



## Echocardiographer Checklist for TriClip™ Transcatheter Edge-to-Edge Repair

The checklist below is provided as a summary of the information used to process claims for Tricuspid Transcatheter Edge-to-Edge Repair (TEER) procedures with the TriClip™ System. It is the responsibility of the hospital and/or physician to determine appropriate coding for a particular patient and/or procedure. **Please note that prior authorization will be required for Medicare Advantage and third-party commercial insurance plans.** Any claim should be coded appropriately and supported with adequate documentation in the medical record.

CODES/MODIFIERS/OTHERS	WHEN USED?	INCLUDED	NA
<b>ICD-10-CM DIAGNOSIS CODES</b>			
I36.1: Nonrheumatic tricuspid (valve) insufficiency	When appropriate	<input type="checkbox"/>	<input type="checkbox"/>
I36.8: Other nonrheumatic tricuspid valve disorders	When appropriate	<input type="checkbox"/>	<input type="checkbox"/>
I36.9: Nonrheumatic tricuspid valve disorder, unspecified	When appropriate	<input type="checkbox"/>	<input type="checkbox"/>
Applicable secondary diagnosis codes	When appropriate	<input type="checkbox"/>	<input type="checkbox"/>
<b>CPT* CODES</b>			
93355*: Echocardiography, transesophageal (TEE)	All cases	<input type="checkbox"/>	<input type="checkbox"/>

\* Note that 93355 is bundled and not separately payable when reported on the same physician claim as the primary procedure or with anesthesia services.

### References

- CMS 2024 ICD-10-CM. <https://www.cms.gov/medicare/icd-10/2024-icd-10-cm>

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