

# **FUTURE Local Coverage Article: Billing and Coding: Platelet Rich Plasma (A58307)**

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## **Contractor Information**

<b>CONTRACTOR NAME</b>	<b>CONTRACT TYPE</b>	<b>CONTRACT NUMBER</b>	<b>JURISDICTION</b>	<b>STATE(S)</b>
Noridian Healthcare Solutions, LLC	A and B MAC	01111 - MAC A	J - E	California - Entire State
Noridian Healthcare Solutions, LLC	A and B MAC	01112 - MAC B	J - E	California - Northern
Noridian Healthcare Solutions, LLC	A and B MAC	01182 - MAC B	J - E	California - Southern
Noridian Healthcare Solutions, LLC	A and B MAC	01211 - MAC A	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01212 - MAC B	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01311 - MAC A	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01312 - MAC B	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01911 - MAC A	J - E	American Samoa California - Entire State Guam Hawaii Nevada Northern Mariana Islands

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# Article Information

## General Information

**Article ID**

A58307

**Article Title**

Billing and Coding: Platelet Rich Plasma

**Article Type**

Billing and Coding

**AMA CPT / ADA CDT / AHA NUBC Copyright Statement**

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**Original Effective Date**

09/28/2020

**Revision Effective Date**

N/A

**Revision Ending Date**

N/A

**Retirement Date**

N/A

or Laryssa Marshall at (312) 893-6814. You may also contact us at ub04@healthforum.com.

## **CMS National Coverage Policy**

CMS Internet Only Manual, Medicare Claims Processing Manual, 100-04, Chapter 32 - Billing Requirements for Special Services, 11.3.

CMS Internet Only Manual, Medicare Program Integrity Manual, 100-08, Chapter 3, Section 3.6.2.2 – Reasonable and Necessary Criteria.

## **Article Guidance**

### **Article Text:**

Platelet Rich Plasma (PRP) is used to treat a number of conditions with little in the way of data or peer reviewed literature to support it's use. Noridian has observed numerous coding errors in the claims submitted for the coverage of PRP. This article is to assist in better understanding the proper usage of the codes for billing and coding purposes.

It is Noridian's expectation that the HCPCS code P9020 be billed for coverage of one or more units of PRP transfused in the treatment of the conditions/coagulopathies for which it is indicated. This code should Not be used to describe the injection of PRP into a specific site.

The Center for Medicare and Medicaid Services (CMS) NCD 270.3 outlines the coverage of PRP for the treatment of chronic non-healing diabetic, venous/ and or pressure wounds. PRP is covered for these wounds when used in a CMS approved trial under Coverage with Evidence Development (CED). When PRP is used in this setting HCPCS code G0460 should be used and billed with CMS approved ICD-10 diagnosis codes maintained by the Medicare contractor.

For all other uses of PRP, the CPT code 0232T should be billed. It describes the injection of PRP into a targeted site. The code's definition includes the harvesting, preparation, and image guidance for the service. When submitting this code, include documentation of the circumstance for which PRP is believed to be indicated for the diagnosis.

It should be noted that according to the **Medicare Program Integrity Manual, Chapter 3, Section 3.6.2.2**, *"In the absence of any National Coverage Determination, Medicare contractors are responsible for determining whether services are reasonable and necessary. If no local coverage determination (LCD) exists for a particular item or service, the MACs, CERT, Recovery Auditors, and ZPICs shall consider an item or service to be reasonable and necessary if the item or service meets the following criteria:*

- *It is safe and effective;*
- *It is not experimental or investigational; and*
- *It is appropriate, including the duration and frequency in terms of whether the service or item is:*

*o Furnished in accordance with accepted standards of medical practice for the diagnosis or treatment of the beneficiary's condition or to improve the function of a malformed body member;*

*o Furnished in a setting appropriate to the beneficiary's medical needs and condition;*

o Ordered and furnished by qualified personnel; and,

o One that meets, but does not exceed, the beneficiary's medical need.”

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## Coding Information

### CPT/HCPCS Codes

#### Group 1 Paragraph:

N/A

#### Group 1 Codes:

CODE	DESCRIPTION
G0460	AUTOLOGOUS PLATELET RICH PLASMA FOR CHRONIC WOUNDS/ULCERS, INCLUDING PHLEBOTOMY, CENTRIFUGATION, AND ALL OTHER PREPARATORY PROCEDURES, ADMINISTRATION AND DRESSINGS, PER TREATMENT
P9020	PLATELET RICH PLASMA, EACH UNIT
0232T	INJECTION(S), PLATELET RICH PLASMA, ANY SITE, INCLUDING IMAGE GUIDANCE, HARVESTING AND PREPARATION WHEN PERFORMED

### CPT/HCPCS Modifiers

N/A

### ICD-10 Codes that Support Medical Necessity

N/A

### ICD-10 Codes that DO NOT Support Medical Necessity

N/A

### Additional ICD-10 Information

N/A

### Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service.

Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

N/A

**Revenue Codes:**

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

N/A

**Other Coding Information**

N/A

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## Revision History Information

N/A

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## Associated Documents

**Related Local Coverage Document(s)**

N/A

**Related National Coverage Document(s)**

N/A

**Statutory Requirements URL(s)**

N/A

**Rules and Regulations URL(s)**

N/A

**CMS Manual Explanations URL(s)**

Medicare Program Integrity Manual, Chapter 3

**Description:** 3.6.2.2

**Other URL(s)**

N/A

## Public Version(s)

Updated on 07/31/2020 with effective dates 09/28/2020 - N/A

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# Keywords

- P9020
- G0460
- 0232T
- Platelet
- Rich
- Plasma