



Economics

Home INR Monitoring can have a positive economic impact when combined with in-office testing while also keeping patients in-range more often.

Enhance economics in your practice with Home INR Monitoring

Reimbursable for physicians.¹

Medicare and many private insurers reimburse physicians for a separate CPT Code (G0250) for the review and interpretation of test results performed by patients at home. Depending upon the training method selected, there is also reimbursement available for initial training on the device.

Intended to complement, not replace routine clinician care.

There are no costs associated when prescribing Home INR Monitoring to your patients. The program is designed to augment, not replace regularly scheduled office visits. This means the fees associated with your patient's regular office visits will not necessarily be impacted.

Keeps patients in range more often.²

Patients who test frequently at home between office visits are clinically proven to experience more time in therapeutic range. This leads to greater office productivity because patients who are in range require less time to manage. As a result, clinics often are able to reallocate resources to patients with higher risk, and even bring in new patients.

Medicare Reimbursement Codes¹

Code	Description	National Rate*
G0250	Physician review of four test results <ul style="list-style-type: none">■ Review, interpret and patient management■ Testing no more than once per week	\$9.74
G0248	One-time training on device operation <ul style="list-style-type: none">■ In person training■ Proof of successful, unassisted self-testing result■ Proper care and reporting of test results	\$138.93

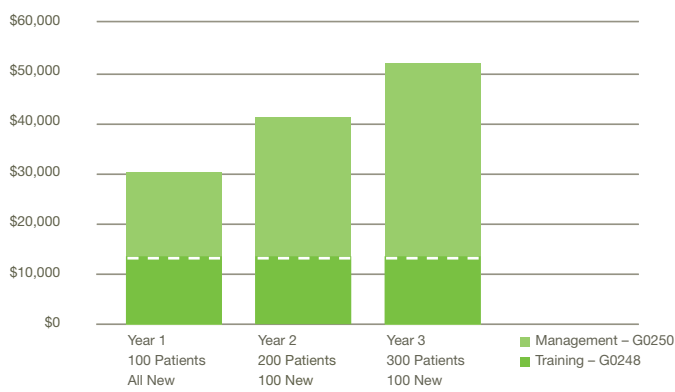
*2010 rates based on CMS national rates. Reimbursement rates will vary by locality code.

Economic impact of a Home INR Monitoring program

Many factors can affect the economic impact that Home INR Monitoring may have on your practice:

- Schedule of regular in-office visits to augment home monitoring.
- Prescribed frequency of testing at home.
- Re-confirmation testing protocols for out-of-range results in-office.
- Length of time to manage patients during intervention.
- Management protocols for result reporting of home monitoring.

Example: Clinic "A"



Helpful reminders for Home INR Monitoring Medicare billing

- Only bill code G0250 after four (4) tests have been reviewed and interpreted.
- Make sure that only the ordering provider bills for the review.
- Include the ordering providers NPI# on the claim.

Diagnosis Codes Approved for Medicare Coverage¹

Diagnosis Codes Approved for Medicare Coverage	Code
Mechanical Heart Valve	V43.3
Atrial Fibrillation	427.31
DVT (Deep Vein Thrombosis)	453.40
Phlebitis & Thrombophlebitis	451.89
Pulmonary Embolism Iatrogenic	415.11
Pulmonary Embolism Infarction	415.19
Hypercoagulable Disorder/Protein S&C Deficiency	289.81
Budd-Chiari Syndrome (Hepatic Vein Thrombosis)	453.0

1. CMS Manual Change Pub 100-04 Transmittal 1562 July 25, 2008.

2. The Lancet, 367:404-11 Volume 367, Issue 9508, Page 412, 4 February 2006 doi:10.1016/S0140-6736(06)68140-3.

