

## Category III CPT Code and Reporting for the WATCHMAN™ Left Atrial Appendage (LAA) Closure Procedure

The purpose of this document is to provide guidance on the Category III CPT Code reporting for the WATCHMAN LAA Closure procedure to provide assistance to physicians and their coding teams on the coding, coverage, and payment implications of this particular code category. The WATCHMAN LAA Closure procedure is currently reported using the Category III CPT code 0281T which has been effective since January 1, 2012. Upon FDA approval, physicians will continue to use this code to report WATCHMAN LAAC Device procedure.

### 1. What is a Category III CPT code?

Category III CPT Codes are temporary codes for emerging technology, services and procedures that allow for specific data collection associated with those services and procedures. There are no assigned RVU's or established payment for the Category II CPT codes. When these procedures become more commonly adopted and established, the societies will work with the American Medical Association (AMA) to move these codes from Category III to Category I CPT status.

Physicians will report the WATCHMAN LAA Closure procedure with Category III CPT Code: 0281T. The code descriptor for 0281T is:

Percutaneous transcatheter closure of the left atrial appendage with implant. Includes fluoroscopy, transseptal puncture, catheter placements, left atrial angiography, left atrial appendage angiography, radiologic supervision and interpretation.

### 2. How do Category III CPT Codes differ from Category I CPT Codes?

Category I codes have assigned relative value units (RVUs) or work values and have an associated payment amount. A Category III CPT code does not have assigned RVUs and therefore, there is no payment rate established and reimbursement is at the payer's discretion. In addition, a Category III code does not require FDA approval whereas; procedures described by a Category I CPT code must have FDA approval.

### 3. In the interim, how do physicians work with payers in establishing an appropriate payment rate for the WATCHMAN LAA Closure procedure when they are reported with Category III CPT Codes?

For physician services reported with a Category III CPT Code, providers will reference or crosswalk a procedure code with similar or equivalent resources (i.e., RVUs) as the WATCHMAN LAA Closure implant (i.e., suggested CPT codes include but are not limited to: 93580: transcatheter closure of atrial septal defect with implant or 93581: transcatheter closure of ventricular septal defect with implant). It will be important for the provider to document the services provided in regards to resources and time for appropriate consideration of the payment for the professional component of the procedure.

Recommended items to support your claims submissions include the following:

- o Copy of operative report
- o Letter of medical necessity
- o Copy of the FDA approval letter (Boston Scientific can supply electronic copy)

- o Copy of relevant published clinical literature supporting the use of the WATCHMAN LAA Closure System

If physicians are employed by the hospital and their compensation is based on productivity from an RVU tracking methodology, it is important to work closely with the hospital administrators in benchmarking WATCHMAN LAA closure procedures to a procedure with established RVU's utilizing similar resources, time, competency and risk. These discussions should happen in advance of a WATCHMAN implant being performed.

**4. What is the likelihood of payment if Category III Codes are typically non-covered by local Medicare contractors and insurance?**

Category III codes may be reimbursed by payers. It is important to note that the physician must document medical necessity for the procedure, that the patient meets the indications for a left atrial closure implant procedure as provided by the payers guidelines (in the absence of specific payer guidelines, please reference the professional society guidelines for treatment of stroke and/or atrial fibrillation), and the physician provide documentation that compares the WATCHMAN procedure to comparable atrial or ventricular closure procedure with implant. We encourage providers to seek prior authorization for private payers. Please note that traditional Medicare does perform prior authorizations.

Please note that if payers agree to cover a procedure, they will determine a mechanism for payment even if the procedure is reported under a Category III code. Payers and local contractors may cover procedures when they believe they are medically necessary and offer a safe and long-term alternative even in the face of investigational coverage policies.

**5. If I have additional questions, who should I contact?**

Please contact 1.800.CARDIAC (227-3422) and ask to speak to "WATCHMAN Reimbursement."

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