

## **Fluoroscopy Guidance**

- Q1: For billing scenario 4, can a hospital charge the technical charge for 76000?
- A1: The billing guidance for the scenarios supplied in slides 23 through 28 apply to Medicare Part B settings. Part B guidelines may or may not apply to Medicare Part A (inpatient) settings. We suggest that you contact a Part A coding expert or your Part A MAC to obtain an answer to your question.
- Q2: In Scenario #3 would the billable code(s) be either 76000-52 or 76001-52 depending on time?
- A2: No, these are not the codes to bill Scenario #3. CPT codes 76000 or 76001 would only be appropriate to report in Scenario #1.

For Scenario #3, the radiological supervision and interpretation (RS&I) codes would be billed. CPT codes 74340 and 75989 are examples of RS&I codes. These codes are scattered throughout the Radiology section of the CPT manual (7xxxx).

The CPT manual guides a coder in proper billing of the RS&I codes. Appropriate surgical procedures supply instruction through the Radiology Crosswalk. Note that CPT code 44500 [Introduction of long gastrointestinal tube] has a crosswalk note to bill code 74340.

- Q3: Who are PQRS measures reported to and how?
- A3: The PQRS measures are reported to CMS. There are multiple ways to report: claims based reporting, registry based reporting, EHR based reporting, and Group Practice Reporting. To learn more about PQRS program, go to the <u>CMS website</u>.
- Q4: Does the time in the Fluoroscopy codes 76000 and 76001 refer to the time that the radiologist was in the procedure room monitoring or the actual time the fluoroscopy was being used? One hour or more is a huge amount of time for radiation exposure.
- A4: The CPT code definition for codes 76000 and 76001 makes reference to the "professional time" so this describes the professional work component entailed in providing fluoroscopic monitoring.

  Billing time on these codes is <u>not</u> based on the actual fluoroscopic exposure time.

In contrast, PQRS Measure 145 is based on reporting actual exposure time.

Reference: 2013 AMA CPT Manual, Professional Edition

This information, while accurate, to the best of our knowledge, at the time of production, may not be current at the time of use. Please consult with the American Medical Association (AMA), the American College of Radiology (ACR), or applicable professional society for additional guidance.