Surgery Indicator = 1
69805	Bilateral Surgery Indicator = 1
69806	Bilateral Surgery Indicator = 1
69820	Bilateral Surgery Indicator = 1
69840	Bilateral Surgery Indicator = 1
69905	Bilateral Surgery Indicator = 1
69910	Bilateral Surgery Indicator = 1
69915	Bilateral Surgery Indicator = 1
69930	Bilateral Surgery Indicator = 1
69949	Bilateral Surgery Indicator = 1
69950	Bilateral Surgery Indicator = 1
69955	Bilateral Surgery Indicator = 1
69960	Bilateral Surgery Indicator = 1
69970	Bilateral Surgery Indicator = 1
69979	Bilateral Surgery Indicator = 1
0001T	Co-Surgery Indicator = 2

For complete details, please see the official instruction issued to your carrier and intermediary regarding this change. That instruction may be viewed by going to <http://www.cms.hhs.gov/Transmittals/downloads/R306CP.pdf> on the CMS website.

If you have any questions, please contact your carrier or intermediary at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.