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MBMS

111 Continental Drive
Suite 315
Newark, DE 19713

Phone: 1-888-625-4753

Fax: 302-731-2498

E-mail:

mostrum@mbms.net

"Clarification on Tomosynthesis and the 2015 Medicare Physician Fee Schedule Proposed Rule"

Given the high level of interest in the topic, we wanted to provide additional clarification regarding our statement on Tomosynthesis. Many in the industry are keeping a close watch on its development both technologically as well as payor reimbursement determinations, especially Medicare.

In November 2013, CMS declared that Tomosynthesis was considered an integral part of digital mammography that could not be billed separately.

CMS' 2015 proposed treatment of the Mammo G-codes, along with other "industry chatter", lead us to surmise that Tomosynthesis would have the same values as a mammogram performed with typical digital or analog technology. Having a CPT code and RVU value does not guarantee coverage (as evidenced by CMS' failure to cover seniors for screening CT Colonography).

We do recognize the Proposed 2015 Medicare Physician Fee Schedule does not specifically address Tomosynthesis.

Actual payment policies and RVU values are kept confidential until finalized. CMS will issue its decision in late October regarding what RVU values will be assigned to Tomosynthesis and whether they will pay for it separately from digital mammography. As such, the prospect also exists that Tomosynthesis will be reimbursed exclusive (non-bundled) of Screening Mammo.

MBMS will continue following this emerging technology and communicate developments as they become available.

Source:

<http://www.acr.org/about-us/Media-center/Press-releases/2014-press-releases/20140722-ACR-statement-on-breast-tomosynthesis>

<http://www.auntminnie.com/index.aspx?sec=sup&sub=imc&pag=dis&ItemID=108030&wf=1>

Correction: The application for a Tomosynthesis CPT code (March 2014 accepted by the AMA) was submitted by the ACR, not Hologic.