

Intensity-Modulated Radiation Therapy (IMRT) Planning Services Editing

MLN Matters Number: SE18013 Related Change Request (CR) Number: N/A

Article Release Date: September 11, 2018 Effective Date: N/A

Related CR Transmittal Number: N/A Implementation Date: N/A

PROVIDER TYPE AFFECTED

This MLN Matters® Special Edition Article is for Outpatient Prospective Payment System (OPPS) providers submitting claims for outpatient Intensity-Modulated Radiation Therapy (IMRT) planning to Medicare Administrative Contractors (MACs).

WHAT YOU NEED TO KNOW

IMRT is a procedure that delivers radiation with adjusted intensity to preserve adjoining normal tissue. IMRT is provided in two treatment phases, planning and delivery. Medicare pays hospitals under the OPPS a bundled payment for the planning phase. The bundled payment covers a range of services that may be performed as part of developing an IMRT treatment plan. The bundled payment covers these services regardless of when they are billed.

This article provides a reminder to hospitals that bill for outpatient IMRT planning services to ensure that they bill correctly and avoid overpayments.

BACKGROUND

IMRT also known as conformal radiation, delivers radiation with adjusted intensity to preserve adjoining normal tissue. IMRT can deliver a higher dose of radiation within the tumor while delivering a lower dose of radiation to surrounding healthy tissue. IMRT is provided in two treatment phases, planning and delivery. The planning phase includes simulations.

When IMRT is furnished to beneficiaries in a hospital outpatient department that is paid under the hospital OPPS, hospitals must remember that CPT codes 77014, 77280, 77285, 77290, 77295, 77306 through 77321, 77331, and 77370 are included in the Ambulatory Payment Classification (APC) payment for CPT code 77301 (IMRT planning). You should not report these codes in addition to CPT code 77301, when provided prior to, or as part of, the development of the IMRT plan. The charges for these services should be included in the charge associated with CPT code 77301, even if the individual services associated with IMRT planning are performed on dates of service other than the date on which CPT code 77301 is reported.





ADDITIONAL INFORMATION

The Medicare Claims Processing Manual, Chapter 4, Section 200.3.1 contains instruction for IMRT services coding and those instructions are at https://www.cms.gov/Regulations-and-Guidance/Manuals/downloads/clm104c04.pdf.

<u>CR9658</u>, July 2016 Update of the Hospital Outpatient Prospective Payment System (OPPS), also contains these instructions for IMRT.

The Office of the Inspector General recently released a report on improper billing by hospitals for IMRT and that report is available at https://oig.hhs.gov/oas/reports/region9/91602033.pdf.

If you have questions, your MACs may have more information. Find their website at http://go.cms.gov/MAC-website-list.

DOCUMENT HISTORY

Date of Change	Description
March 16, 2021	We replaced an article link with a link to a related CR.
September 11, 2018	Initial article released.

Disclaimer: This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2017 American Medical Association. All rights reserved.

Copyright © 2018, the American Hospital Association, Chicago, Illinois. Reproduced with permission. No portion of the AHA copyrighted materials contained within this publication may be copied without the express written consent of the AHA. AHA copyrighted materials including the UB-04 codes and descriptions may not be removed, copied, or utilized within any software, product, service, solution or derivative work without the written consent of the AHA. If an entity wishes to utilize any AHA materials, please contact the AHA at 312-893-6816. Making copies or utilizing the content of the UB-04 Manual, including the codes and/or descriptions, for internal purposes, resale and/or to be used in any product or publication; creating any modified or derivative work of the UB-04 Manual and/or codes and descriptions; and/or making any commercial use of UB-04 Manual or any portion thereof, including the codes and/or descriptions, is only authorized with an express license from the American Hospital Association. To license the electronic data file of UB-04 Data Specifications, contact Tim Carlson at (312) 893-6816 or Laryssa Marshall at (312) 893-6814. You may also contact us at ub04@healthforum.com

The American Hospital Association (the "AHA") has not reviewed, and is not responsible for, the completeness or accuracy of any information contained in this material, nor was the AHA or any of its affiliates, involved in the preparation of this material, or the analysis of information provided in the material. The views and/or positions presented in the material do not necessarily represent the views of the AHA. CMS and its products and services are not endorsed by the AHA or any of its affiliates.



