

## **Final Comments 3D Interpretation and Reporting of Imaging Studies (RAD-037)**

**Comment:** A CAC member suggested removing codes 21x-23x (billing codes) for SNF as this service would not be appropriate in this setting.

**Response:**

Absence of a Bill Type code does not guarantee that the policy does not apply to that Bill Type. Therefore, WPS Medicare will not remove these two codes at this time.

21x SNF-inpatient, Part A

23x SNF-outpatient (HHA-A also)

**Comment:**

It was suggested that the 3D Interpretation and Reporting of Imaging Studies procedures be added to the echo CT and MRI LCDs.

**Response:**

WPS Medicare considers 3D imaging a complex procedure which is best explained in a document that is separate from Magnetic Resonance Imaging (MRI) or Computerized Tomography (CT Scans).

**Comment:**

Clarification of statement number three under Documentation Requirements was received. This statement is as follows;

A written request for **the study** from the referring physician must be maintained in the patient's medical record.

Specifically the query asked does "a written request for the study" refer to the CT or MRI exam that was originally ordered? Or is it required to contact the referring physician and request an order for the 3D images when our radiologist feels they are medically necessary? A written request for the study is made but it is often the radiologist who discovers the need for the 3D reconstructions.

**Response:**

The radiologist must contact the ordering physician. Documentation that this has been done may be requested by Medicare. This requirement is outlined in the draft LCD. Unlike other situations (e.g. CT chest shows a liver abnormality and one needs the abdominal CT done at that time), the reconstruction study can be done later.