

Hospital Claim Checklist for TriClip™ Transcatheter Edge-to-Edge Repair (TEER)

This checklist is provided as a summary of information that can be used to process claims for TriClip™ TEER procedures. This procedure might be referred to as TriClip™ Transcatheter Tricuspid Valve Repair (TTVr).

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. Coding requirements should be verified with the individual carrier before submitting charges. **Please note that prior authorization must be obtained for Medicare Advantage and third-party commercial insurance plans.**

| CODES/MODIFIERS/OTHER | WHEN USED? | INCLUDED |
|---|------------------|--------------------------|
| ICD-10-CM DIAGNOSIS CODES | | |
| I36.1/ I36.8/ I36.9: Nonrheumatic tricuspid (valve) disorders | When appropriate | <input type="checkbox"/> |
| Applicable Secondary Diagnosis Codes | When appropriate | <input type="checkbox"/> |
| ICD-10-PCS CODE | | |
| 02UJ3JZ: Supplement Tricuspid Valve with Synthetic Substitute, Percutaneous Approach | All cases | <input type="checkbox"/> |
| BILL TYPE | | |
| 11x - Inpatient | All cases | <input type="checkbox"/> |
| REVENUE CODE | | |
| 278: Medical/Surgical Supplies and Devices, Other implants | All cases | <input type="checkbox"/> |

Please note that hospitals can report TriClip™ TEER claims to the relevant STS/ACC TVT Registry. If they choose to report, condition code 30, value code D4, and the relevant NCT number should be included.

References

- CMS 2024 ICD-10-CM. <https://www.cms.gov/medicare/icd-10/2024-icd-10-cm>
- CMS 2024 ICD-10-PCS Procedure Coding System and Index: <https://www.cms.gov/medicare/icd-10/2024-icd-10-pcs>
- CMS IOM Publication 100-04, Medicare Claims Processing Manual, Chapter 32, sections 290.1- 290.4 <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c32.pdf>

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