

## 2020 CPT Diagnostic Radiology Additions Deletions Revisions

**74022** Radiologic examination, **abdomen**; complete acute abdomen series, including 2 or more views of the abdomen (e.g., supine, erect, and/or decubitus **views**), and a single view chest

**74210** Radiologic examination; pharynx and/or cervical esophagus, **including scout neck radiograph(s) and delayed image(s), when performed, contrast (barium) study**

**74220** Radiologic examination; esophagus, **including scout chest radiograph(s) and delayed image(s), when performed; single contrast (e.g. barium) study**

**74221** Radiologic examination; esophagus, **including scout chest radiograph(s) and delayed image(s), when performed; double contrast (e.g. high density barium and effervescent agent) study**

**74230** Radiologic examination, swallowing function, with cineradiography/video radiography, **including scout neck radiograph(s) and delayed image(s), when performed, contrast (e.g., barium) study**

[74240](#) Radiologic examination, upper gastrointestinal tract, **including scout abdominal radiograph(s) and delayed image(s), when performed; single-contrast (eg, barium) study**

74241 deleted report as 74240 as of 1/1/2020

74245 deleted report as 74240 and 74248 as of 1/1/2020

[74246](#) Radiologic examination, upper gastrointestinal tract, **including scout abdominal radiograph(s) and delayed image(s), when performed; double-contrast (eg, high-density barium and effervescent agent) study, including glucagon, when administered**

+ New Add on [74248](#) Radiologic small intestine follow-through study, including multiple serial images (List separately in addition to code for primary procedure for upper GI radiologic examination) code in addition to 74240 or 74246  
2020

74247 deleted report as 74246 as of 1/1/2020

74249 deleted report as 74246 and 74248 as of 1/1/2020

**74250** Radiologic examination, small intestine, **including multiple serial images and scout abdominal radiograph(s) and delayed image(s), when performed, single contrast (barium) study**

**74251** Radiologic examination, small intestine, **including multiple serial images and scout abdominal radiograph(s) and delayed image(s), when performed, double contrast (e.g. high density barium and air via enteroclysis tube) study, including glucagon, when administered**

74260 deleted Duodenography, hypotonic report under 74251 as of 1/1/2020

[74270](#) Radiologic examination, colon, including scout abdominal radiograph(s) and delayed image(s), when performed; **single-contrast** (eg, barium) study

[74280](#) Radiologic examination, colon, including scout abdominal radiograph(s) and delayed image(s), when performed; **double-contrast** (eg, high density barium and air) study, including glucagon, when administered

## Myocardial PET

- New codes

Code	Description
78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/ or ejection fraction[s], when performed; multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan
78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability);
78433	with concurrently acquired computed tomography transmission scan
78434	Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure

# Tumor Localization

- New SPECT codes

78830	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed; tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/ detection of pathology, single area (eg, head, neck, chest, pelvis), single day imaging
78831	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed; tomographic (SPECT), minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days
78832	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed; tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/ detection of pathology, minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days
78835	Radiopharmaceutical quantification measurement(s) single area (List separately in addition to code for primary procedure

*\*78835 is used in conjunction with 78830, 78832*

*\*Report multiple units of 78835 if more than 1 area or more than 1 day imaging*

- SPECT codes deleted: 78205-78206, 78320, 78607, 78647 & 78710

**SPECT imaging for deleted codes should be reported under 78803 as of 1/1/2020**

- Inflammatory process codes deleted: 78805-78807

## 2020 CPT Interventional Radiology Additions Deletions Revisions

20560	Needle insertion(s) without injection(s); 1 or 2 muscle(s)	
20561	Needle insertion(s) without injection(s); 3 or more muscles	
33016	Pericardiocentesis, including imaging guidance, when performed	
33017	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; 6 years and older without congenital cardiac anomaly	33010 33011 33015
33018	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; birth through 5 years of age or any age with congenital cardiac anomaly	
33019	Pericardial drainage with insertion of indwelling catheter, percutaneous, including CT guidance	

62328	Spinal puncture, lumbar, diagnostic; with fluoroscopic or CT guidance	
62329	Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter); with fluoroscopic or CT guidance	

93985	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete bilateral study	G0365
93986	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete unilateral study	

**\*Preop vessel mapping requires two diagnoses preop assessment Z01.810 and one of the following CKD Stage 4 N18.4, CKD Stage 5 N18.5 or ESRD N18.6**

### 2020 Merit-Based Incentive Payment System (MIPS)

- 4 performance categories: Quality, Improvement Activity, Promoting Interoperability and Cost
- Quality 45%
- Improvement Activity 15%
- Promoting Interoperability 15% (reweighted for non patient facing clinicians to Quality category)
- Cost 25% (reweighted for non patient facing clinicians to Quality category)

### 2020 HAP QDR Quality Measures

- 021, 023, 076, 130, 145, 146, 147, 195, 225, 360, 364, 405, 406, 420, 436, 465
- Measure 76 hand hygiene is now required as of 1/1/20 to be documented.
- Measure 405 liver lesion incidental finding has been removed
- 70% of all MIPS eligible claims (including commercial insurances) must be submitted for 2020 reporting period
- Claims are eligible based on CPT-4 procedural coding

### 2020 HAP QDR Improvement Activity

- **New for 2020 50% of the group must participate in an Improvement Activity**
- **Must perform 1 High Weighted Activity or 2 Medium Weighted Activities**
- **Must be performed on a 90 continuous calendar day period**
- **IA\_BE\_6 Beneficiary Engagement Patient Satisfaction Survey High Weighted**
- **IA\_CC\_18 Care Coordination Patient Relationship Codes High Weighted**

### PRC Code Modifiers

- **X1 – Continuous/Broad services:** For clinicians who provide the principal care for a patient with no planned endpoint of the relationship.
- **X2 – Continuous/Focused services:** For clinicians whose expertise is needed for the ongoing management of a chronic disease or condition.
- **X3 – Episodic/Broad services:** For clinicians who have broad responsibility for the comprehensive needs of patients that is limited to a defined period and circumstance, such as a hospitalization.
- **X4 – Episodic/Focused services:** For specialty focused clinicians who provide time-limited care. The patient has a problem that will be treated with a time-limited intervention, such as surgery or radiation.
- **X5 – Only as Ordered by Another Clinician:** For clinicians who provide care to patients only as ordered by other clinicians.

- **IA\_PSPA\_29 Consulting AUC Using Clinical Decision Support when ordering Advanced imaging services (CT, MRI, Nuc Med and PET) High Weighted**
- **IA\_BE\_12 Beneficiary Engagement RSCAN project Medium Weighted-acceptable to perform x 2**

WWW.HAPUSA.COM

2020 MIPS Quality Measure Recommendations Kent Radiology

### **#146 Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening**

A BIRAD 3 on a screening mammo will result in a quality code that **does not meet performance**.

A category 3, 4, or 5 assessment is not recommended for a screening mammogram, even though in some instances a highly suspicious abnormality may be identified that will warrant a recommendation for biopsy. Rather, all patients with screening abnormalities should be given a BI-RADS® category 0 assessment and recalled for further diagnostic studies. (ACR, 2013)

### **#225: Radiology: Reminder to System for Screening Mammograms**

Example of Documentation: “Patient’s information was entered into a reminder system with a target date for the next mammogram”

### **#364 Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines**

Percentage of final reports for CT imaging studies with a finding of an incidental pulmonary nodule for patients aged 35 years and older that contain an impression or conclusion that includes a recommended interval and modality for follow-up (e.g., type of imaging or biopsy) or for no follow-up, and source of recommendations (e.g., guidelines such as Fleischner Society, American Lung Association, American College of Chest Physicians)

Case exemptions:

- Active Lung Carcinoma
- History of Lung Carcinoma (excluding Basal Cell and Squamous Cell Carcinoma Skin)
- Heavy Tobacco Users

Examples of Documentation:

- Solitary subpleural 6 mm right midlung RLL nodule. Recommend follow-up CT in 6-12 months per Fleischner Society guidelines.

### **#406: Appropriate follow-up for incidental thyroid nodules**

Applies to all CT, CTA, MR & MRA chest or neck with a thyroid nodule < 1.0 cm noted

- Studies with incidental findings with follow up recommended must document a reason for the follow up i.e. patient has known malignancy
- Studies with incidental findings where follow up is not recommended **do not need a supporting statement**. They will be coded as no follow-up required based on lack of a recommendation

**#145 Radiology: Exposure for All Procedures Using Fluoroscopy**

One of the following must be documented for all services involving fluoro

1. Exposure time **and** number of fluoro images (if only video state the number of images as “1” per CMS clarification)

If no fluoroscopy time or images were taken for a study that usually uses fluoro, document as: “Fluoro time and images both zero”

**OR**

2. **Radiation exposure indices** -Fluoro exposure dose indices in mGy – you must document the type of dose along with the mGy
  - Peak skin dose (PSD)
  - Reference air kerma (Ka,r) (RAK)
  - Dose area product (DAP)
    - Documentation Example: PSD – 10mGy

**#436: Utilization of CT dose lowering technique**

Documentation is all final CT reports that one or more dose reduction techniques were used (e.g. Automated exposure control)

Examples of Documentation:

- “Adaptive Iterative Dose Reduction software was used to reduce radiation dose to the patient”

Measure Title	Measure ID	Measure has a Benchmark	Topped Out	Seven Point Cap
Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy	145	Y	Y	Y
Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Screening Mammograms	146	Y	N	N
Radiology: Reminder System for Screening Mammograms	225	Y	N	N
Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary	364	Y	N	N
Appropriate Follow-up Imaging for Incidental Thyroid Nodules in Patients	406	Y	N	N
Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques	436	Y	Y	Y

Base Score Prediction 54 points

