

## Claim Resolution Matrix 2011 – BlueCross BlueShield of South Carolina

NIA developed this matrix in an effort to help its clients set up their claim processing systems. On behalf of BlueCross, NIA handles preauthorization for certain imaging services. NIA is an independent company. NIA designed this matrix to assist in the resolution of claims adjudication and claims questions related to the services NIA manages. The matrix contains all the CPT-4 codes NIA manages on behalf of its clients. The codes are set up using what would be seen on a professional CMS 1500 claim and not a UB-04 claim. The inclusion of a code also doesn't imply that BlueCross would approve the service. It only indicates that if we received a request for that service, NIA would manage it.

NIA tracks and manages each procedure using the "CPT/HCPCS Code Managed by NIA." The "Allowable Billed Groupings" is meant to outline that if we authorize a given procedure, the provider can submit any of the listed procedure codes on a claim representing that service. This assumes, of course, that the provider applies appropriate rebundling rules and that the provider performs the service within the date of service validity period. Codes representing contrast agents, radiopharmaceuticals and supplies are not listed on this matrix.

Codes that facilities submit who use CMS Outpatient PPS logic (C codes) and who use UB 04 claim logic are also not incorporated into this table.

If a family of CPT codes is not listed in this matrix, an exact match is required between the authorized CPT code and the billed CPT code. If the exact match does not occur, the provider should adjudicate the charge accordingly.

\*Please note: NIA does not manage services rendered in an emergency room, observation room, surgery center or hospital inpatient setting.

| Authorized CPT Code | Description                          | Allowable Billed Groupings               |
|---------------------|--------------------------------------|--|
| 70336               | MRI Temporomandibular Joint          | 70336                                    |
| 70450               | CT Head/Brain                        | 70450, 70460, 70470                      |
| 70480               | CT Orbit                             | 70480, 70481, 70482                      |
| 70486               | CT Maxillofacial/Sinus               | 70486, 70487, 70488, 76380               |
| 70490               | CT Soft Tissue Neck                  | 70490, 70491, 70492                      |
| 70496               | CT Angiography, Head                 | 70496                                    |
| 70498               | CT Angiography, Neck                 | 70498                                    |
| 70540               | MRI Orbit, Face, and/or Neck         | 70540, 70542, 70543                      |
| 70544               | MRA Head                             | 70544, 70545, 70546                      |
| 70547               | MRA Neck                             | 70547, 70548, 70549                      |
| 70551               | MRI Internal Auditory Canal          | 70551, 70552, 70553, 70540, 70542, 70543 |
| 70551               | MRI Brain                            | 70551, 70552, 70553                      |
| 70554               | Functional MRI Brain                 | 70554, 70555                             |
| 71250               | CT Chest                             | 71250, 71260, 71270                      |
| 71275               | CT Angiography, Chest (non coronary) | 71275                                    |
| 71550               | MRI Chest                            | 71550, 71551, 71552                      |
| 71555               | MRA Chest (excluding myocardium)     | 71555                                    |
| 72125               | CT Cervical Spine                    | 72125, 72126, 72127                      |
| 72128               | CT Thoracic Spine                    | 72128, 72129, 72130                      |
| 72131               | CT Lumbar Spine                      | 72131, 72132, 72133                      |
| 72141               | MRI Cervical Spine                   | 72141, 72142, 72156                      |
| 72146               | MRI Thoracic Spine                   | 72146, 72147, 72157                      |
| 72148               | MRI Lumbar Spine                     | 72148, 72149, 72158                      |

| Authorized CPT Code  | Description   | Allowable Billed Groupings   |
|----------------------|---|--|
| 72159                | MRA Spinal Canal  | 72159  |
| 72191                | CT Angiography, Pelvis  | 72191  |
| 72192                | CT Pelvis   | 72192, 72193, 72194  |
| 72196                | MRI Pelvis  | 72195, 72196, 72197  |
| 72198                | MRA Pelvis  | 72198  |
| 73200                | CT Upper Extremity  | 73200, 73201, 73202  |
| 73206                | CT Angiography, Upper Extremity   | 73206  |
| 73220                | MRI Upper Extremity, other than Joint   | 73218, 73219, 73220  |
| 73221                | MRI Upper Extremity Joint   | 73221, 73222, 73223  |
| 73225                | MRA Upper Extremity   | 73225  |
| 73700                | CT Lower Extremity  | 73700, 73701, 73702  |
| 73706                | CT Angiography, Lower Extremity   | 73706  |
| 73720                | MRI Lower Extremity, other than Joint   | 73718, 73719, 73720, 73721, 73722, 73723   |
| 73721                | MRI Lower Extremity Joint   | 73721, 73722, 73723, 73718, 73719, 73720   |
| 73721                | MRI Hip   | 72195, 72196, 72197, 73721, 73722, 73723   |
| 73725                | MRA Lower Extremity   | 73725  |
| 74150                | CT Abdomen  | 74150, 74160, 74170  |
| 74175                | CT Angiography, Abdomen   | 74175  |
| 74176                | CT Abdomen and Pelvis Combination   | 74176, 74177, 74178  |
| 74181                | MRI Abdomen   | 74181, 74182, 74183, S8037   |
| 74185                | MRA Abdomen   | 74185  |
| 74261 <sup>3</sup>   | Diagnostic CT Colonoscopy (Virtual Colonoscopy, CT Colonography)                              | 74261, 74262   |
| 74263 <sup>3</sup>   | Screening CT Colonoscopy (Virtual Colonoscopy, CT Colonography)                               | 74263  |
| 75557                | MRI Heart   | 75557, 75559, 75561, 75563, +75565   |
| 75571 <sup>4</sup>   | Coronary Artery Ca Score, Heart Scan, Ultrafast CT Heart, Electron Beam CT                    | 75571, S8092   |
| 75572                | CT Heart  | 75572  |
| 75573                | CT Heart Congenital Studies, Non-coronary Arteries  | 75573  |
| 75574                | CTA Coronary Arteries (CCTA)  | 75574  |
| 75635                | CT Angiography, Abdominal Arteries  | 75635  |
| 76380                | Follow Up, Limited or Localized CT  | 76380, 70486, 70487, 70488   |
| 76390                | MR Spectroscopy   | 76390  |
| 77058                | MRI Breast  | 77058, 77059   |
| 77084                | MRI Bone Marrow   | 77084  |
| 78459                | PET Scan, Heart   | 78459, 78491, 78492<br>Also allow billing for the corresponding Cardiovascular Stress Test 9-range (93015 – 93018) |
| 78608                | PET Scan, Brain   | 78608, 78609   |
| 78813 <sup>1,2</sup> | PET Scan  | 78811, 78812, 78813, 78814, 78815, 78816   |
| 78816 <sup>1,2</sup> | PET Scan with concurrently acquired CT for attenuation correction and anatomic, localization. | 78811, 78812, 78813, 78814, 78815, 78816   |
| G0219                | PET Imaging Whole Body, melanoma for non-covered indications                                  | G0219  |
| G0235                | PET Imaging, any site, not otherwise specified  | G0235  |
| G0252 <sup>5</sup>   | PET Imaging, initial diagnosis of breast cancer and/or surgical planning for breast           | G0252  |

| Authorized CPT Code | Description                    | Allowable Billed Groupings |
|---------------------|--------------------------------|----------------------------|
|                     | cancer                         |                            |
| S8037               | MR Cholangiopancreatography    | S8037, 74181, 74182, 74183 |
| 0042T               | Cerebral Perfusion Analysis CT | 0042T                      |

- 1 NIA will not be making a medical necessity determination as to which of these codes are appropriate. Instead, we will make a determination as to whether the PET scan itself is indicated and then expect the imaging facility to bill in a fashion that accurately describes the service it performed.
- 2 The 78814 series describes a PET scan in which CT technology is used to better “focus” the PET scanning. When an ordering physician requests a PET scan, he or she won’t know whether or not an older machine will be used without the CT component. NIA’s tumor imaging clinical guidelines does not make a distinction between which technique is used. If a PET scan is clinically indicated, use of either series of codes is acceptable. Accordingly, we are expanding the list of “Allowable Billable Groupings” to take this into account. Do **not** use these codes for a study typically called PET fusion. A PET fusion study is where a PET Scan and a diagnostic CT scan are performed on the same machine simultaneously. In this situation, CPT will instruct you to bill using both the PET CPT code and the CT scan code describing the body region and procedure performed. The CT code should be appended with a modifier 59 to ensure proper payment. When receiving such requests, NIA will review the medical necessity for both the PET scan and the CT scan and issue UM determinations on both codes.
- 3 CT Colonography, also known as Virtual Colonoscopy – NIA’s guidelines currently cover diagnostic CT Colonography (74261 and 74262) under predefined situations. We currently classify the screening CT Colonography (74263) as not medically necessary. Unless you notify us differently, we will apply our guidelines.
- 4 This code describes coronary artery calcium score, AKA, Heartscan, Ultrafast CT of the heart or EBCT of the heart. NIA will follow its default logic of not covering these unless a local plan’s specific guidelines or local plan policy provides some type of coverage. The previous S code descriptor could possibly be submitted by billing entities. Accordingly, NIA has left the S code descriptor in the Allowable Billed Groupings.
- 5 G0252 is a code that describes a tumor imaging PET for breast cancer under a specific indication. This is considered a non-covered indication.