

LCD and Article revisions for February and March 2019

Botulinum Toxins - Supplemental Instructions Article (A52848)

Outdated information has been removed from the article including all references to CPT code 53899.

Implantable Automatic Defibrillators – Coding and Billing (A56326)

The National Coverage Determination (NCD) 20.4, Implantable Automatic Defibrillators was revised with an effective date of February 15, 2018. The CMS A/B Medicare Administrative Contractors (MACs) have been instructed to implement the NCD at the local level. This article provides coding and billing instructions for the implementation of NCD 20.4. (CMS policy language is in *italics*.)

Frequency of Hemodialysis (LCD L37475 and Article A55672)

This is a new LCD, effective March 1, 2019. Hemodialysis (HD) at 3 times (3 X) per week is noted to be ‘conventional’ treatment for end state renal disease (ESRD), worldwide, and is usually performed for 3 to 5 hours, 3 days per week. CMS established payment for hemodialysis based on conventional treatment. This LCD sets out medical conditions which may justify additional payments. Coding guidance is provided in the attached coding article A55672 (Coding for Hemodialysis Sessions).

Speech-Language Pathology (L33580)

CMS Transmittal No. 4149, dated October 23, 2018, removed Functional Reporting requirements and edits for outpatient therapy services, effective January 1, 2019. Documentation Requirements and CMS National Coverage sections have been updated accordingly.

Stereotactic Radiation Therapy: Stereotactic Radiosurgery (SRS) and Stereotactic Body Radiation Therapy (SBRT) (L35076)

The LCD has been updated to include additional language for the Karnofsky Performance Status and the Eastern Cooperative Oncology Group (ECOG) Performance Status in the “Coverage indications, Limitations, and/or Medical Necessity” section for clarification purposes only.