

HEALTH ECONOMICS & REIMBURSEMENT

MITRACLIP™ TRANSCATHETER EDGE-TO-EDGE REPAIR (TEER) Echocardiographer Checklist

This checklist is provided as a resource that may be used by the hospital and/or physician to process claims for TEER procedures with the MitraClip[™] System per CMS's NCD 20.33¹. It is the responsibility of the hospital and/or physician to determine appropriate coding for a particular patient and / or procedure. Any claim should be coded appropriately and supported with adequate documentation in the medical record in accordance with the regulations, hospital policies and procedures.

CODES/MODIFIERS/OTHERS	WHEN USED?	INCLUDED	NA
DIAGNOSIS CODES ²			
I34.0 / I34.1: Nonrheumatic mitral valve disorders	When appropriate		
Z00.6: Examination of a participant in a clinical trial	All cases		
Applicable secondary diagnosis codes	When appropriate		
CPT [‡] Codes			
93355: TEE for intra procedural monitoring	All cases		
CPT [‡] Code MODIFIERS			
-Q0: Investigational / Routine clinical service provided in a clinical research study that is in an	All cases		
approved clinical research study.			
NCT NUMBER			
02245763	All cases		

Modifier 22 (Increased Procedural Services) may be appended to CPT code 93355 when the procedure performed has exceeded the normal range of complexity and signifies that a physician has gone above and beyond the typical time and/or intensity of a particular procedure. For more information, please reference *Interventional Transesophageal Echocardiography: Background and Coding Review – A publication From the ASE Advocacy Committee* July 2021.

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3200 Lakeside Dr., Santa Clara, CA 95054 USA Tel: 1.800.227.9902 www.cardiovascular.abbott

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References:

 CMS National Coverage Determination for Transcatheter Mitral Valve Repair 20.33: https://www.cms.gov/medicare-coveragedatabase/view/ncd.aspx?ncdid=363&ncdver=2

2. CMS MLN Matters #MM12361: https://www.cms.gov/files/document/mm12361.pdf