



AMERICAN
COLLEGE of
CARDIOLOGY **SVS**

Society for
Vascular Surgery



July 7, 2022

Noridian Healthcare Solutions
Medical Directors

Sent electronically via email

RE: Local Coverage Articles A59099 and A59048

Dear Medical Directors:

We are writing on behalf of the American College of Cardiology, Society for Cardiovascular Angiography and Interventions, Society of Interventional Radiology, and the Society for Vascular Surgery to address Noridian's Future Local Coverage Articles A59099 and A59048 entitled Billing and Coding: Pulmonary Thromboembolectomy.

We disagree with Noridian's assertion that pulmonary thrombectomy is being billed incorrectly. While catheter-based pulmonary thrombectomy (embolectomy) procedures are performed from a transvenous approach, the actual thrombectomy procedure is performed in the pulmonary artery(ies) and is considered an arterial procedure not a venous procedure. The language in both CPT® and the original CPT® Assistant article clearly indicate that the codes should be reported for the arterial vessel treated not the vessel where the thrombus originated. Since the pulmonary artery is the vessel being treated during this procedure, the arterial code is more appropriate.

The CPT® interpretation is consistent with associated diagnosis codes submitted in the 2020 Medicare Fee-for-Service claims, that indicate pulmonary embolism is one of the top three diagnoses for the arterial thrombectomy code (CPT® code 37184). Additionally, the physician work component of a pulmonary embolectomy procedure, including amount of time, skill, training and intensity, is much different than a venous thrombectomy, requiring different devices and expertise to remove thrombus from the pulmonary artery system versus a peripheral vein.

We therefore believe it is inappropriate to link ICD-10 codes for pulmonary embolism to the venous thrombectomy codes. We also disagree with limiting the medically necessary diagnoses to those pulmonary embolisms with acute cor pulmonale as this guidance does not align with current medical practice.

We respectfully request that Noridian remove the articles before the proposed effective date.
We would be happy to schedule a meeting to discuss this matter further.

Sincerely,



Edward Fry T. A., MD, FACC
President
American College of Cardiology



Sunil Rao, MD, FSCAI
President
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