

# MIMOSA PRO 2023 REIMBURSEMENT



Medicare National Average: \$35/image/site

CPT Code	Descriptor	OPPS SI <sup>2</sup>	OPPS APC <sup>2</sup>	OPPS Medicare Payment <sup>2</sup>	Provider Payment
0640T	Non-contact near-infrared spectroscopy studies of flap or wound (eg. for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO <sub>2</sub> ]; <b>image acquisition, interpretation and report</b> , each flap or wound.	M	N/A	Evaluated case-by-case	Evaluated case-by-case
0641T	Non-contact near-infrared spectroscopy studies of flap or wound (eg. for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO <sub>2</sub> ]; <b>image acquisition only</b> , each flap or wound.	T	5732	Payment Rate: \$34.57	Evaluated case-by-case
0642T	Non-contact near-infrared spectroscopy studies of flap or wound (eg. for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO <sub>2</sub> ]; <b>interpretation and report only</b> , each flap or wound.	M	N/A	Evaluated case-by-case	Evaluated case-by-case

## Inpatient Hospital

ICD 10PCS	Descriptor	DRG	Payment
8E02XDZ	Near Infrared Spectroscopy of Circulatory System, External Approach	Not Assigned	N/A

**Abbreviations:** APC (Ambulatory Payment Classification); CPT (Current Procedural Terminology), OPPS (Outpatient Prospective Payment System), SI (Status Indicator)

**Note on SI:** M = Not paid under OPPS; T = Significant Procedure, Multiple Reduction Applies, Paid under OPPS; separate APC payment.

## WHO SHOULD **SUBMIT CODING**?

CPT 0640T	CPT 0641T	CPT 0642T
<b>Non-facility setting:</b> provider performed image acquisition & interpretation/report	<b>Non-facility setting:</b> provider performed image acquisition	<b>Non-facility setting:</b> provider performed image interpretation/report.
<b>Facility setting:</b> provider & facility	<b>Facility setting:</b> provider & facility	<b>Facility setting:</b> provider & facility

## COVERAGE AND DOCUMENTATION



### PRACTITIONER PAYMENT:

Determined by third party payers on case-by-case basis. Prior authorization of payment is suggested when available as an option.



### FACILITY PAYMENT:

CPT 0641T is assigned to the OPPS Fee Schedule under APC 5732 & should be paid as such. Prior authorization of payment is suggested when available as an option.

## MEDICAL NECESSITY OF IMAGING & APPLICABLE UNDERLYING DIAGNOSIS EXAMPLES:

### ASSESSMENTS OF:

- ✓ Circulation, oxygenation, and or perfusion to wound or flap or graft site at initial & subsequent visits to document trends of tissue health to assess care plan.
- ✓ Medical necessity, location, and extent of debridement
- ✓ Medical necessity and effectiveness of hyperbaric oxygen
- ✓ Need for vascular referral / intervention
- ✓ Wound bed prep for advanced therapies such as cellular tissue products / skin substitutes
- ✓ Microcirculation following vascular reconstruction



### INTERPRETATION TIPS:

**ONE CPT CODE/SITE\*:** a site is defined as either a wound or a flap\*.

**DESCRIBE IN DETAIL:** the anatomical location of the wound or flap imaged and number of images taken.

**SUBSEQUENT IMAGES:** describe changes noted from previous images.

**PERI-WOUND TISSUE:** include description of peri-wound tissue

**OTHER INFORMATION:** include other applicable information (i.e., edema, rubor, inflammation)

**NOTE:** when describing site characteristics, other sections of the medical record may be referenced: "Image of left posterior lower extremity ulcer were obtained. A full description of this site may be found in the wound assessment portion of the patient record under "wound #1".

### DOCUMENTATION TIPS:

**ADDRESS AREAS OF CONCERN:** "lower left quadrant of wound shows diminished microcirculation as evidenced by..."

**ADDRESS AREAS OF CHANGE:** "significant improvement in microcirculation & oxygenation post 5 HBO treatments as evidenced by..."

### PLAN:

Explain in detail how the results of the study will impact the plan of care (examples below):

**EXAMPLE 1:** "We will send patient for vascular consult. Patient may need surgical intervention based upon the diminished microcirculation noted in wound #1, which will likely not support wound healing..."

**EXAMPLE 2:** "We will begin a trial of HBO therapy (for diagnosis), noting how the results of the imaging have shown diminished oxygenation/microcirculation, but an adequate response to an oxygen challenge examination with the MIMOSA Pro."

**EXAMPLE 3:** "Graft / flap is showing a decrease in oxygenation at 4 hours post-operatively. Will monitor for one hour, and if no improvement or worsening of the microcirculation will start hyperbaric oxygen therapy to attempt graft/flap salvage."

DISCLAIMER: Nothing in this document is intended to reflect or guarantee coverage or payment. The existence of a coverage determination does not guarantee payment for the service it describes. Coverage and payment policies of governmental and private payers vary from time to time and for different areas of the country. Questions regarding coverage and payment by a payer should be directed to that payer. The only person responsible for a provider's coding and documentation is the provider. MIMOSA Diagnostics Inc., its employees, stakeholders, and consultants do not claim responsibility for any consequences or liability attributable to the use of any information, guidance, or advice contained in this document.