



Radiology Views™ Newsletter – April 2009

Arteriovenous Shunt Angioplasty

PHYSICIANS MAY BE REIMBURSED FOR THE HIGHER VALUED ARTERIAL ANGIOPLASTY WHEN PERFORMED WITHIN AN AV GRAFT OR FISTULA.

<u>CODE</u>	<u>RVU</u>	<u>DESCRIPTION</u>
G0392	9.48	Arterial Angioplasty, AV Fistula/Graft
G0393	6.03	Venous Angioplasty, AV Fistula/Graft

Prior to April 1, 2009, the higher valued arterial angioplasty code G0392 could be reported if the angioplasty was performed at the arterial anastomosis only. If angioplasty was performed within the graft, the lower valued code G0393 was required to be reported. Effective April 1, 2009, CMS will update the National Correct Coding Initiative (NCCI Version 15.1), to allow the higher valued arterial angioplasty code to be reported providing access is through an artery. If access is through a vein, G0393 would still have to be reported.

AV Fistula/Graft Documentation Reminders:

- Name the access vessel or site.
- Identify the inflow and outflow vessels of the graft.
- Each intervention performed.
- Medical necessity for each intervention.
- Record imaging.

Additional Information:

CMS will only allow one angioplasty to be coded per vessel.

CMS defines a single “vessel” for AV grafts/fistula: “The entire fistula or graft from the arterial anastomosis and the outflow vein up to, but not including, the subclavian vein is considered a single “vessel.”

If you have any questions on this or other documentation and coding topics, please call or email Don Clark, RCC, at 330.564.2608 or dclark@prcmedical.com.