



Related MLN Matters Article #: MM5432

Date Posted: January 11, 2007

Related CR #: 5432

Intracranial Percutaneous Transluminal Angioplasty (PTA) with Stenting

Key Words

MM5432, CR5432, R1147CP, R64NCD, Intracranial, Percutaneous, Transluminal, Angioplasty, PTA, Stenting

Provider Types Affected

Physicians and providers who submit claims to Medicare carriers, fiscal intermediaries (FIs) and Part A/B Medicare Administrative Contractors (A/B MACs) for PTA Stenting

Key Points

- The effective date of the instruction is November 6, 2006.
- The implementation date is February 5, 2007.
- MLN Matters article MM5432 and related Change Request (CR) 5432 communicate the findings and revised national coverage determination (NCD) resulting from analysis to determine if PTA should be covered by Medicare.
- In the past, PTA to treat obstructive lesions of the cerebral arteries was non-covered by Medicare because the safety and efficacy of the procedure had not been established.
- This NCD meant that the procedure was also non-covered for beneficiaries participating in Food and Drug Administration (FDA)-approved Investigational Device Exemption (IDE) clinical trials.
- On February 9, 2006, a request for reconsideration of this NCD initiated a national coverage analysis.
- Effective November 6, 2006, Medicare covers PTA and stenting of intracranial arteries for the treatment of cerebral artery stenosis $\geq 50\%$ in patients with intracranial atherosclerotic disease when furnished in accordance with the FDA-approved protocols governing Category B IDE clinical trials.
- The Centers for Medicare & Medicaid Services (CMS) determined that coverage of intracranial PTA and stenting is reasonable and necessary under these circumstances.

- Providers billing FIs and A/B MACs should note this coverage applies to claims with:
 - A discharge date on or after November 6, 2006;
 - International Classification of Diseases, Ninth Revision Clinical Modification (ICD-9-CM) procedure codes of 00.62 and 00.65 both being present;
 - ICD-9-CM diagnosis code 437.0 present; and
 - The IDE number present on a 0624 revenue code line.
- Non-institutional providers billing Medicare carriers or A/B MACs should note this coverage applies to claims with:
 - Current Procedural Terminology (CPT) code 37799 (Unlisted procedure, Vascular surgery);
 - A QA modifier to denote Category B IDE clinical trial; and
 - The appropriate IDE number.
- All other indications for PTA with or without stenting to treat obstructive lesions of the vertebral and cerebral arteries remain non-covered. The safety and efficacy of these procedures are not established.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5432.pdf> on the CMS web site.

The official instruction (CR5432) issued to the Medicare carrier, FI or A/B MAC is contained in two transmittals.

The first transmittal is available at <http://www.cms.hhs.gov/Transmittals/downloads/R1147CP.pdf> on the CMS web site and it contains the revised portions of the *Medicare Claims Processing Manual*.

The second transmittal contains the national coverage determination and it is available at <http://www.cms.hhs.gov/Transmittals/downloads/R64NCD.pdf> on the CMS web site.

If physicians/providers have questions, they may contact their Medicare FIs, carriers, or A/B MACs at their toll-free number, which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS web site.