

Part B Insider (Multispecialty) Coding Alert

NCCI Edits: New Ultrasound Guidance Code to Be NCCI-Approved by April 1

Capture an image to seize reimbursement for 76937

If you've been having trouble billing for ultrasound guidance when placing a central venous access device, your troubles could be at an end.

A National Correct Coding Initiative edit bundled new code +76937 (Ultrasound guidance for vascular access requiring ultrasound evaluation of potential access sites, documentation of selected vessel patency, concurrent realtime ultrasound visualization of vascular needle entry, with permanent recording and reporting ...) with +75998 (Fluoroscopic guidance for central venous access device placement, replacement, or removal ...). (See Radiology Coding Alert, Vol. 6, No. 2)

At the time, many experts said that Medicare didn't want to see both codes reported separately, especially if a provider did a "quick look" ultrasound followed by a fluoroscopy for placement. But if you perform both procedures in full, they advised using modifier -59 (Distinct procedural service) to override the edit.

But that won't be necessary for much longer. The Society for Interventional Radiology says on its Web site that the Centers for Medicare & Medicaid Services agreed to delete this "burdensome" edit in response to SIR's complaints. SIR isn't sure when the edit will be lifted, but **Melody W. Mulaik**, president of Coding Strategies in Atlanta, predicts it'll be gone by April 1.

That won't end providers' problems [billing 76937](#), however. Mulaik says many providers are having trouble billing for the new code because the descriptor requires them to make a "permanent recording."

"Most groups use handheld ultrasound machines that don't capture an image," Mulaik says. But if you want to bill for the ultrasound, you have to create an image. This means either hooking up your handheld to a storage device or using another kind of ultrasound.

Also, when providers operate in a filmless picture archiving and communications systems environment, they store what images they do create according to modality. So a diagnostic ultrasound film wouldn't necessarily be stored in the same place as an interventional film, Mulaik says. "So the challenge is, how do you catalog that all together?" she asks.