

Multiple Procedure Reduction of the Technical Component (TC) of Certain Diagnostic Imaging Procedures

Provider Types Affected

Physicians and suppliers billing for diagnostic imaging supplies and services

Background

- The technical component (TC) represents practice expense (PE) and includes clinical staff, supplies, and equipment (TC-only services are billed with the TC modifier);
- The global service represents both PC and TC.
- Effective July 1, 2008 BCBSTX will implement a multiple procedure payment reduction on the technical component (TC) of certain diagnostic imaging procedures. The reduction applies to TC only services and the TC portion of global services for the procedures listed below. The reduction does not apply to professional component (PC) services. For 2008, BCBSTX is making full payment for the highest priced procedure and payment at 75 percent for each additional procedure, when performed during the same session on the same day. The reduction applies only to contiguous body areas, i.e., within a family of codes, not across families, that are provided in one session. For example, the reduction would not apply to an MRI of the brain (CPT 70552) in code family 5 when performed during the same (single) session, on the same day, as an MRI of the neck and spine (CPT 72142) in code family 6.
- The 11 families of imaging procedures are listed below and are arranged by imaging modality:
 - Ultrasound, CT, and computed tomographic angiography (CTA);
 - MRI and magnetic resonance angiography (MRA); and
 - Contiguous body area (for example, CT and CTA of Chest/Thorax/Abdomen/Pelvis).
- BCBSTX considers a single session to be one encounter where a patient could receive one or more radiological studies. If more than one of the imaging services in a single family is provided to the patient during one encounter, then this would constitute a single session and the lower-priced procedure(s) would be reduced. If a patient has a separate encounter on the same day for a medically necessary reason and receives a second imaging service from the same family, then BCBSTX considers these multiple studies in the same family on the same day to be provided in separate sessions. In the latter case, BCBSTX has established that the physician should use modifier - 59 to indicate multiple sessions, and that the multiple procedure reduction does not apply.

Implementation

The implementation date is July 1, 2008.

The 11 families of imaging procedures covered by this change are contained in the following table:

Revised Lists of Diagnostic Imaging Procedures Subject to Reduction

Diagnostic Imaging Services

Family 1 Ultrasound (Chest/Abdomen/Pelvis - Non-Obstetrical)

76604 Ultrasound exam, chest, b-scan

76700 Ultrasound exam, abdom, complete

76705 Echo exam of abdomen
76770 Ultrasound exam abdo back wall, comp
76775 Ultrasound exam abdo back wall, lim
76831 Echo exam, uterus
76856 Ultrasound exam, pelvic, complete
76857 Ultrasound exam, pelvic, limited

Family 2 CT and CTA (Chest/Thorax/Abd/Pelvis)

71250 CT thorax w/o dye
71260 CT thorax w/ dye
71270 CT thorax w/o & w/ dye
71275 CT angiography, chest
72191 CT angiography, pelv w/o & w/ dye
72192 CT pelvis w/o dye
72193 CT pelvis w/ dye
72194 CT pelvis w/o & w/ dye
74150 CT abdomen w/o dye
74160 CT abdomen w/ dye
74170 CT abdomen w/o & w/ dye
74175 CT angiography, abdom w/o & w/ dye
75635 CT angio abdominal arteries
0067T CT colonography; dx

Family 3 CT and CTA (Head/Brain/Orbit/Maxillofacial/Neck)

70450 CT head/brain w/o dye
70460 CT head/brain w/ dye
70470 CT head/brain w/o & w/ dye
70480 CT orbit/ear/fossa w/o dye
70481 CT orbit/ear/fossa w/ dye
70482 CT orbit/ear/fossa w/o & w/ dye
70486 CT maxillofacial w/o dye
70487 CT maxillofacial w/ dye
70488 CT maxillofacial w/o & w/ dye
70490 CT soft tissue neck w/o dye
70491 CT soft tissue neck w/ dye
70492 CT soft tissue neck w/o & w/ dye
70496 CT angiography, head
70498 CT angiography, neck

Family 4 MRI and MRA (Chest/Abd/Pelvis)

71550 MRI chest w/o dye
71551 MRI chest w/ dye
71552 MRI chest w/o & w/ dye
71555 MRI angio chest w/ or w/o dye
72195 MRI pelvis w/o dye
72196 MRI pelvis w/ dye
72197 MRI pelvis w/o & w/ dye
72198 MRI angio pelvis w/ or w/o dye
74181 MRI abdomen w/o dye
74182 MRI abdomen w/ dye
74183 MRI abdomen w/o and w/ dye
74185 MRI angio, abdom w/ or w/o dye

Family 5 MRI and MRA (Head/Brain/Neck)

70540 MRI orbit/face/neck w/o dye
70542 MRI orbit/face/neck w/ dye

70543 MRI orbit/face/neck w/o & w/dye
70544 MR angiography head w/o dye
70545 MR angiography head w/dye
70546 MR angiography head w/o & w/dye
70547 MR angiography neck w/o dye
70548 MR angiography neck w/dye
70549 MR angiography neck w/o & w/dye
70551 MRI brain w/o dye
70552 MRI brain w/dye
70553 MRI brain w/o & w/dye

Family 6 MRI and MRA (spine)

72141 MRI neck spine w/o dye
72142 MRI neck spine w/dye
72146 MRI chest spine w/o dye
72147 MRI chest spine w/dye
72148 MRI lumbar spine w/o dye
72149 MRI lumbar spine w/dye
72156 MRI neck spine w/o & w/dye
72157 MRI chest spine w/o & w/dye
72158 MRI lumbar spine w/o & w/dye

Family 7 CT (spine)

72125 CT neck spine w/o dye
72126 CT neck spine w/dye
72127 CT neck spine w/o & w/dye
72128 CT chest spine w/o dye
72129 CT chest spine w/dye
72130 CT chest spine w/o & w/dye
72131 CT lumbar spine w/o dye
72132 CT lumbar spine w/dye
72133 CT lumbar spine w/o & w/dye

Family 8 MRI and MRA (lower extremities)

73718 MRI lower extremity w/o dye
73719 MRI lower extremity w/dye
73720 MRI lower ext w/ & w/o dye
73721 MRI joint of lwr extre w/o dye
73722 MRI joint of lwr extr w/dye
73723 MRI joint of lwr extr w/o & w/dye
73725 – MRA Mr angio lower ext w or w/o dye

Family 9 CT and CTA (lower extremities)

73700 CT lower extremity w/o dye
73701 CT lower extremity w/dye
73702 CT lower extremity w/o & w/dye
73706 CT angio lower ext w/o & w/dye

Family 10 Mr and MRI (upper extremities and joints)

73218 MRI upper extr w/o dye
73219 MRI upper extr w/dye
73220 MRI upper extremity w/o & w/dye
73221 MRI joint upper extr w/o dye
73222 MRI joint upper extr w/dye
73223 MRI joint upper extr w/o & w/dye

Family 11 CT and CTA (upper extremities)

73200 CT upper extremity w/o dye

73201 CT upper extremity w/dye

73202 CT upper extremity w/o & w/dye

73206 CT angio upper extr w/o & w/dye

Example

Modifier	Procedure 1 (74183)	Procedure 2 (72196)	Current Total Allowed	Multiple Imaging Allowed
Professional Component	\$108.00	\$83.00	\$191.00	No Reduction
Technical Component	\$522.00	\$395.00	\$917.00	\$522.00 (Proc 1 Global) + \$395.00 x .75 (Proc 2 Tech) = \$818.25
Global Component	\$630.00	\$478.00	\$1,108.00	\$630.00 (Proc 1 Global) + (\$395.00 (Proc 2 Tech) x .75) + \$83.00 (Proc 2 Prof) = \$1009.25

**Note: The allowables listed above are only examples.*