



Radiology Trends

Medical Billing and Management Services

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Did You Know?

25% of men over age 50 will break a bone due to osteoporosis. Men over age 50 are more likely to break a bone due to osteoporosis than to get prostate cancer.

A study published in the Lancet Oncology reported that childhood cancer survivors who received abdominal radiation therapy, specifically to the pancreatic tail, are more likely to develop diabetes. The greater the radiation dose to the pancreatic tail the greater the risk of developing diabetes.

CMS Issues Final Rule on Stage 2 Meaningful Use

In its August 23rd announcement the Centers for Medicare and Medicaid Services (CMS) delayed the implementation of Stage 2 Meaningful Use until 2014. It also added new core measures and electronic reporting requirements. In a statement by Secretary of Health and Human Services (HHS), Kathleen Sebelius said, "The changes we're announcing today will lead to more coordination of patient care, reduced medical errors, elimination of duplicate screenings and

tests and greater patient engagement in their own care."

CMS specifically identified radiology as a "Scope of Practice" hardship exception. The Radiology Business Management Association (RBMA) has learned that CMS will automatically exclude radiologists in PECOS by July 1, 2014, based on their taxonomy code, to avoid the 2015 penalty for non-participation. This hardship exception will likely continue until the statutorily mandated

five-year limit on exceptions is reached.

Anesthesiology and Pathology were also specified as hardship exceptions.

Radiologists who still wish to participate in Meaningful Use may do so.

PET Brings Hope to Alzheimer's Researchers

Every 68 seconds someone in the U.S. develops Alzheimer's. Until now there has been limited definitive diagnosis since the only way to truly diagnose dementia as Alz-

heimer's disease was a brain biopsy or autopsy. PET is now able to track amyloid plaque in the brain. This allows researchers to begin to differentiate Alzheimer's

from dementia and work towards finding causes and treatments. By 2050 the cost of caring for Alzheimer's patients is estimated to be \$1.1 trillion.

ICD-10 Corner

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Coding and Compliance Tips by Lori Shore, CPC, RCC

Since it is back to school time I thought it would be a good time to get back to basics of documentation. Diagnostic x-ray, with two exceptions, is billed based on number of views. If the number of views is not documented **in the report** we are mandated by CMS guidelines to code the lowest number of views for that code series. Example:

WRONG- views of the knee were submitted.... = 73560

CORRECT- Four views of the knee were submitted.... = 73564.

The two exceptions previously mentioned are chest and abdominal x-rays. These studies are coded based on the actual views performed.

Example:

WRONG- 2 views...

CORRECT- AP and Lateral views

Another issue I see quite often which is NOT codeable is the phrase "Multiplanar reconstructions...". This is NOT considered 3-D by CMS and is therefore not codeable. It is best to just spell out 3-D or MIPS.

The injury section in ICD-10 has been expanded so much that it requires two letter sections to cover all the codes. "S" codes will cover injuries to specific body parts. These injuries are now arranged by body part rather than injury type for easier code assignment. "T" codes will be for unspecified body parts, burns, poisonings, and complication codes.

S70 —S70 These sections cover all injuries to the hip and thigh including fractures, dislocations, sprains, etc.

S73.015A —Posterior dislocation of left hip, initial encounter

The poisoning codes incorporate the intent codes from the tables found in ICD-9.

T41.1x2 —Poisoning by intravenous anesthetics, intentional self-harm

Underdosing will also be added as a poisoning category in ICD-10.

T44.4x6 —Underdosing of predominantly alpha-adrenoreceptor agonists

Look for us at the
RBMA
Fall Educational
Conference in AZ
October 7-9

