Related MLN Matters Article #: MM5462

Date Posted: January 31, 2007

Related CR #: 5462

Coding Change for Lumbar Artificial Disc Replacement (LADR)

Key Words

MM5462, CR5462, R1164CP, Lumbar, Artificial, Disc, Replacement, LADR, Codes

Provider Types Affected

All physicians and providers who submit claims to Medicare Carriers and Part A/B Medicare Administrative Contractors (A/B MACs) for LADR

Key Points

- The effective date of the instruction is January 1, 2007.
- The implementation date is March 13, 2007.
- MLN Matters article MM5462 is based on Change Request (CR) 5462, which announces a coding change effective January 1, 2007, for LADR.
- CR5057, transmittal 992, issued on June 23, 2006, contains correct codes for services rendered in 2006.
- Beginning with services rendered on or after January 1, 2007, there are new coding changes.
- Providers may review the MLN article that resulted from CR5057 by clicking on the following link: http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5057.pdf on the CMS website.
- Providers should be aware that the National Coverage Determination (NCD) issued under CR5057 is not changing. Only the codes that should be utilized have changed.
- Effective for services performed on or **after January 1, 2007**, carriers will **deny claims**, for Medicare beneficiaries over sixty years of age, submitted with the following codes:
 - Current Procedural Terminology (CPT) code 22857 for total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, single interspace.
 - CPT Category III code 0163T for total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, each additional interspace.

- Carriers and A/B MACs will continue to follow their normal claims processing criteria for investigational device exemptions (IDEs) for LADR performed with an implant eligible under the IDE criteria.
- Carriers will allow claims submitted for approved IDEs/clinical trials submitted with:
 - 0091T or 0092T for services performed from May 16, 2006, through December 31, 2006, and
 - 22857 or 0263T for services performed on or after January 1, 2007, with the modifier QA.

Important Links

The related MLN Matters article can be found at http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5462.pdf on the CMS website.

The official instruction (CR5462) issued may be viewed by going to http://www.cms.hhs.gov/Transmittals/downloads/R1164CP.pdf on the CMS website.

The related MLN Matters article can be found at http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5057.pdf on the CMS website.