

Eli's Rehab Report

Reader Question: Two X-Rays Performed by Different Practitioners

Question: In our facility, the radiologist usually performs all x-rays and interprets them. However, recently the radiologist performed the patient's first x-ray and interpreted it, and then the radiology technician performed the second x-ray and the physiatrist interpreted it. How should this scenario be coded?

New York Subscriber

Answer: The first x-ray should be reported with the appropriate CPT code (e.g., 72040, radiologic examination, spine, cervical; two or three views) using the radiologist's identification number. The second x-ray should be billed using the CPT code (e.g., 72070, radiologic examination, spine; thoracic, two views) with the -TC modifier (technical component) for the radiologist's portion, and modifier -26 (professional component) for the physiatrist's interpretation.

Answers to Reader Questions and You Be the Coder were provided by **Laureen Jandroep, OTR, CPC, CCS-P CPC-H**, owner of A+ Medical Management and Education, a national coding and reimbursement school and consulting firm in Absecon, N.J.; and **Joseph R. Batte, CFE**, former supervisory special agent for the OIG, and an independent compliance consultant in Marco Island, Fla.