## Bulletin



## Radiology coverage change for chiropractors

Effective for claims received on and after May 1, 2010, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will restrict reimbursement of some radiology services submitted by chiropractors. Generally, payment will be limited to traditional X-ray films. The radiology services listed below will be denied as provider liability if submitted by a chiropractor.

code	description
71260	Computed tomography, thorax; with contrast material(s)
71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)
72192	Computed tomography, pelvis; without contrast material
72193	Computed tomography, pelvis; with contrast material(s)
72194	Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections
73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)
73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material
74150	Computed tomography, abdomen; without contrast material
74160	Computed tomography, abdomen; with contrast material(s)
74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections
74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences
76140	Consultation on x-ray examination made elsewhere, written report
76496	Unlisted fluoroscopic procedure (eg, diagnostic, interventional)
76536	Ultrasound, soft tissues of head and neck (eg, thyroid, parathyroid, parotid), real time with image documentation
76800	Ultrasound, spinal canal and contents
76856	Ultrasound, pelvic (nonobstetric), real time with image documentation; complete
76870	Ultrasound, scrotum and contents
76977	Ultrasound bone density measurement and interpretation, peripheral site(s), any method
77057	Screening mammography, bilateral (2-view film study of each breast)
77080	Dual-energy x-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)

Continued on back

## Coding requirements reminder

All coding and reimbursement is subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (for example, HCPCS, CPT, ICD-9-CM), only valid codes for the date of service may be submitted or accepted.

## **Questions?**

If you have questions, please contact provider services at (651) 662-5200 or toll free at 1-800-262-0820.

HCPCS stands for Health Care Procedure Coding System CPT® (Current Procedural Terminology) is a registered trademark of the American Medical Association ICD-9-CM stands for International Classification of Diseases, 9th Revision, Clinical Modification