



## Radiology Views™ Newsletter – October 2011

### 2012 CHANGES WILL IMPACT CERTAIN INTERVENTIONAL RADIOLOGY PROCEDURES

**History:** Prior to 1992, when an interventional radiology procedure was performed, only one (complete) code was assigned. All components, such as catheter placements, guidance, imaging, etc. would be included in this one code. Then beginning in 1992, Medicare adopted the Resource-Based Relative Value Scale (RBRVS) which resulted in the valuation of procedures performed, leading to the inception of component coding. Each component of the interventional procedure could then be reported separately (e.g., catheter placements, imaging). Interventional radiology procedures rapidly expanded, and this new method provided a means to capture and be reimbursed more appropriately for each component. But the last few years of evidence suggests that CMS is reverting back to the complete code system that is similar to the one that was in place prior to 1992. History has shown that when these procedures collapse into one code, revenue is significantly reduced (e.g., lower extremity revascularization, AV shunt, UFE). Even though we won't know the impact to reimbursement until the end of this year, we do anticipate significant reductions that will impact interventional radiology. Here are a couple of examples of catheter placements, imaging guidance, and supervision and interpretation collapses into one CPT code for 2012:

#### **Vena Cava Filters:**

Catheter placements, roadmapping, imaging guidance, and supervision and interpretation will be reported with one of the following codes:

37191 Insertion of intravascular vena cava filter, endovascular approach including vascular access, vessel selection and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed

37192 Repositioning of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed

37193 Retrieval (removal) of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping and imaging guidance (ultrasound and fluoroscopy), when performed

#### **Angiography – Renal Arteries**

36251 Selective catheter placement (first-order) main renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture and catheter placement(s), fluoroscopy contrast injection(s) image post processing permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; unilateral

36252                      bilateral

36253 Superselective catheter placement (second order or higher renal artery branches) renal artery and any accessory renal artery(s) for renal angiography, including pressure gradient measurements when performed and flush aortogram when performed; unilateral

36254                      bilateral

#### **Summary:**

Even though these changes will not have an impact on your documentation of these procedures, the changes will affect reimbursement. In 2012, there will be a change to some of the more common I/R procedure codes, which are not listed here due to space. For more information, please contact Wendy Block at [wblock@prcmedical](mailto:wblock@prcmedical) or by phone, 330.564.2618.