

Press Release, November 10, 2008 –

Medicare Coding for Maggots and Maggot Therapy

Today, the BioTherapeutics, Education & Research (BTER) Foundation was notified that the American Medical Association (AMA), in collaboration with the Centers for Medicare and Medicaid Services (CMS) have just issued reimbursement coding guidelines for medicinal maggots and maggot therapy.

Appearing in the September, 2008 edition of **CPT® Assistant** (Vol 18, Issue 9, page 11), the coding advisors wrote:

“. . . [CPT® code] 97602 may be [used to report maggot therapy], as it is a type of nonexcisional debridement. To further clarify, the Centers for Medicare and Medicaid Services Transmittal 5, dated November 19, 2004, included maggot therapy as a type of debridement The supply of maggots should be reported in addition to the wound management code 97602 with CPT® supply code 99070, Supplies and materials (except spectacles), provided by the physician over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies or materials provided).“

Earlier this year, the BTER Foundation formally requested that the AMA and CMS provide better guidance or specific codes to improve medical record documentation of maggot therapy and requests for reimbursement. In April, BTER Foundation Board Members Ronald Sherman of Irvine, California, and Pamela Mitchell from Akron, Ohio, were invited to appear at a public hearing at Medicare's Baltimore headquarters. They brought with them dozens of letters from maggot therapists and patients frustrated by their difficulties getting reimbursed by insurance companies and Medicare subcontractors for their maggot therapy expenses. Medicare officials were quite sympathetic to the requests for better coding and processing of insurance claims for maggot therapy, explaining that product coding and reimbursement needed to be coordinated with procedural coding and reimbursement.

In a letter received today by Dr. Sherman, Director of the BTER Foundation and Laboratory Director for Monarch Labs (producer of **Medical Maggots™** brand of medicinal maggots), CMS officials announced their collaborative work with AMA, and the publication of their coding recommendations in **CPT® Assistant**.

“The BeTER Foundation”

- supporting patient care, education, and research in biotherapy and symbiotic medicine

The letter and published coding advice were enthusiastically received by BTER Foundation members, as they will be by the entire wound care community. Not only do the coding recommendations reaffirm that maggot therapy is accepted by two of the most respected health care authorities in the nation, but these actions also demonstrate the continued commitment of AMA and CMS to patients and therapists who use medical grade maggots in wound care.

Maggot therapy is the use of specially prepared fly larvae for treating chronic wounds. **Medical Maggots™** brand of medicinal maggots were granted marketing clearance by the FDA in 2004 for treating neuropathic (i.e., diabetic) foot ulcers, pressure ulcers (“bed sores”), venous stasis ulcers, and traumatic and post-surgical wounds failing other forms of conventional therapy. There are now over 1,000 therapists using maggot therapy in the U.S.

A treatment supply of medicinal maggots costs less than \$100, but reportedly can save thousands or even tens of thousands of dollars in medical, surgical and hospital costs. “It’s strange, but many insurance companies will pay tens of thousands of dollars for an amputation, probably because it is so common now-a-days, but will hesitate or object to paying \$100 for a course of maggot therapy,” said Dr. Sherman, “even though studies repeatedly demonstrate that medicinal maggots have saved 40-50% of limbs otherwise scheduled for amputation due to non-healing wounds.” It’s no wonder that more and more patients are demanding that their doctors try maggot therapy, even when patients are asked to pay for the treatments themselves.

Dr. Sherman added: “The timing of this recommendation, just before Veteran’s Day, does not go unnoticed. The beneficial effects of maggots in wounds saved thousands of soldiers through the centuries, and it was a World War I surgeon, William Baer, who first developed the techniques of maggot therapy while at John Hopkins University.” Dr. Sherman’s own clinical studies were performed during the 1990’s at the Veterans Affairs Medical Center in Long Beach, California, with funding from the Paralyzed Veterans of America.

The BTER Foundation, established in 2003, is a not-for-profit organization dedicated to supporting patients, educating health care providers and furthering research in biotherapy such as maggot therapy, leech therapy, cancer-detecting and service dogs, and the use of other living animals to diagnose or treat illness. Supported primarily by donations and users of its educational materials, the BTER Foundation has been providing Patient Assistance Grants for over 5 years, helping families without adequate health insurance or personal financial resources to pay for medicinal maggots and other medicinal animals.

Therapists are reminded that insurance reimbursement requires not only correct coding but also appropriate use of resources and thorough documentation.

More information about HCPCS coding can be found at: <http://www.cms.hhs.gov/MedHCPCSGenInfo/>

More information about the CPT coding can be found at:
<http://www.ama-assn.org/ama/pub/category/3113.html>

More information about the BTER Foundation can be found at: <http://www.BTERFoundation.org>

More information about Monarch Labs can be found at: <http://www.monarchlabs.com>

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