varian

2019 Billing and Coding Reference

Image Guidance and Motion Management

Image guidance may be used to confirm that the intended target is within designated treatment constraints before treatment delivery. A variety of modalities may be used for image guidance: CT, ultrasound, stereoscopic and intrafraction tracking, which ensures that the target remains within parameters during the actual beam-on time. If the intrafraction tracking technology determines that the target is no longer within parameters the beam can be interrupted until a correction is made and the target is back within the designated limits.

CODING FOR HOSPITAL OUTPATIENT DEPARTMENTS

Reimbursement for image guidance is included in the treatment delivery codes for intensity-modulated radiation therapy (IMRT), stereotactic radiosurgery (SRS), and stereotactic body radiation therapy (SBRT) and should not be separately reported in addition to the treatment delivery codes for these modalities. If image guidance is performed for patients not receiving treatment via one of these modalities Current Procedural Terminology (CPT®) code 77387 is reportable but is packaged and will not be reimbursed by Medicare. However, some commercial payers may reimburse for image guidance when 77387 is included in payer contracts.

Physicians providing professional services in a hospital outpatient department should refer to the relative value units (RVUs) and professional payment rates in the Physician and Freestanding Cancer Center section. For professional only reimbursement, a -26 modifier should be appended to the code.

2019 national average Hospital Outpatient Prospective Payment System (HOPPS) reimbursement

CPT	Descriptor	APC[1]	Payment
77387	Guidance for localization of target volume for delivery of radiation treatment delivery, includes intrafraction tracking, when performed	XXX	Packaged

For more information on how hospital outpatient department facility payment rates are calculated, visit the CMS website at www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/HospitalOutpaysfctsh.pdf to review the Hospital Outpatient Prospective Payment System Fact Sheet. Providers must negotiate with commercial payer plans to establish contracted payment rates.

CODING FOR PHYSICIANS AND FREESTANDING CANCER CENTERS

Under the Medicare Physician Fee Schedule (MPFS), Centers for Medicare and Medicaid Services (CMS) continues to delay the implementation of CPT code 77387. Providers submitting services under the MPFS will continue to use the G codes created by CMS to report image guidance services to Medicare. Some commercial payers do not accept G codes, and providers should check with those payers to determine what code to submit for reimbursement.

While the hospital outpatient department cannot separately report image guidance in conjunction with IMRT treatment delivery, physicians and freestanding cancer centers should submit for reimbursement.

See the table below to determine which G code to report in place of the deleted image-guidance codes. CPT code 77014 was not deleted and will continue to be reported for cone-beam CT (CBCT).

CPT	Descriptor	Professional Component		Technical Component		Global Component	
		RVU[2]	Payment[3]	RVU[2]	Payment[3]	RVU[2]	Payment[3]
G6001	Ultrasonic guidance for placement of radiation therapy fields	.89	$32	1.44	$52	2.33	$84
G6002	Stereoscopic X-ray guidance for localization of target volume for the delivery of radiation therapy	.59	$21	1.56	$56	2.15	$77
G6017	Intrafraction localization and tracking of target or patient motion during delivery of radiation therapy (e.g., 3D positional tracking, gating, 3D surface tracking), each fraction of treatment	Carrier Priced					
77014	Computed tomography guidance for placement of radiation therapy fields	1.27	$46	2.14	$77	3.41	$123

CODING FOR MOTION MANAGEMENT

In certain clinical cases, it may be necessary to monitor respiratory motion during treatment delivery. CPT code 77293 is used to account for the additional work necessary when simulating a patient using respiratory motion tracking. While the additional work is performed during the simulation process, 77293 was created as an add-on code and must be billed on the same data as either a 3D radiotherapy plan (77295) or IMRT plan (77301). CPT code 77293 is packaged and not separately reimbursed in hospital outpatient departments. Physicians providing services in a hospital outpatient department would submit 77293 with a -26 modifier appended to signify that the provider is seeking professional reimbursement only.

2019 national average MPFS reimbursement

CPT	Descriptor	Professional Component		Technical Component		Global Component	
		RVU[2]	Payment[3]	RVU[2]	Payment[3]	RVU[2]	Payment[3]
+77293	Respiratory motion management simulation (List separately in addition to code for primary procedure)[4]	2.99	$108	10.07	$363	13.06	$471

1 Obtained from the 2019 HOPPS Addendum B posted to CMS.gov on 12/18/18.
2 Obtained from the 2019 MPFS Addendum B posted to CMS.gov on 11/2/18.
3 Calculated using the 2019 conversion factor (CF) of $36.0391.
4 Codes with the add-on indicator (+) must be submitted in conjunction with the correct primary procedure code.

For more information on how physician payment rates are calculated, visit the CMS website at www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/MedcrePhysFeeSchedfctsht.pdf to review the Medicare Physician Fee Schedule Payment System Fact Sheet. Providers must negotiate with commercial payer plans to establish contracted payment rates.

The information provided herein has been gathered from third-party sources which include, but are not limited to government and commercially available coding guides, professional societies, and research conducted by coding and reimbursement consultants, and is subject to change without notice because of complex and frequently changing laws, regulations, rules, and policies. This information should not be construed as authoritative and is presented for illustrative and informational purposes only. It does not constitute either reimbursement or legal advice. The entity billing Medicare, other government programs and/or third-party payers is solely responsible for determining medical necessity, the proper site for delivery of any services and submitting accurate and appropriate codes, charges, and modifiers for services that are rendered and reflected in a patient's medical record. Varian does not have access to medical records, and therefore cannot recommend codes for specific cases. Varian recommends that you consult with your payers, reimbursement specialists and/or legal counsel regarding coding, coverage and reimbursement matters. Varian's products have been cleared for use by the FDA as set forth in our Instructions for Use and nothing in this document should be construed as promoting any use outside of those instructions.

Not all features and products are available in all markets.

Intended Use Summary

Varian Medical Systems' linear accelerators are intended to provide stereotactic radiosurgery and precision radiotherapy for lesions, tumors, and conditions anywhere in the body where radiation treatment is indicated.

Safety Statement

Radiation treatments may cause side effects that can vary depending on the part of the body being treated. The most frequent ones are typically temporary and may include, but are not limited to, irritation to the respiratory, digestive, urinary or reproductive systems, fatigue, nausea, skin irritation, and hair loss. In some patients, they can be severe. Treatment sessions may vary in complexity and time. Radiation treatment is not appropriate for all cancers.

varian

varian.com

USA, Corporate Headquarters and Manufacturer
Varian Medical Systems, Inc.
3100 Hansen Way
Palo Alto, CA 94304
Tel: 650.424.5700
800.544.4636

Headquarters Europe, Eastern Europe, Middle & Near East, India, Africa
Varian Medical Systems International AG
Steinhausen, Switzerland
Tel: 41.41.749.8844

Asia Pacific Headquarters
Varian Medical Systems Pacific, Inc.
Kowloon, Hong Kong
Tel: 852.2724.2836

Australasian Headquarters
Varian Medical Systems Australasia Pty Ltd.
Sydney, Australia
Tel: 61.2.9485.0111

Latin American Headquarter
Varian Medical Systems Brasil Ltda.
São Paulo, Brazil
Tel: 55.11.3457.2655

RAD 10374D 04/2019