



2013 CPT Codes - RADIOLOGY

Category	Code Range	New	Deleted	Revised	Total
RADIOLOGY	70010 - 79999	5	19	15	39

^{*}Underlined words are new for 2013

Thyroid Uptake & Imaging Codes

CPT has deleted 7 thyroid imaging codes, replacing them with 5 codes that combine single with multiple determinations.

New Codes

78012 – Thyroid Update, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)

78013 – Thyroid imaging (including vascular flow, when performed)

78014 – Thyroid imaging (including vascular flow, when performed); with single or multiple uptakes(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)

78071 - Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)

78072 – Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computer tomography (CT) for anatomical localization.

Deleted Codes

78000 – Thyroid uptake; single determination

78001 – Thyroid uptake; multiple determinations

78003 - Thyroid uptake: stimulation, suppression or discharge (not including initial uptake studies)

78006 – Thyroid imaging; with uptake; single determination

78007 - Thyroid imaging; multiple determinations

78010 - Thyroid imaging; only

78011 - Thyroid imaging; with vascular flow

Revised Codes:

78070 - Parathyroid planar imaging, (including subtraction, when performed)

Other Radiology Codes

The supervision and interpretation bronchography and angiography codes have been deleted and are now bundled in the surgical code. The 3D rendering codes have been revised to include "concurrent supervision," which is defined at the end of the "revised codes" section. Radiologists will need to document this supervision in their reports.

New Codes - None

^{*}Words with a Strikethrough are deleted for 2013





2013 CPT Codes - RADIOLOGY

Deleted Codes

71040 - Bronchography, unilateral, radiological supervision and interpretation

71060 - Bronchography, bilateral, radiological supervision and interpretation

75650 - Angiography, cervicocerebral, catheter, including vessel origin, radiological supervision and interpretation

75660 - Angiography, external carotid, unilateral, selective, radiological supervision and interpretation

75662 - Angiography, external carotid, bilateral, selective, radiological supervision and interpretation

75665 - Angiography, carotid, cerebral, unilateral, radiological supervision and interpretation

75671 - Angiography, carotid, cerebral, bilateral, radiological supervision and interpretation

75676 - Angiography, carotid, cervical, unilateral, radiological supervision and interpretation

75680 - Angiography, carotid, cervical, bilateral, radiological supervision and interpretation

75685 - Angiography, vertebral, cervical, and/or intracranial, radiological supervision and interpretation

75900 - Exchange of a previously placed intravascular catheter during thrombolytic therapy with contrast monitoring, radiological supervision and interpretation

75961 – Transcatheter retrieval, percutaneous, of intravascular foreign body (eg, fractured venous or arterial catheter), radiological – supervision and interpretation

Revised Codes

72040 - Radiologic examination, spine, cervical; 2 3 views or 3 views less

72050 – Radiologic examination, spine, cervical; 4 minimum of or 5 views

72052 - Radiologic examination, spine, cervical; complete including oblique and flexion and/ 6 or extension studies more views

75896 – Transcatheter therapy, infusion, any method (eg, thrombolysis other than coronary) for thrombolysis; radiological supervision and interpretation

75898 – Angiography through existing catheter for follow-up study for transcatheter therapy, embolization or infusion, other than for thrombolysis

76000 - Fluoroscopy (separate procedure), up to 1 hour physician or <u>other qualified health care professional</u> time, other than 71023 or 71034 (eg, cardiac fluoroscopy)

76001 - Fluoroscopy physician or <u>other qualified health care professional</u> time, more than 1 hour, assisting a nonradiologic physician <u>or other qualified care professional</u> (eg, nephrostolithotomy, ERCP, bronchoscopy, transbronchial biopsy

76376 – 3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with <u>image postprocessing under **concurrent**</u> supervision, not requiring image postprocessing on an independent workstation. **

76377 – 3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with <u>image postprocessing under **concurrent**</u> <u>supervision</u>, requiring image postprocessing on an independent workstation **

76885, 76886, 77071 – adds "or other qualified health care professional" in addition to physician

77051 – Computer-aided detection...with physician review for interpretation....

77052 – Computer-aided detection...with physician review for interpretation – screening mammography

** Per the AMA/ACR <u>Clinical Examples in Radiology</u>, concurrent supervision for the 3D codes defines a temporal relationship to creating the 3D volume rendered images. Concurrent means active participation in and monitoring of the reconstruction process that includes design of the anatomic region that is to be reconstructed; determination of the tissue types and actual structures to be displayed (eg, bone, organs, and vessels); determination of the images or cine loops that are to be archived; and monitoring and adjustment of the 3D work product.





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