Payment Policy CPP 09

BlueCross BlueShield

Multiple Procedure Payment s end Blue Shield Association. Reduction(MPPR) — Diagnostic Imaging bluecrossvt.org Services

Origination: July 15, 2017 Last Review: November 14, 2024 Next Review: Policy Archived Effective Date: Policy Archived Effective March 01, 2025

Description

This payment policy addresses the reimbursement methodology for claims containing services subject to the multiple procedure payment reduction for certain diagnostic imaging procedures.

Policy & Guidelines

Background

Procedures subject to the multiple procedure payment reduction (MPPR) include diagnostic radiology services. A list of these procedures can be found in Appendix 1.

Many diagnostic services are composed of a technical and a professional component.

The technical component refers to the equipment and technician performing the service. It is identified by appending modifier -TC to the procedure code.

The professional component refers to the interpretation of the results of the service. When the professional component is reported separately the service may be identified by adding modifier -26 to the procedure code. Interpretation of a diagnostic procedure includes a written report.

When multiple diagnostic services are performed during a single session, most of the clinical labor activities and most supplies are not performed or furnished twice. The following clinical labor activities are performed once during the session and are duplicated for subsequent procedures, creating an overlap in the services comprising the separately billed technical components:

- Greeting the member.
- Positioning and escorting member.
- Providing education and obtaining consent.
- Retrieving prior exams.

- Setting up the infusion.
- Preparing and cleaning the room.

In addition, the supplies used are not duplicated for subsequent procedures.

Policy

The multiple procedure payment reduction on diagnostic imaging applies when multiple services are furnished by the same physician, to the same member, in the same session, on the same day.

The MPPRs apply to -TC only services and the -TC of global services.

Diagnostic Radiology Services: Reimbursement for the technical and professional component of the primary procedure is 100% of the contracted allowed amount. Subsequent radiology services, furnished by the same physician to the same member on the same day, a 50% reduction shall apply to the contracted allowed amount for the technical component and a 25% reduction shall apply to the contracted allowed amount for the professional component.

Eligible

This policy applies to all providers/facilities contracted with the Plan's Network (participating/in-network) and any non-participating/out-of-network providers/facilities.

Not Eligible

A payment adjustment will not be considered when services are split billed, when the payment reduction was applied to the claim with the higher allowable (highest Blue cross VT allowed amount).

A payment adjustment will not be applied to diagnostic imaging services that were not prior approved based on Blue Cross VT list of services requiring prior approval, as claims for such services will deny for lack of prior approval.

Provider Billing Guidelines and Documentation

When both a CPT[®] code and a HCPCS Level II code exist that describe the same service or procedure, bill with the CPT[®] code unless otherwise directed.

Benefit Determination Guidance

Payment for services is determined by the member's benefits. It is important to verify the

member's benefits **prior** to providing the service to determine if benefits are available or if there is a specific exclusion in the member's benefit.

Eligible services are subject to applicable member cost sharing such as co-payments, coinsurance, and deductible.

Federal Employee Program (FEP): Members may have different benefits that apply. For further information, please contact FEP customer service or refer to the FEP Service Benefit Plan Brochure. It is important to verify the member's benefits **prior** to providing the service to determine if benefits are available or if there is a specific exclusion in the member's benefit.

Inter Plan Programs (IPP): In accordance with the Blue Cross and Blue Shield Association's Inter-Plan Programs Policies and Provisions, this payment policy governs billing procedures for goods or services rendered by a Vermont-based provider (Blue Cross VT is the local Plan), including services rendered to out-of-state Blue members. Provider billing practices, payment policy and pricing are a local Plan responsibility that a member's Blue Plan must honor. A member's Blue Plan cannot dictate the type of claim form upon which services must be billed, codes and/or modifiers, place of service or provider type, unless it has its own direct contract with the provider (permitted only in limited situations). A member's Blue Plan cannot apply its local billing practices on claims rendered in another Plan's service area. A member's Blue Plan can only determine whether services rendered to their members are eligible for benefits. To understand if a service is eligible for payment, it is important to verify the member's benefits **prior** to providing services. In certain circumstances, the member may be financially responsible for services beyond the benefit provided for eligible services.

Claims are subject to payment edits that are updated at regular intervals and generally based on Current Procedural Terminology (CPT[®]), Health Care Procedural Coding System (HCPCS), Internal Classification of Diseases, CMS National Correct Coding Initiative Edits, Specialty Society guidelines, etc.

Eligible Providers

This policy applies to all providers/facilities contracted with the Plan's Network (participating/in- network) and any non-participating/out-of-network providers/facilities.

Rodit Information

Blue Cross VT reserves the right to conduct audits on any provider and/or facility to ensure adherence with the guidelines stated in the payment policy. If an audit identifies instances of non-adherence with this payment policy, Blue Cross VT reserves the right to recover all non-adherence payments.

Legislative and Regulatory Guidelines

N/A

Related Policies

<u>Corporate Payment Policy (CPP_32) Claims Editing CLAIMSXTEN-SELECT™ and Cotiviti, Inc.</u> Edits.

Document Precedence

The Blue Cross VT Payment Policy Manual was developed to provide guidance for providers regarding Blue Cross VT payment practices and facilitates the systematic application of Blue Cross VT member contracts and employer benefit documents, provider contracts, Blue Cross VT corporate medical policies, and Plan's claim editing logic. Document precedence is as follows:

- 1) To the extent that there may be any conflict between the Blue Cross VT Payment Policy Manual and the member contracts or employer benefit documents, the member contract or employer benefit document language takes precedence.
- To the extent that there may be any conflict between the Blue Cross VT Payment Policy Manual and provider contract language, the provider contract language takes precedence.
- 3) To the extent that there may be any conflict between the Blue Cross VT Payment Policy Manual and corporate medical policy, the corporate medical policy takes precedence.
- 4) To the extent that there may be any conflict between the Blue Cross VT Payment Policy Manual and the Plan's claim editing solutions, the Plan's claim editing solution takes precedence.

References

American Medical Association. (2024). Current Procedural Terminology (CPT). Chicago: AMA Press.

American Medical Association. (2024). Current Procedural Terminology (CPT). Appendix A – Modifiers. Chicago: AMA Press.

- CMS. https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeesched/pfsfederal-regulation-notices/cms-1784-f
- CMS. Revision https://www.cms.gov/Regulations-and-

Guidance/Guidance/Transmittals/Downloads/R1149OTN.pdf

CMS. Relative-ValueFiles https://www.cms.gov/Outreach-and-Education/Medicare-Learning-NetworkMLN/MLNMattersArticles/downloads/mm9647.pdf

Policy Implementation/Update Information

Date of Change	Effective Date	Overview of Change
January 1, 2021	07/15/2017	New Policy
November 14, 2024	March 01, 2025	Policy archived effective 03/01/2025.
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APPENDIX I: List of Diagnostic Imaging Procedures Subject to Reduction

Note: This list may not be all-inclusive as the American Medical Association (AMA) and Centers for Medicare and Medicaid Services (CMS) code updates may occur more frequently than policy updates.

Procedure Code	Description
0648T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat,
	iron, water content), including multiparametric data acquisition, data
	preparation and transmission, interpretation and report, obtained without
	diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue,
	target structure) during the same session; single organ
70336	Magnetic resonance (e.g., proton) imaging, temporomandibular joint(s)
70450	Computed tomography, head or brain; without contract material
70460	Computed tomography, head or brain; with contrast material
70470	Computed tomography, head or brain, without contrast material, followed
	by contrast material(s) and further sections
70480	Computed tomography, orbit, sella, or posterior fossa or out, middle, or
	inner ear; without contrast material
70481	Computed tomography, orbit, sella, or posterior fossa or outer, middle, or
	inner ear; with contrast material
70482	Computed tomography, orbit, sella, or posterior fossa or outer, middle, or
	inner ear; without contrast material, followed by contrast material(s) and
	further sections 70486
70486	Computed tomography, maxillofacial area; without contrast material
70487	Computed tomography, maxillofacial area; with contrast material
70488	Computed tomography, maxillofacial area; without contrast material
	followed by contrast material(s) and further sections
70490	Computed tomography, soft tissue neck; without contrast material
70491	Computed tomography, sofit tissue neck; with contrast material
70492	Computed tomography, soft tissue neck; without contrast material
	followed by contrast material(s) and further sections
70496	Computed tomographic angiography, head, with contrast material(s),
	including non-contrast images, if performed, and image postprocessing
70498	Computed tomographic angiography, neck, with contrast material(s),
	including non-contrast images, if performed, and image postprocessing
70540	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck,
	without contrast material(s)
70542	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck, with
	contrast material(s)

	70543	Magnetic recompanys (a.g., proton) imaging orbit face, and/or pack
	/0543	Magnetic resonance (e.g., proton) imaging, orbit, face, and/or neck,
		without contrast material(s), followed by contrast material(s) and further
	70544	sequences
	70544	Magnetic resonance angiography, head; without contrast material(s)
	70545	Magnetic resonance angiography, head; with contrast material(s)
	70546	Magnetic resonance angiography, head; without contrast material(s);
		followed by contrast material(s) and further sequences
	70547	Magnetic resonance angiography, neck; without contrast material(s)
	70548	Magnetic resonance angiography, neck; with contrast material(s)
	70549	Magnetic resonance angiography, neck; without contrast material(s) and
		further sequences
	70551	Magnetic resonance (e.g., proton) imaging, brain (including brain stem);
		without contrast material
	70552	Magnetic resonance (e.g., proton) imaging, brain (including brain stem);
		with contrast material
	70553	Magnetic resonance (e.g., proton) imaging, brain (including brain stem);
		without contrast material, followed by contrast material(s) and further
		sequencing
	70554	Magnetic resonance imaging, brain, functional MRI; including test selection
		and administration of repetitive body part movement and/or visual
		stimulation, not requiring physician or psychologist administration
	71250	Computed tomography, thorax; without contrast material
	71260	Computed tomography, thorax; with contrast material
	71270	Computed tomography, thorax; without contrast material, followed by
		contrast material(s) and further sections
	71271	Computed tomography, thorax, low dose for lung cancer screening,
		without contrast material(s)
	71275	Computed tomographic angiography, chest (non-coronary) without
		contrast material(s), followed by contrast material(s) and further sections,
		including post-imaging processing
	71550	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of
		hilar and mediastinal lymphadenopathy); without contrast material
	71551	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of
		hilar and mediastinal lymphadenopathy); with contrast material
	71552	Magnetic resonance (e.g., proton) imaging, chest (e.g., for evaluation of
•		hilar and mediastinal lymphadenopathy); without contrast material,
		followed by contrast material(s) and further sequences
	71555	Magnetic resonance angiography, chest (excluding myocardium), without
		or without contrast material(s)
	72125	Computed tomography, cervical spine; without contrast material
	72126	Computed tomography, cervical spine; with contrast material
	72127	Computed tomography, cervical spine; without contrast material, followed
		by contrast material(s) and further sequences

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_	72128	Computed tomography, thoracic spine; without contrast material
_	72129	Computed tomography, thoracic spine; with contrast material
	72130	Computed tomography, thoracic spine; without contrast material, followed
_		by contrast material(s) and further sequences
_	72131	Computed tomography, lumbar spine; without contrast material
_	72132	Computed tomography, lumbar spine; with contrast material
	72133	Computed tomography, lumbar spine; without contrast material, followed
		by contrast material(s) and further sequences
	72141	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		cervical, without contrast material
	72142	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		cervical, with contrast material
	72146	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		thoracic, without contrast material
	72147	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		thoracic, with contrast material
	72148	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		lumbar, without contrast material
	72149	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		lumbar, with contrast material
	72156	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		without contrast material(s) and further sequences, cervical
	72157	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		without contrast material(s) and further sequences, thoracic
	72158	Magnetic resonance (e.g., proton) imaging, spinal canal and contents,
		without contrast material(s) and further sequences, lumbar
	72159	Magnetic resonance angiography, spinal canal and contents, with or
		without contrast material(s)
	72191	Computed tomographic angiography, pelvis; without contrast material,
		followed by contrast material(s) and further sections, including image post-
		processing
	72192	Computed tomographic angiography, pelvis; without contrast material
	72193	Computed tomographic angiography, pelvis; with contrast material
	72194	Computed tomography pelvis; without contrast material, followed by
		contrast material(s) and further sections
	72195	Magnetic resonance (e.g., proton) imaging, pelvis, without contrast
		material
V	72196	Magnetic resonance (e.g., proton) imaging, pelvis, with contrast material
	72197	Magnetic resonance (e.g., proton) imaging, pelvis, without contrast
		material, followed by contrast material(s) and further sequences
	72198	Magnetic resonance angiography, pelvis, with or without contrast
	•	material(s)
	73200	Computed tomography, upper extremity, without contrast material
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	73201	Computed tomography, upper extremity, with contrast material(s)
	73202	Computed tomography, upper extremity, without contrast material,
		followed by contrast material(s) and further sequences
	73206	Computed tomography, upper extremity, without contrast material,
		followed by contrast material(s) and further sections, including image post-
		processing
	73218	Magnetic resonance (e.g., proton) imaging, upper extremity, other than
		joint, without contrast material
	73219	Magnetic resonance (e.g., proton) imaging, upper extremity, other than
		joint, with contrast material
	73220	Magnetic resonance (e.g., proton) imaging, upper extremity, other than
		joint, without contrast material, followed by contrast material(s) and
		further sequences
	73221	Magnetic resonance (e.g., proton) imaging, any joint of upper extremity,
		without contrast material
	73222	Magnetic resonance (e.g., proton) imaging, any joint of upper extremity,
		with contrast material
	73223	Magnetic resonance (e.g., proton) imaging, any joint of upper extremity,
		without contrast material(s) followed by contrast material(s) and further
		sequences
	73225	Magnetic resonance angiography, upper extremity, with or without
		contrast material
	73700	Computed tomography, lower extremity, without contrast material
	73701	Computed tomography, lower extremity, with contrast material(s)
	73702	Computed tomography, lower extremity, without contrast material,
		followed by contrast material(s) and further sequences
	73706	Computed tomography, lower extremity, without contrast material(s),
		followed by contrast material(s) and further sections, including image post-
		processing
	73718	Magnetic resonance (e.g., proton) imaging, lower extremity, other than
		joint, without contrast material
	73719	Magnetic resonance (e.g., proton) imaging, lower extremity, other than
		joint, with contrast material
	73720	Magnetic resonance (e.g., proton) imaging, lower extremity, other than
		joint, without contrast material, followed by contrast material(s) and
•		further sequences
	73721	Magnetic resonance (e.g., proton) imaging, any joint of lower extremity,
V		without contrast material
	73722	Magnetic resonance (e.g., proton) imaging, any joint of lower extremity,
		with contrast material
	73723	Magnetic resonance (e.g., proton) imaging, any joint of lower extremity,
		without contrast material(s) followed by contrast material(s) and further
		sequences

73725	Magnetic resonance angiography, lower extremity, with or without
	contrast material
74150	Computed tomography, abdomen, without contrast material
74160	Computed tomography, abdomen, with contrast material
74170	Computed tomography, abdomen and pelvis, without contrast material,
	followed by contrast material(s) and further sections
74174	Computed tomographic angiography, abdomen and pelvis, with contrast
	material(s), including non-contrast images, if performed, and image post-
	processing
74175	Computed tomographic angiography, abdomen; without contrast
	material(s), followed by contrast material(s) and further sections, including
	image post-processing
74176	Computed tomography, abdomen and pelvis, without contrast material
74177	Computed tomography, abdomen and pelvis, with contrast material
74178	Computed tomography, abdomen and pelvis, without contrast material in
	one or both body regions, followed by contrast material(s) and further
	sections in one or both body regions
74181	Magnetic resonance (e.g. proton) imaging, abdomen, without contrast
	material(s)
74182	Magnetic resonance (e.g. proton) imaging, abdomen, with contrast
	material(s)
74183	Magnetic resonance (e.g., proton) imaging, abdomen, without contrast
	material(s) followed by contrast material(s) and further sequences
74185	Magnetic resonance angiography, abdomen with or without contrast
	material
74261	Computed tomographic (CT) colonography, diagnostic, including image
74262	postprocessing, without contrast material
74262	Computed tomographic (CT) colonography, diagnostic, including image
	postprocessing, with contrast material(s) including non-contrast images, if
74712	Magnetic reconance (e.g., proton) imaging fotal including placental and
/4/12	Magnetic resonance (e.g., proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation
75557	Cardiac magnetic resonance imaging for morphology and function without
13357	contrast material
75559	Cardiac magnetic resonance imaging for morphology and function without
0,000	contrast material; with stress imaging
75561	Cardiac magnetic resonance imaging for morphology and function without
	contrast material(s), followed by contrast material(s) and further
X	sequences
75563	Cardiac magnetic resonance imaging for morphology and function without
, , , , , , , , , , , , , , , , , , , ,	contrast material(s), followed by contrast material(s) and further

	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium
	75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)
	75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluation of venous structures, if performed)
	75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image post processing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)
	75635	Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, radiological supervision and interpretation, without contrast material(s), followed by contrast material(s) and further sections, including image post-processing
Ē	76391	Magnetic resonance (eg, vibration) elastography
	76604	Ultrasound, chest (includes mediastinum), real time with image documentation
	76700	Ultrasound, abdominal, real time with image documentation, complete
	76705	E Ultrasound, abdominal, real time with image documentation, limited (e.g., single organ, quadrant, follow-up)
	76770	Ultrasound, retroperitoneal (e.g., renal, aorta, nodes), real time with image documentation, complete
	76775	Ultrasound, retroperitoneal (e.g., renal, aorta, nodes), real time with image documentation, limited
	76776	Ultrasound, transplanted kidney, real time with duplex Doppler with image documentation
	76831	Saline infusion sonohysterography (SIS), including color flow Doppler, when performed
	76856	Ultrasound, pelvic (non-obstetric), real time with image documentation, complete
	76857	Ultrasound, pelvic (non-obstetric), real time with image documentation, limited or follow up (e.g., for follicles)
	76870	Ultrasound, scrotum and contents
	76978	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); initial lesion
	76981	Ultrasound, elastography; parenchyma (eg, organ)
	76982	Ultrasound, elastography; first target lesion
	77046	Magnetic resonance imaging, breast, without contrast material; unilateral

 77047 Magnetic resonance imaging, breast, without contrast material; bilateral 77048 Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral 77049 Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection (characterization and pharmacokinetic analysis), when performed; bilateral 7806 Bone and/or joint imaging; whole body 78802 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, whole body, single day imaging 78803 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), single area (eg, head, neck, chest, pelvis) or acquisition single day imaging 		
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		(eg, head, neck, chest, pelvis) or acquisition, single day imaging
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