

## Part B Insider (Multispecialty) Coding Alert

## **RADIOLOGY: Start Noting Who Performed 3D Reconstruction**

## You still need treating physician's order for CT reconstructions

Those of you who have been billing 76375 for two-dimensional reconstructions of CT scans, MRIs or other imaging scans, will have to change your ways starting in January.

CPT 2006 deletes 76375 and replaces it with two new codes. Important: Both new codes specify that the rendering must be 3D, unlike 76375, which said rendering could be 3D or holographic. They cover reconstruction with (CPT 76377) and without (76376) image post-processing on an independent workstation.

**Upshot:** This change will make it more difficult for you to bill for reconstruction unless your physician is really using a machine that has 3D capabilities, say experts.

"The reconstruction was being billed by so many providers with every CT service and they were starting to bill it with ultrasounds," says **Jackie Miller**, senior consultant with **Coding Strategies** in Dallas, GA. Now, if you take a vanaxial scan and reconstruct it into the saggital, coronal or other plane, you won't be able to bill 76376-76377 because the scan will only be two-dimensional.

**Careful:** If a technician performs the reconstruction on the main machine, you'll use 76376. But if the physician performs the reconstruction on an independent workstation, use 76377, says **Bruce Hammond,** chief operating officer with **Diagnostic Health Services** in Addison, TX. "It's going to force the doctor to change the dictation" to clarify who did the reconstruction and where.

**Missed opportunity:** It would have made more sense for the **American Medical Association** to incorporate 3D reconstruction into the existing CT imaging codes, argues **Cheryl Schad,** owner and consultant with **Schad Medical Management** in Mullica Hill, NJ.

Because 3D reconstruction is a separate code, radiologists have to go back and seek an order from the treating physician if they decide to perform a reconstruction after a CT scan. Often, radiologists won't know until after the initial CT scan whether they'll need to do a 3D reconstruction to clarify their diagnosis.

The **HHS Office of Inspector General** has gone after radiologists who lacked documentation of a separate order for 3D reconstruction after a CT scan, notes Schad. The AMA missed a chance to solve this problem by making 3D reconstruction part of CT scans.