

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Medicare Will Cover Pancreas Transplants--But Only In a Few Cases

Doctor who underdosed cancer patients gets a full dose of prison

Your physician can soon start billing for pancreas transplantation alone, thanks to a national coverage decision from the **Centers for Medicare & Medicaid Services**.

Medicare will only cover pancreas transplants in facilities that are approved for kidney transplants and will only cover the procedure for patients with certain types of diabetes, including medically-uncontrollable labile (brittle) insulin-dependent diabetes, with life-threatening complications that require hospitalization.

The patients must have been managed by an endocrinologist for 12 months previously. They must be suitable transplant candidates and have the mental capacity to understand the significant risks of the procedure, CMS says.

In other news:

- You'll have to recertify your enrollment information with Medicare every five years, under a new proposed rule CMS published in the April 21 Federal Register. You must also report enrollment information changes within 90 days, CMS says. CMS also plans to streamline the CMS-855 enrollment forms soon.
- Crossville, TN oncologist **Young Moon** will serve 15 and a half years in prison for health care fraud. She allegedly shorted cancer patients of chemotherapy medications to make more money. She will also have to repay \$432,238 to Medicare and other payors, and serve two years' supervised release after she gets out of prison. She blamed her nurses, her busy schedule and complicated billing procedures for the fact that she underdosed her patients, according to the Tennessean.
- The **American Society of Clinical Oncology** published its first guideline to preserving fertility for people with cancer. The guide also advises oncologists on their role in discussing fertility options with cancer patients. It's available at www.asco.org/guidelines.
- CMS issued information on one new CPT code that takes effect on July 1. You'll use 90714 for tetanus and diphtheria vaccines administered intramuscularly to patients over the age of seven, according to Transmittal 910, dated April 21.
- CMS updated coverage guidelines for percutaneous transluminal angioplasty with carotid artery placement, in Transmittal 911, dated April 21. In particular, CMS removed 37216 from the list of covered codes for carotid artery stenting with embolic protection. CMS also altered the reason codes used to issue denials to hospitals based on ICD-9 procedure coding issues.
- CMS issued instructions to the carriers on its expanded coverage for cardiac rehabilitation programs, in Transmittal 909, dated April 21.