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Radiology Trends

Did You Know?

Medicare is proposing a 3.55% decrease in payments for Medicare Advantage Plans, about half of what private insurers can expect for 2015.

A Kansas Radiologist running for Senate received criticism for posting x-rays of a fatal gun-shot victim on his personal Facebook page.

2008 Nachimson Study Updated

The 2008 Nachimson Advisors, LLC report on The Cost of Implementing ICD-10 for Physician Practices has been updated for 2014. The study divided practices into small, medium and large categories. A small practice was defined as having 3 physicians and 2 administrators; a medium as having 10 physicians, 6 administrators and 1 full-time coder; and a large as having 100 physicians, 64 administrators and 10 full-time coders.

The total cost of implementing ICD-10 for a small practice was estimated at \$83,290 in 2008 and has been revised to a range of \$56,639 to \$226,105 in 2014. For me-

dium-sized practices the 2008 estimate was \$285,195 while the 2014 range was \$213,364 to \$824,735. For a large practice in 2008 the estimate was \$2,728,780 while the 2014 estimate ranges from \$2,017,151 to \$8,018,364.

The methodology used to arrive at these estimates was basically the same in both 2008 and 2014 with the addition of interviews with practices, vendors and consultants. Why the wide variance? Nachimson cited the dramatically different regulatory environment as well as the need to pay for upgrades to electronic health records (EHR), and practice management systems (PMS). Added to this

is the required use of 2014 certified EHR technology in order to meet Meaningful Use requirements.

The cost summary for 2008 broke out expenses in categories for education, process analysis, changes to superbills, IT costs, increased documentation costs, and cash flow disruption. The expense portion of the study for 2014 also included tasks not deemed critical in 2008, such as testing. The 2014 cost projections are listed in ranges to reflect practice variations.

Highmark Looks to Expand in PA

A year following its deal to take over the West Penn-Allegheny System in Pittsburgh, Highmark is looking to expand by adding Blue Cross and Blue

Shield of Northeastern PA to its fold. This would add over a half million covered lives to its 4.3 million enrollees in 47 counties in Western and

Central Pennsylvania. The application was filed with the Insurance Department in February with a decision expected sometime in April.

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Coding and Compliance Tips by Lori Shore, CPC,RCC

Summer is coming and with summer comes shorts and bathing suits. After this winter it will be a welcome change to parkas, scarves, hats and gloves! While many try to get back in bathing suit shape others worry about showing their legs. Spider-veins and varicose veins are not only a cosmetic issue but can also be painful. If you want to have a procedure to treat varicose veins you will need to begin now. Medicare requires three months of documented non response to conservative treatment. Spider-veins are never covered and varicose veins are the only covered diagnosis for surgical intervention.

The codes for percutaneous interven-

tion for varicose veins are:

36475 - Endovascular ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated
+36476 - second and subsequent veins treated in a single extremity, each through separate access sites

36478 - Endovenous ablation therapy of incompe-

tent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated

+36479 - second and subsequent veins treated in a single extremity, each through separate access sites

Good documentation is key to proving medical necessity, and therefore obtaining payment.

4-D MRI May Predict Heart Disease

A new imaging technique that measures blood flow in the heart and vessels can identify bicuspid valve disorders, the most common congenital heart disorder, and predict possible complications. In a study published in the February 11th edition of the journal *Circulation*, the study authors found a previously unrealized link between blood flow changes in the heart that cause aortic disease to aortic valve disorders in the heart.

Senior study author, Dr. Michael Markl, associate professor of radiology at Northwestern University Feinberg School of Medicine, said, " Blood flow in patients with bicuspid aortic valves was significantly different compared to that in patients with normal valves. We now have direct evidence that bicuspid valves induce changes in blood flow and that the type of flow abnormality may contribute to the development of different expressions of heart disease in these patients."