

# Reimbursement Information 2024



Please see Indications and Important Safety Information on <u>page 9</u> and read the accompanying full <u>Prescribing Information</u>, including Boxed WARNING regarding serious cardiopulmonary reactions, also available at <u>DEFINITYImaging.com</u>.







Questions regarding reimbursement for Lantheus products?

Email: reimbursement@lantheus.com



### **TABLE OF CONTENTS**

1.	Basic Reimbursement Background and Settings	l - 5
2.	DEFINITY® Ambulatory Payment Classification (APC) Payments	6
3.	Hospital Outpatient Claim Form Contrast Echo Example	7
	Full Descriptors: Echo C-codes and Current Procedural Terminology (CPT®) Codes	8
5.	Indications, Contraindications and Important Safety Information	9

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### 1. Basic Reimbursement Background and Settings

### CPT® - Current Procedural Terminology

 American Medical Association's five-digit numeric codes used to report medical procedures and services.

### **HCPCS - Healthcare Common Procedure Coding System**

- Level I HCPCS codes are American Medical Association's Current Procedural Terminology (CPT).
- Level II HCPCS codes are alphanumeric five-digit codes primarily used to identify contrast agents, radiopharmaceuticals, supplies and devices.

#### **HCPCS** code for **DEFINITY®**

- Q9957 Injection, perflutren lipid microspheres, per mL.
- There are two units per vial of DEFINITY®.

#### C-codes

• Unique, temporary HCPCS codes created by Medicare and used only for hospital outpatients. This is often done when no other appropriate code exists.

### **Q-codes**

Temporary codes created by Medicare to identify items not assigned a CPT code.
 Many drugs, supplies and biologicals are assigned Q codes.

# NDC codes - National Drug Code

• A unique numeric code to identify drugs. The first segment of numbers identifies the labeler or manufacturer, the second segment identifies the product and the third identifies the package.

### NDC codes DEFINITY®

DEFINITY® 4 vial kit: NDC # 11994 011 04
 DEFINITY® 16 vial kit: NDC # 11994 011 16



### Echocardiography codes<sup>1,2</sup>

- CPT 93306 TTE "rest" echo complete
   Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography.
- HCPCS C8929 TTE "rest" echo complete with contrast
  Transthoracic echocardiography with contrast, or without contrast followed by with
  contrast, real-time with image documentation (2D), includes M-mode recording,
  when performed, complete, with spectral Doppler echocardiography, and with color
  flow Doppler echocardiography.
- HCPCS C8929 AMA "short descriptor"
   Transthoracic echocardiography with contrast, or without contrast followed by with contrast, and with color flow Doppler echocardiography

JW modifier - The JW modifier is not required for packaged drugs such as DEFINITY® for Medicare Hospital Outpatients.

Lantheus cannot guarantee coverage or payment for products or procedures. Payer policies can vary widely. For more specific information contact the payer directly in order to obtain up to date coverage, coding and payment information.

This information is provided as a courtesy for informational purposes only and is not intended to be, and should not be interpreted as, reimbursement or billing advice.



### 2. DEFINITY® Hospital Outpatient Setting and APC Payments<sup>3</sup>

Hospitals must bill for the appropriate C-code when reporting an echo with DEFINITY® in order to receive the packaged payment for DEFINITY®.

- If a C-code is not billed there will be no payment for contrast.
- Q9957 is not paid as a separate item.

### When billing echo procedures:

- Report the appropriate C-code for an echo with contrast or the appropriate CPT code for an echo without contrast.
- Do not report both.
- When using DEFINITY®, hospitals should report Q9957 two units per vial.
- It is not paid separately but this allows Medicare to collect cost and charge data in order to set future payments.

### APCs ECHO PROCEDURES - WITHOUT CONTRAST<sup>3</sup>

# APC 5523 Level 3 Imaging Without Contrast

93307 TTE complete w/o Doppler and color flow 93308 TTE follow up or limited (66 total imaging procedure codes in APC 5523)

# APC 5524 Level 4 Imaging Without Contrast

93303 TTE congenital, complete
93304 TTE congenital follow up or limited
93306 TTE complete with Doppler and color flow
93312 TEE include placement, acq, inter, report
93313 TEE placement only
93315 TEE cong, placement, acq, inter, report
93316 TEE congenital placement only
93318 TEE monitor, placement, acq, inter
93350 Stress TTE (w/o ECG monitoring)
93351 Stress TTE (includes ECG monitoring)
(20 total imaging procedure codes in APC 5524)

0439T, 93319 and 93356 are packaged by Medicare and there is no separate payment for hospital outpatients.

#### APCs ECHO PROCEDURES - WITH CONTRAST<sup>3</sup>

# APC 5572 Level 2 Imaging With Contrast

C8924 TTE follow up or limited with contrast (62 total imaging with contrast codes in APC 5572)

# APC 5573 Level 3 Imaging With Contrast

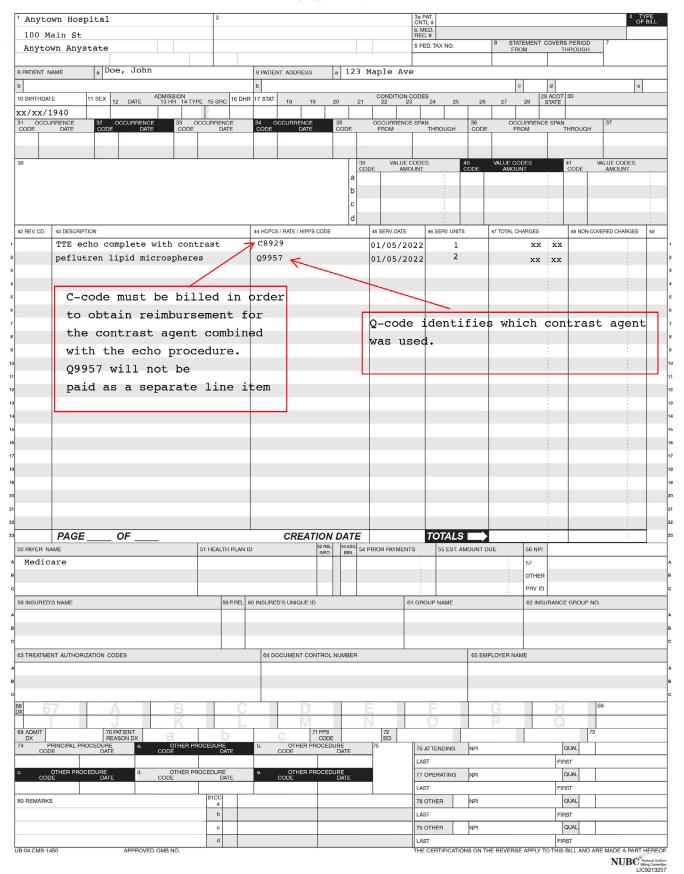
C8921 TTE congenital complete with contrast C8922 TTE congenital follow up or limited with contrast

C8923 TTE complete w/o Doppler, CF with contrast C8925 TEE placement, acq, inter, report with contrast C8926 TEE congenital placement, image, inter, report with contrast

C8927 TEE monitor, placement, acq, inter, w/contrast C8928 Stress TTE (no ECG monitoring) with contrast C8929 TTE comp. with Dop., color flow with contrast C8930 Stress TTE (with ECG monitoring) with contrast (22 total Imaging with contrast codes in APC 5573)



### 3. Claim Form





# 4. Complete code descriptors. Without contrast left column, with contrast right column

	Echo without contrast <sup>1</sup>		Echo with contrast <sup>2</sup>		
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	<b>+</b>	C8921	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; complete	
93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study	$\leftrightarrow$	C8922	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; follow-up or limited study	
93306	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	<b>+</b>	C8929	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	
93307	Echocardiography, transthoracic, real-time, with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	<b>+</b>	C8923	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	
93308	Echocardiography, transthoracic, real-time, with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study	<b>+</b>	C8924	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study	
93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	<b>+</b>	C8925	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement image acquisition, interpretation and report	<b>↔</b>	C8926	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	
93318	Echocardiography, transesophageal (TEE) for monitoring purposes, including probe placement, real-time 2 - dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	<b>+</b>	C8927	Transesophageal echocardiography (TEE) with contrast, or without contrast followed by with contrast, for monitoring purposes, including probe placement, real-time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report	<b>+</b>	C8928	Transthoracic echocardiography with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill bicycle exercise and or pharmacologically induced stress, with interpretation and report	
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional.	<b>+</b>	C8930	Transthoracic echocardiography, with contrast, or without contrast followed by with contrast, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with physician supervision	
93356	Myocardial strain imaging using speckle tracking-derived assessment of myocardial mechanics (List separately in addition to codes for echocardiography imaging)  Add on code. Use in conjunction with 93303, 93304, 93306, 90337, 93308, 93350, 93351. Report once per session.		NA		
NA			0439T	Myocardial perfusion contrast echocardiography, at rest or with stress, for assessment of myocardial ischemia or viability. (List separately in addition to code for primary procedure) Sunset January, 2023. (Use 0439T in conjunction with 93306, 90337, 93308 93350, 93351)	



### 5. Indications, Contraindications and Important Safety Information

### **INDICATIONS**

DEFINITY® is indicated, after activation, for use in adult and pediatric patients with suboptimal echocardiograms to opacify the left ventricular chamber and to improve the delineation of the left ventricular endocardial border.

### **CONTRAINDICATIONS**

DEFINITY® is contraindicated in patients with known or suspected hypersensitivity to perflutren lipid microsphere or its components, such as polyethylene glycol (PEG) [see Warnings and Precautions (5.2) and Description (11)].

# **IMPORTANT SAFETY INFORMATION**

### WARNING: SERIOUS CARDIOPULMONARY REACTIONS

Serious cardiopulmonary reactions, including fatalities, have occurred uncommonly during or following perflutren-containing microsphere administration. Most serious reactions occur within 30 minutes of administration.

- Assess all patients for the presence of any condition that precludes DEFINITY® administration [see Contraindications (4)].
- Always have resuscitation equipment and trained personnel readily available [see Warnings and Precautions (5.1)].

In postmarketing use, rare but serious cardiopulmonary or hypersensitivity reactions have been reported during or shortly following perflutren and PEG-containing microsphere administration [see Adverse Reactions (6)]. The risk for these reactions may be increased among patients with unstable cardiopulmonary conditions and/or with pre-existing PEG hypersensitivity [see Adverse Reactions (6.2)]. It is not always possible to reliably establish a causal relationship to drug exposure due to the presence of underlying conditions.

Patients with sickle cell disease may be at higher risk of painful crisis and DEFINITY® should be administered with caution.

Please read the accompanying full <u>Prescribing Information</u>, including Boxed **WARNING** regarding serious cardiopulmonary reactions, also available at <u>DEFINITYImaging.com</u>.



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