



# Reimbursement Policy:

## General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

Review Date: 2024

Number: RP20240019

**Reimbursement Guideline Disclaimer:** We have policies in place that reflect billing or claims payment processes unique to our health plans. Current billing and claims payment policies apply to all our products, unless otherwise noted. EmblemHealth will inform you of new policies or changes in policies through postings to the applicable Reimbursement Policies webpage on emblemhealth.com. Further, we may announce additions and changes in our provider manual and/or provider newsletters which are available online and emailed to those with a current and accurate email address on file. The information presented in this policy is accurate and current as of the date of this publication.

The information provided in EmblemHealth’s policies is intended to serve only as a general reference resource for services described and is not intended to address every aspect of a reimbursement situation. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to, legislative mandates, physician or other provider contracts, the member’s benefit coverage documents and/or other reimbursement, and medical or drug policies. Finally, this policy may not be implemented the same way on the different electronic claims processing systems in use due to programming or other constraints; however, EmblemHealth strives to minimize these variations.

EmblemHealth follows coding edits that are based on industry sources, including, but not limited to, CPT® guidelines from the American Medical Association, specialty organizations, and CMS including NCCI and MUE. In coding scenarios where there appears to be conflicts between sources, we will apply the edits we determine are appropriate. EmblemHealth uses industry-standard claims editing software products when making decisions about appropriate claim editing practices. Upon request, we will provide an explanation of how we handle specific coding issues. If appropriate coding/billing guidelines or current reimbursement policies are not followed, EmblemHealth may deny the claim and/or recoup claim payment.

### Guidelines:



Radiology\_Cardiology\_Ultrasound  
Correct Coding Rules  
2024

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33016	Pericardiocentesis W/Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76380	Cat Scan Follow-Up Study	1	CMS Edit



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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33016	Pericardiocentesis W/Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76998	Us Guide Intraop	1	CMS Edit
33016	Pericardiocentesis W/Imaging	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33016	Pericardiocentesis W/Imaging	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93303	Echo Transthoracic	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93304	Echo Transthoracic	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93306	Tte W/Doppler Complete	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93307	Tte W/O Doppler Complete	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93308	Tte F-Up Or Lmtd	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93312	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93313	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93314	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93315	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93316	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93317	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93318	Echo Transesophageal Intraop	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93320	Doppler Echo Exam Heart	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93321	Doppler Echo Exam Heart	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93325	Doppler Color Flow Add-On	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	75989	Abscess Drainage Under X-Ray	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76376	3D Render W/Intrp Postproces	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76377	3D Render W/Intrp Postproces	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76380	Cat Scan Follow-Up Study	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76942	Echo Guide For Biopsy	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76998	Us Guide Intraop	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93303	Echo Transthoracic	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93304	Echo Transthoracic	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93306	Tte W/Doppler Complete	1	CMS Edit



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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93307	Tte W/O Doppler Complete	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93308	Tte F-Up Or Lmtd	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93312	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93313	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93314	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93315	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93316	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93317	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93318	Echo Transesophageal Intraop	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93320	Doppler Echo Exam Heart	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93321	Doppler Echo Exam Heart	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93325	Doppler Color Flow Add-On	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	33017	Prcrd Drg 6Yr+ W/O Cgen Car	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	75989	Abscess Drainage Under X-Ray	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76376	3D Render W/Intrp Postproces	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76377	3D Render W/Intrp Postproces	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76380	Cat Scan Follow-Up Study	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76942	Echo Guide For Biopsy	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76998	Us Guide Intraop	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93303	Echo Transthoracic	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93304	Echo Transthoracic	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93306	Tte W/Doppler Complete	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93307	Tte W/O Doppler Complete	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93308	Tte F-Up Or Lmtd	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93312	Echo Transesophageal	1	CMS Edit



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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33018	Prcrd Drg 0-5Yr Or W/Anomly	93313	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93314	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93315	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93316	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93317	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93318	Echo Transesophageal Intraop	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93320	Doppler Echo Exam Heart	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93321	Doppler Echo Exam Heart	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93325	Doppler Color Flow Add-On	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33017	Prcrd Drg 6Yr+ W/O Cgen Car	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33018	Prcrd Drg 0-5Yr Or W/Anomly	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	75989	Abscess Drainage Under X- Ray	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	76380	Cat Scan Follow-Up Study	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	76942	Echo Guide For Biopsy	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	76998	Us Guide Intraop	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93303	Echo Transthoracic	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93304	Echo Transthoracic	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93306	Tte W/Doppler Complete	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93307	Tte W/O Doppler Complete	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93308	Tte F-Up Or Lmtd	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93312	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93313	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93314	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93315	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93316	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93317	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93318	Echo Transesophageal Intraop	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93320	Doppler Echo Exam Heart	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93321	Doppler Echo Exam Heart	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93325	Doppler Color Flow Add-On	1	CMS Edit
33206	Insert Heart Pm Atrial	33207	Insert Heart Pm Ventricular	1	CMS Edit
33206	Insert Heart Pm Atrial	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
33206	Insert Heart Pm Atrial	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
33206	Insert Heart Pm Atrial	33214	Upgrade Of Pacemaker System	1	CMS Edit



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Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33206	Insert Heart Pm Atrial	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33206	Insert Heart Pm Atrial	33227	Remove&Replace Pm Gen Singl	0	CMS Edit
33206	Insert Heart Pm Atrial	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33206	Insert Heart Pm Atrial	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33206	Insert Heart Pm Atrial	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33206	Insert Heart Pm Atrial	76942	Echo Guide For Biopsy	1	CMS Edit
33206	Insert Heart Pm Atrial	76998	Us Guide Intraop	1	CMS Edit
33206	Insert Heart Pm Atrial	93318	Echo Transesophageal Intraop	1	CMS Edit
33206	Insert Heart Pm Atrial	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33206	Insert Heart Pm Atrial	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33207	Insert Heart Pm Ventricular	33214	Upgrade Of Pacemaker System	1	CMS Edit
33207	Insert Heart Pm Ventricular	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33207	Insert Heart Pm Ventricular	33227	Remove&Replace Pm Gen Singl	0	CMS Edit
33207	Insert Heart Pm Ventricular	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33207	Insert Heart Pm Ventricular	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33207	Insert Heart Pm Ventricular	33289	Tcat Impl Wrls P-Art Prs Snr	1	CMS Edit
33207	Insert Heart Pm Ventricular	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33207	Insert Heart Pm Ventricular	76942	Echo Guide For Biopsy	1	CMS Edit
33207	Insert Heart Pm Ventricular	76998	Us Guide Intraop	1	CMS Edit
33207	Insert Heart Pm Ventricular	93318	Echo Transesophageal Intraop	1	CMS Edit
33207	Insert Heart Pm Ventricular	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33207	Insert Heart Pm Ventricular	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33206	Insert Heart Pm Atrial	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33207	Insert Heart Pm Ventricular	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33214	Upgrade Of Pacemaker System	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33227	Remove&Replace Pm Gen Singl	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	33274	Tcat Insj/Rpl Perm Ldls Pm	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33208	Insrt Heart Pm Atrial & Vent	76942	Echo Guide For Biopsy	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	76998	Us Guide Intraop	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	93318	Echo Transesophageal Intraop	1	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33208	Insrt Heart Pm Atrial & Vent	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33207	Insert Heart Pm Ventricular	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33208	Insrt Heart Pm Atrial & Vent	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33214	Upgrade Of Pacemaker System	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33224	Insert Pacing Lead & Connect	0	CMS Edit
33212	Insert Pulse Gen Sngl Lead	33275	Tcat Rmvl Perm Ldls Pm W/Img	0	CMS Edit
33212	Insert Pulse Gen Sngl Lead	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	76942	Echo Guide For Biopsy	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	76998	Us Guide Intraop	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	93318	Echo Transesophageal Intraop	1	CMS Edit
33212	Insert Pulse Gen Sngl Lead	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33212	Insert Pulse Gen Sngl Lead	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33213	Insert Pulse Gen Dual Leads	33207	Insert Heart Pm Ventricular	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	33208	Insrt Heart Pm Atrial & Vent	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	33214	Upgrade Of Pacemaker System	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	33224	Insert Pacing Lead & Connect	0	CMS Edit
33213	Insert Pulse Gen Dual Leads	33275	Tcat Rmvl Perm Ldls Pm W/Img	0	CMS Edit
33213	Insert Pulse Gen Dual Leads	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	76942	Echo Guide For Biopsy	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	76998	Us Guide Intraop	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	93318	Echo Transesophageal Intraop	1	CMS Edit
33213	Insert Pulse Gen Dual Leads	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33213	Insert Pulse Gen Dual Leads	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33214	Upgrade Of Pacemaker System	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33214	Upgrade Of Pacemaker System	33227	Remove&Replace Pm Gen Sngl	0	CMS Edit
33214	Upgrade Of Pacemaker System	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit



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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33214	Upgrade Of Pacemaker System	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33214	Upgrade Of Pacemaker System	33289	Tcat Impl Wrls P-Art Prs Snr	1	CMS Edit
33214	Upgrade Of Pacemaker System	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33214	Upgrade Of Pacemaker System	76942	Echo Guide For Biopsy	1	CMS Edit
33214	Upgrade Of Pacemaker System	76998	Us Guide Intraop	1	CMS Edit
33214	Upgrade Of Pacemaker System	93318	Echo Transesophageal Intraop	1	CMS Edit
33214	Upgrade Of Pacemaker System	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33214	Upgrade Of Pacemaker System	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	33212	Insert Pulse Gen Sngl Lead	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	33213	Insert Pulse Gen Dual Leads	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	33224	Insert Pacing Lead & Connect	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	33275	Tcat Rmvl Perm Ldls Pm W/Img	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33221	Insert Pulse Gen Mult Leads	76942	Echo Guide For Biopsy	1	CMS Edit
33221	Insert Pulse Gen Mult Leads	76998	Us Guide Intraop	1	CMS Edit
33221	Insert Pulse Gen Mult Leads	93318	Echo Transesophageal Intraop	1	CMS Edit
33221	Insert Pulse Gen Mult Leads	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33221	Insert Pulse Gen Mult Leads	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33224	Insert Pacing Lead & Connect	33227	Remove&Replace Pm Gen Sngl	0	CMS Edit
33224	Insert Pacing Lead & Connect	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33224	Insert Pacing Lead & Connect	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33224	Insert Pacing Lead & Connect	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33224	Insert Pacing Lead & Connect	33231	Insrt Pulse Gen W/Mult Leads	1	CMS Edit
33224	Insert Pacing Lead & Connect	33240	Insrt Pulse Gen W/Sngl Lead	1	CMS Edit
33224	Insert Pacing Lead & Connect	33262	Rmvl & Replc Pulse Gen 1 Lead	1	CMS Edit
33224	Insert Pacing Lead & Connect	33263	Rmvl & Rplcmt Dfb Gen 2 Lead	0	CMS Edit

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33224	Insert Pacing Lead & Connect	33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	0	CMS Edit
33224	Insert Pacing Lead & Connect	33275	Tcat Rmvl Perm Ldls Pm W/Img	1	CMS Edit
33224	Insert Pacing Lead & Connect	75860	Vein X-Ray Neck	0	CMS Edit
33224	Insert Pacing Lead & Connect	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33224	Insert Pacing Lead & Connect	76942	Echo Guide For Biopsy	1	CMS Edit
33224	Insert Pacing Lead & Connect	76998	Us Guide Intraop	1	CMS Edit
33224	Insert Pacing Lead & Connect	93318	Echo Transesophageal Intraop	1	CMS Edit
33224	Insert Pacing Lead & Connect	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33224	Insert Pacing Lead & Connect	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33225	L Ventric Pacing Lead Add-On	75860	Vein X-Ray Neck	0	CMS Edit
33225	L Ventric Pacing Lead Add-On	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33225	L Ventric Pacing Lead Add-On	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33225	L Ventric Pacing Lead Add-On	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33227	Remove&Replace Pm Gen Singl	33212	Insert Pulse Gen Sngl Lead	0	CMS Edit
33227	Remove&Replace Pm Gen Singl	33213	Insert Pulse Gen Dual Leads	0	CMS Edit
33227	Remove&Replace Pm Gen Singl	33221	Insert Pulse Gen Mult Leads	0	CMS Edit
33227	Remove&Replace Pm Gen Singl	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33227	Remove&Replace Pm Gen Singl	76942	Echo Guide For Biopsy	1	CMS Edit
33227	Remove&Replace Pm Gen Singl	76998	Us Guide Intraop	1	CMS Edit
33227	Remove&Replace Pm Gen Singl	93318	Echo Transesophageal Intraop	1	CMS Edit
33227	Remove&Replace Pm Gen Singl	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33227	Remove&Replace Pm Gen Singl	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	33212	Insert Pulse Gen Sngl Lead	0	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	33213	Insert Pulse Gen Dual Leads	0	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	33221	Insert Pulse Gen Mult Leads	0	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	33227	Remove&Replace Pm Gen Singl	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33228	Remv&Replc Pm Gen Dual Lead	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	76942	Echo Guide For Biopsy	1	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	76998	Us Guide Intraop	1	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	93318	Echo Transesophageal Intraop	1	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
33228	Remv&Replc Pm Gen Dual Lead	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	33212	Insert Pulse Gen Sngl Lead	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	33213	Insert Pulse Gen Dual Leads	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	33221	Insert Pulse Gen Mult Leads	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	33227	Remove&Replace Pm Gen Singl	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	76942	Echo Guide For Biopsy	1	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	76998	Us Guide Intraop	1	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	93318	Echo Transesophageal Intraop	1	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
33229	Remv&Replc Pm Gen Mult Leads	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	76942	Echo Guide For Biopsy	1	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	76998	Us Guide Intraop	1	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	93318	Echo Transesophageal Intraop	1	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
33230	Insrt Pulse Gen W/Dual Leads	0572T	Insertion Ss Dfb Electrode	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33231	Insrt Pulse Gen W/Mult Leads	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	76942	Echo Guide For Biopsy	1	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	76998	Us Guide Intraop	1	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	93318	Echo Transesophageal Intraop	1	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33231	Insrt Pulse Gen W/Mult Leads	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	76942	Echo Guide For Biopsy	1	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	76998	Us Guide Intraop	1	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	93318	Echo Transesophageal Intraop	1	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33240	Insrt Pulse Gen W/Singl Lead	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33262	Rmvl& Replc Pulse Gen 1 Lead	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33263	Rmvl & Rplcmt Dfb Gen 2 Lead	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	76942	Echo Guide For Biopsy	1	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	76998	Us Guide Intraop	1	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	93318	Echo Transesophageal Intraop	1	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
33249	Insj/Rplcmt Defib W/Lead(S)	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33262	Rmvl& Replc Pulse Gen 1 Lead	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	76942	Echo Guide For Biopsy	1	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	76998	Us Guide Intraop	1	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	93318	Echo Transesophageal Intraop	1	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	0571T	Insj/Rplcmt lcds Ss Eltrd	0	CMS Edit
33262	Rmvl& Replc Pulse Gen 1 Lead	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	76942	Echo Guide For Biopsy	1	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	76998	Us Guide Intraop	1	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	93318	Echo Transesophageal Intraop	1	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	0571T	Insj/Rplcmt lcds Ss Eltrd	0	CMS Edit
33263	Rmvl & Rplcmt Dfb Gen 2 Lead	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	76942	Echo Guide For Biopsy	1	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	76998	Us Guide Intraop	1	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	93318	Echo Transesophageal Intraop	1	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	0571T	Insj/Rplcmt lcds Ss Eltrd	0	CMS Edit
33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	0572T	Insertion Ss Dfb Electrode	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33270	Ins/Rep Subq Defibrillator	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33270	Ins/Rep Subq Defibrillator	76942	Echo Guide For Biopsy	1	CMS Edit
33270	Ins/Rep Subq Defibrillator	76998	Us Guide Intraop	1	CMS Edit
33270	Ins/Rep Subq Defibrillator	93318	Echo Transesophageal Intraop	1	CMS Edit
33270	Ins/Rep Subq Defibrillator	0571T	Insi/Rplcmt Icds Ss Eltrd	0	CMS Edit
33270	Ins/Rep Subq Defibrillator	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33206	Insert Heart Pm Atrial	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33207	Insert Heart Pm Ventricular	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33214	Upgrade Of Pacemaker System	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33224	Insert Pacing Lead & Connect	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33225	L Ventric Pacing Lead Add- On	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33227	Remove&Replace Pm Gen Singl	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33275	Tcat Rmvl Perm Ldls Pm W/Img	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	33289	Tcat Impl Wrls P-Art Prs Snr	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	75820	Vein X-Ray Arm/Leg	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	75822	Vein X-Ray Arms/Legs	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	76380	Cat Scan Follow-Up Study	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	76937	Us Guide Vascular Access	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	76942	Echo Guide For Biopsy	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	76998	Us Guide Intraop	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93318	Echo Transesophageal Intraop	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93451	Right Heart Cath	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93456	R Hrt Coronary Artery Angio	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93457	R Hrt Art/Grft Angio	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33274	Tcat Insj/Rpl Perm Ldls Pm	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	0516T	Insj Wcs Lv Eltrd Only	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93594	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33274	Tcat Insj/Rpl Perm Ldls Pm	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	33214	Upgrade Of Pacemaker System	0	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	33227	Remove&Replace Pm Gen Singl	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	33228	Remv&Replc Pm Gen Dual Lead	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	33229	Remv&Replc Pm Gen Mult Leads	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75635	Ct Angio Abdominal Arteries	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75705	Artery X-Rays Spine	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75710	Artery X-Rays Arm/Leg	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75716	Artery X-Rays Arms/Legs	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75726	Artery X-Rays Abdomen	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75731	Artery X-Rays Adrenal Gland	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75733	Artery X-Rays Adrenals	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75736	Artery X-Rays Pelvis	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75741	Artery X-Rays Lung	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75743	Artery X-Rays Lungs	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33275	Tcat Rmvl Perm Ldls Pm W/Img	75746	Artery X-Rays Lung	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75756	Artery X-Rays Chest	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75774	Artery X-Ray Each Vessel	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75820	Vein X-Ray Arm/Leg	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75822	Vein X-Ray Arms/Legs	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75825	Vein X-Ray Trunk	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75827	Vein X-Ray Chest	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75831	Vein X-Ray Kidney	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75833	Vein X-Ray Kidneys	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75860	Vein X-Ray Neck	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75870	Vein X-Ray Skull	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75872	Vein X-Ray Skull Epidural	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75880	Vein X-Ray Eye Socket	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75891	Vein X-Ray Liver	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	75893	Venous Sampling By Catheter	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	76380	Cat Scan Follow-Up Study	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	76937	Us Guide Vascular Access	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33275	Tcat Rmvl Perm Ldls Pm W/Img	76942	Echo Guide For Biopsy	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	76998	Us Guide Intraop	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93318	Echo Transesophageal Intraop	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93451	Right Heart Cath	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93456	R Hrt Coronary Artery Angio	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93457	R Hrt Art/Grft Angio	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0710T	N-Invas Artl Plaq Alys	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0711T	N-Nvs Artl Plaq Alys Dat Prp	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0712T	N-Nvs Artl Plaq Alys Quan	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	0713T	N-Nvs Artl Plaq Alys Rvw I&R	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93594	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33275	Tcat Rmvl Perm Ldls Pm W/Img	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	33227	Remove&Replace Pm Gen Sngl	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33289	Tcat Impl Wrls P-Art Prs Snr	33228	Remv&Replc Pm Gen Dual Lead	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	33229	Remv&Replc Pm Gen Mult Leads	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	75741	Artery X-Rays Lung	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	75743	Artery X-Rays Lungs	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	75746	Artery X-Rays Lung	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	76000	Fluoroscopy <1 Hr Phys/Qhp	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	76942	Echo Guide For Biopsy	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	76998	Us Guide Intraop	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93318	Echo Transesophageal Intraop	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93451	Right Heart Cath	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93453	R&L Hrt Cath W/Ventriclgrphy	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93456	R Hrt Coronary Artery Angio	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93457	R Hrt Art/Grft Angio	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93460	R&L Hrt Art/Ventricle Angio	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93461	R&L Hrt Art/Ventricle Angio	0	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93594	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
33289	Tcat Impl Wrls P-Art Prs Snr	93597	R&L Hrt Cath Chd Abnl Nt Cnj	0	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93306	Tte W/Doppler Complete	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93307	Tte W/O Doppler Complete	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93308	Tte F-Up Or Lmtd	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93312	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93313	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93314	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93315	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93316	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93317	Echo Transesophageal	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93318	Echo Transesophageal Intraop	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93320	Doppler Echo Exam Heart	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93321	Doppler Echo Exam Heart	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93325	Doppler Color Flow Add-On	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93451	Right Heart Cath	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93452	Left Hrt Cath W/Ventrlgrphy	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33477	Implant Tcat Pulm Vlv Perq	93454	Coronary Artery Angio S&I	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93456	R Hrt Coronary Artery Angio	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93457	R Hrt Art/Grft Angio	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
33477	Implant Tcat Pulm Vlv Perq	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
70010	Contrast X-Ray Of Brain	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70010	Contrast X-Ray Of Brain	77001	Fluoroguide For Vein Device	1	CMS Edit
70010	Contrast X-Ray Of Brain	77002	Needle Localization By Xray	1	CMS Edit
70015	Contrast X-Ray Of Brain	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70015	Contrast X-Ray Of Brain	77001	Fluoroguide For Vein Device	1	CMS Edit
70015	Contrast X-Ray Of Brain	77002	Needle Localization By Xray	1	CMS Edit
70110	X-Ray Exam Of Jaw 4/> Views	70100	X-Ray Exam Of Jaw <4Views	0	CMS Edit
70130	X-Ray Exam Of Mastoids	70120	X-Ray Exam Of Mastoids	1	CMS Edit
70150	X-Ray Exam Of Facial Bones	70140	X-Ray Exam Of Facial Bones	0	CMS Edit
70170	X-Ray Exam Of Tear Duct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70170	X-Ray Exam Of Tear Duct	77001	Fluoroguide For Vein Device	1	CMS Edit
70170	X-Ray Exam Of Tear Duct	77002	Needle Localization By Xray	1	CMS Edit
70170	X-Ray Exam Of Tear Duct	78660	Nuclear Exam Of Tear Flow	0	CMS Edit
70220	X-Ray Exam Of Sinuses	70210	X-Ray Exam Of Sinuses	0	CMS Edit
70260	X-Ray Exam Of Skull	70250	X-Ray Exam Of Skull	0	CMS Edit
70310	X-Ray Exam Of Teeth	70300	X-Ray Exam Of Teeth	0	CMS Edit
70320	Full Mouth X-Ray Of Teeth	70300	X-Ray Exam Of Teeth	1	CMS Edit
70320	Full Mouth X-Ray Of Teeth	70310	X-Ray Exam Of Teeth	1	CMS Edit
70330	X-Ray Exam Of Jaw Joints	70328	X-Ray Exam Of Jaw Joint	1	CMS Edit
70332	X-Ray Exam Of Jaw Joint	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70332	X-Ray Exam Of Jaw Joint	77001	Fluoroguide For Vein Device	1	CMS Edit
70332	X-Ray Exam Of Jaw Joint	77002	Needle Localization By Xray	1	CMS Edit
70355	Panoramic X-Ray Of Jaws	70300	X-Ray Exam Of Teeth	0	CMS Edit
70355	Panoramic X-Ray Of Jaws	70310	X-Ray Exam Of Teeth	0	CMS Edit
70355	Panoramic X-Ray Of Jaws	70320	Full Mouth X-Ray Of Teeth	0	CMS Edit
70370	Throat X-Ray & Fluoroscopy	70360	X-Ray Exam Of Neck	0	CMS Edit
70370	Throat X-Ray & Fluoroscopy	74210	X-Ray Xm Phrnx&/Crv Esoph C+	1	CMS Edit
70370	Throat X-Ray & Fluoroscopy	74230	X-Ray Xm Swlng Funcj C+	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70370	Throat X-Ray & Fluoroscopy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70370	Throat X-Ray & Fluoroscopy	77001	Fluoroguide For Vein Device	1	CMS Edit
70370	Throat X-Ray & Fluoroscopy	77002	Needle Localization By Xray	1	CMS Edit
70371	Speech Evaluation Complex	70370	Throat X-Ray & Fluoroscopy	0	CMS Edit
70371	Speech Evaluation Complex	74210	X-Ray Xm PhrnX&/Crv Esoph C+	0	CMS Edit
70371	Speech Evaluation Complex	74230	X-Ray Xm Swlng Funcj C+	0	CMS Edit
70371	Speech Evaluation Complex	74240	X-Ray Xm Upr Gi Trc 1Cntrst	0	EVC Edit
70371	Speech Evaluation Complex	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70371	Speech Evaluation Complex	77001	Fluoroguide For Vein Device	1	CMS Edit
70371	Speech Evaluation Complex	77002	Needle Localization By Xray	1	CMS Edit
70390	X-Ray Exam Of Salivary Duct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70390	X-Ray Exam Of Salivary Duct	77001	Fluoroguide For Vein Device	1	CMS Edit
70390	X-Ray Exam Of Salivary Duct	77002	Needle Localization By Xray	1	CMS Edit
70450	Ct Head/Brain W/O Dye	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
70450	Ct Head/Brain W/O Dye	70481	Ct Orbit/Ear/Fossa W/Dye	1	CMS Edit
70450	Ct Head/Brain W/O Dye	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	1	CMS Edit
70450	Ct Head/Brain W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70460	Ct Head/Brain W/Dye	70450	Ct Head/Brain W/O Dye	0	CMS Edit
70460	Ct Head/Brain W/Dye	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
70460	Ct Head/Brain W/Dye	70481	Ct Orbit/Ear/Fossa W/Dye	1	CMS Edit
70460	Ct Head/Brain W/Dye	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	1	CMS Edit
70460	Ct Head/Brain W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70460	Ct Head/Brain W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70460	Ct Head/Brain W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70460	Ct Head/Brain W/Dye	76998	Us Guide Intraop	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	70450	Ct Head/Brain W/O Dye	0	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	70460	Ct Head/Brain W/Dye	0	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	70481	Ct Orbit/Ear/Fossa W/Dye	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70470	Ct Head/Brain W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70470	Ct Head/Brain W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70480	Ct Orbit/Ear/Fossa W/O Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70480	Ct Orbit/Ear/Fossa W/O Dye	70543	Mri Orbt/Fac/Nck W/O &W/Dye	0	EVC Edit
70480	Ct Orbit/Ear/Fossa W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	70480	Ct Orbit/Ear/Fossa W/O Dye	0	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	0	EVC Edit
70481	Ct Orbit/Ear/Fossa W/Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70481	Ct Orbit/Ear/Fossa W/Dye	70543	Mri Orbt/Fac/Nck W/O &W/Dye	0	EVC Edit
70481	Ct Orbit/Ear/Fossa W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	76998	Us Guide Intraop	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70481	Ct Orbit/Ear/Fossa W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	70480	Ct Orbit/Ear/Fossa W/O Dye	0	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	70481	Ct Orbit/Ear/Fossa W/Dye	0	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	0	EVC Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	70543	Mri Orbt/Fac/Nck W/O &W/Dye	0	EVC Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70482	Ct Orbit/Ear/Fossa W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70486	Ct Maxillofacial W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70487	Ct Maxillofacial W/Dye	70486	Ct Maxillofacial W/O Dye	0	CMS Edit
70487	Ct Maxillofacial W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70487	Ct Maxillofacial W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70487	Ct Maxillofacial W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70487	Ct Maxillofacial W/Dye	76998	Us Guide Intraop	1	CMS Edit
70487	Ct Maxillofacial W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70487	Ct Maxillofacial W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	70487	Ct Maxillofacial W/Dye	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70488	Ct Maxillofacial W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70490	Ct Soft Tissue Neck W/O Dye	70540	Mri Orbit/Face/Neck W/O Dye	0	EVC Edit
70490	Ct Soft Tissue Neck W/O Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70490	Ct Soft Tissue Neck W/O Dye	70543	Mri Orbt/Fac/Nck W/O &W/Dye	0	EVC Edit
70490	Ct Soft Tissue Neck W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70490	Ct Soft Tissue Neck W/O Dye	78072	Parathyrd Planar W/Spect&Ct	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	70490	Ct Soft Tissue Neck W/O Dye	0	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	0	EVC Edit
70491	Ct Soft Tissue Neck W/Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70491	Ct Soft Tissue Neck W/Dye	70543	Mri Orbt/Fac/Nck W/O &W/Dye	0	EVC Edit
70491	Ct Soft Tissue Neck W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	76998	Us Guide Intraop	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70491	Ct Soft Tissue Neck W/Dye	78072	Parathyrd Planar W/Spect&Ct	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	70491	Ct Soft Tissue Neck W/Dye	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70492	Ct Sft Tsue Nck W/O & W/Dye	70542	Mri Orbit/Face/Neck W/Dye	0	EVC Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	70543	Mri Orbt/Fac/Nck W/O & W/Dye	0	EVC Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70492	Ct Sft Tsue Nck W/O & W/Dye	78072	Parathyrd Planar W/Spect&Ct	1	CMS Edit
70496	Ct Angiography Head	70450	Ct Head/Brain W/O Dye	1	CMS Edit
70496	Ct Angiography Head	70460	Ct Head/Brain W/Dye	1	CMS Edit
70496	Ct Angiography Head	70470	Ct Head/Brain W/O & W/Dye	1	CMS Edit
70496	Ct Angiography Head	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70496	Ct Angiography Head	76376	3D Render W/Intrp Postproces	0	CMS Edit
70496	Ct Angiography Head	76377	3D Render W/Intrp Postproces	0	CMS Edit
70496	Ct Angiography Head	76380	Cat Scan Follow-Up Study	1	CMS Edit
70496	Ct Angiography Head	76942	Echo Guide For Biopsy	1	CMS Edit
70496	Ct Angiography Head	76998	Us Guide Intraop	1	CMS Edit
70496	Ct Angiography Head	77001	Fluoroguide For Vein Device	1	CMS Edit
70496	Ct Angiography Head	77002	Needle Localization By Xray	1	CMS Edit
70498	Ct Angiography Neck	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
70498	Ct Angiography Neck	70491	Ct Soft Tissue Neck W/Dye	1	CMS Edit
70498	Ct Angiography Neck	70492	Ct Sft Tsue Nck W/O & W/Dye	1	CMS Edit
70498	Ct Angiography Neck	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70498	Ct Angiography Neck	76376	3D Render W/Intrp Postproces	0	CMS Edit
70498	Ct Angiography Neck	76377	3D Render W/Intrp Postproces	0	CMS Edit
70498	Ct Angiography Neck	76380	Cat Scan Follow-Up Study	1	CMS Edit
70498	Ct Angiography Neck	76942	Echo Guide For Biopsy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70498	Ct Angiography Neck	76998	Us Guide Intraop	1	CMS Edit
70498	Ct Angiography Neck	77001	Fluoroguide For Vein Device	1	CMS Edit
70498	Ct Angiography Neck	77002	Needle Localization By Xray	1	CMS Edit
70540	Mri Orbit/Face/Neck W/O Dye	70547	Mr Angiography Neck W/O Dye	1	CMS Edit
70540	Mri Orbit/Face/Neck W/O Dye	70548	Mr Angiography Neck W/Dye	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	76998	Us Guide Intraop	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70542	Mri Orbit/Face/Neck W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	70540	Mri Orbit/Face/Neck W/O Dye	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	70542	Mri Orbit/Face/Neck W/Dye	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	76998	Us Guide Intraop	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70543	Mri Orbt/Fac/Nck W/O &W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70544	Mr Angiography Head W/O Dye	70496	Ct Angiography Head	0	EVC Edit
70544	Mr Angiography Head W/O Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit
70544	Mr Angiography Head W/O Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
70545	Mr Angiography Head W/Dye	70496	Ct Angiography Head	0	EVC Edit
70545	Mr Angiography Head W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70545	Mr Angiography Head W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70545	Mr Angiography Head W/Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit
70545	Mr Angiography Head W/Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
70545	Mr Angiography Head W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70545	Mr Angiography Head W/Dye	76998	Us Guide Intraop	1	CMS Edit
70545	Mr Angiography Head W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70545	Mr Angiography Head W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	70496	Ct Angiography Head	0	EVC Edit
70546	Mr Angiograph Head W/O&W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	70552	Mri Brain Stem W/Dye	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70546	Mr Angiograph Head W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70547	Mr Angiography Neck W/O Dye	70498	Ct Angiography Neck	0	EVC Edit
70547	Mr Angiography Neck W/O Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70547	Mr Angiography Neck W/O Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
70547	Mr Angiography Neck W/O Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
70547	Mr Angiography Neck W/O Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70547	Mr Angiography Neck W/O Dye	76998	Us Guide Intraop	1	CMS Edit
70547	Mr Angiography Neck W/O Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70547	Mr Angiography Neck W/O Dye	77002	Needle Localization By Xray	1	CMS Edit
70548	Mr Angiography Neck W/Dye	70498	Ct Angiography Neck	0	EVC Edit
70548	Mr Angiography Neck W/Dye	70547	Mr Angiography Neck W/O Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70548	Mr Angiography Neck W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70548	Mr Angiography Neck W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
70548	Mr Angiography Neck W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
70548	Mr Angiography Neck W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70548	Mr Angiography Neck W/Dye	76998	Us Guide Intraop	1	CMS Edit
70548	Mr Angiography Neck W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70548	Mr Angiography Neck W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	70498	Ct Angiography Neck	0	EVC Edit
70549	Mr Angiograph Neck W/O&W/Dye	70547	Mr Angiography Neck W/O Dye	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	70548	Mr Angiography Neck W/Dye	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70549	Mr Angiograph Neck W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70551	Mri Brain Stem W/O Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70551	Mri Brain Stem W/O Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70551	Mri Brain Stem W/O Dye	70555	Fmri Brain By Phys/Psych	1	CMS Edit
70551	Mri Brain Stem W/O Dye	70557	Mri Brain W/O Dye	1	CMS Edit
70552	Mri Brain Stem W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70552	Mri Brain Stem W/Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70552	Mri Brain Stem W/Dye	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70552	Mri Brain Stem W/Dye	70554	Fmri Brain By Tech	1	CMS Edit
70552	Mri Brain Stem W/Dye	70555	Fmri Brain By Phys/Psych	1	CMS Edit
70552	Mri Brain Stem W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70552	Mri Brain Stem W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70552	Mri Brain Stem W/Dye	76998	Us Guide Intraop	1	CMS Edit
70552	Mri Brain Stem W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70552	Mri Brain Stem W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70546	Mr Angiograph Head W/O&W/Dye	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70552	Mri Brain Stem W/Dye	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70554	Fmri Brain By Tech	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	70555	Fmri Brain By Phys/Psych	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70553	Mri Brain Stem W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70554	Fmri Brain By Tech	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70554	Fmri Brain By Tech	70557	Mri Brain W/O Dye	1	CMS Edit
70554	Fmri Brain By Tech	70558	Mri Brain W/Dye	1	CMS Edit
70554	Fmri Brain By Tech	70559	Mri Brain W/O & W/Dye	1	CMS Edit
70555	Fmri Brain By Phys/Psych	70554	Fmri Brain By Tech	1	CMS Edit
70555	Fmri Brain By Phys/Psych	70557	Mri Brain W/O Dye	1	CMS Edit
70555	Fmri Brain By Phys/Psych	70558	Mri Brain W/Dye	1	CMS Edit
70555	Fmri Brain By Phys/Psych	70559	Mri Brain W/O & W/Dye	1	CMS Edit
70557	Mri Brain W/O Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70557	Mri Brain W/O Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70557	Mri Brain W/O Dye	70546	Mr Angiograph Head W/O&W/Dye	1	CMS Edit
70557	Mri Brain W/O Dye	70552	Mri Brain Stem W/Dye	1	CMS Edit
70557	Mri Brain W/O Dye	70553	Mri Brain Stem W/O & W/Dye	1	CMS Edit
70557	Mri Brain W/O Dye	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
70558	Mri Brain W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70558	Mri Brain W/Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70558	Mri Brain W/Dye	70546	Mr Angiograph Head W/O&W/Dye	1	CMS Edit
70558	Mri Brain W/Dye	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70558	Mri Brain W/Dye	70552	Mri Brain Stem W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
70558	Mri Brain W/Dye	70553	Mri Brain Stem W/O & W/Dye	1	CMS Edit
70558	Mri Brain W/Dye	70557	Mri Brain W/O Dye	1	CMS Edit
70558	Mri Brain W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70558	Mri Brain W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70558	Mri Brain W/Dye	76998	Us Guide Intraop	1	CMS Edit
70558	Mri Brain W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70558	Mri Brain W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70558	Mri Brain W/Dye	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70544	Mr Angiography Head W/O Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70545	Mr Angiography Head W/Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70546	Mr Angiograph Head W/O&W/Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70551	Mri Brain Stem W/O Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70552	Mri Brain Stem W/Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70553	Mri Brain Stem W/O & W/Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70557	Mri Brain W/O Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	70558	Mri Brain W/Dye	1	CMS Edit
70559	Mri Brain W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
70559	Mri Brain W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
70559	Mri Brain W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
70559	Mri Brain W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
70559	Mri Brain W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
70559	Mri Brain W/O & W/Dye	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
71045	X-Ray Exam Chest 1 View	0175T	Cad Cxr Remote	1	CMS Edit
71046	X-Ray Exam Chest 2 Views	0175T	Cad Cxr Remote	1	CMS Edit
71046	X-Ray Exam Chest 2 Views	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71047	X-Ray Exam Chest 3 Views	0175T	Cad Cxr Remote	1	CMS Edit
71047	X-Ray Exam Chest 3 Views	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71047	X-Ray Exam Chest 3 Views	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
71047	X-Ray Exam Chest 3 Views	71101	X-Ray Exam Unilat Ribs/Chest	1	CMS Edit
71048	X-Ray Exam Chest 4+ Views	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71048	X-Ray Exam Chest 4+ Views	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
71048	X-Ray Exam Chest 4+ Views	71047	X-Ray Exam Chest 3 Views	1	CMS Edit
71048	X-Ray Exam Chest 4+ Views	71101	X-Ray Exam Unilat Ribs/Chest	1	CMS Edit
71048	X-Ray Exam Chest 4+ Views	0175T	Cad Cxr Remote	1	CMS Edit
71100	X-Ray Exam Ribs Uni 2 Views	71045	X-Ray Exam Chest 1 View	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
71101	X-Ray Exam Unilat Ribs/Chest	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71101	X-Ray Exam Unilat Ribs/Chest	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
71101	X-Ray Exam Unilat Ribs/Chest	71100	X-Ray Exam Ribs Uni 2 Views	0	CMS Edit
71110	X-Ray Exam Ribs Bil 3 Views	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71110	X-Ray Exam Ribs Bil 3 Views	71100	X-Ray Exam Ribs Uni 2 Views	0	CMS Edit
71110	X-Ray Exam Ribs Bil 3 Views	71101	X-Ray Exam Unilat Ribs/Chest	0	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71045	X-Ray Exam Chest 1 View	1	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71047	X-Ray Exam Chest 3 Views	1	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71048	X-Ray Exam Chest 4+ Views	1	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71100	X-Ray Exam Ribs Uni 2 Views	0	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71101	X-Ray Exam Unilat Ribs/Chest	0	CMS Edit
71111	X-Ray Exam Ribs/Chest4/> Vws	71110	X-Ray Exam Ribs Bil 3 Views	0	CMS Edit
71250	Ct Thorax Dx C-	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
71250	Ct Thorax Dx C-	71550	Mri Chest W/O Dye	0	EVC Edit
71250	Ct Thorax Dx C-	71551	Mri Chest W/Dye	0	EVC Edit
71250	Ct Thorax Dx C-	71552	Mri Chest W/O & W/Dye	0	EVC Edit
71250	Ct Thorax Dx C-	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
71250	Ct Thorax Dx C-	76380	Cat Scan Follow-Up Study	1	CMS Edit
71260	Ct Thorax Dx C+	71250	Ct Thorax Dx C-	0	CMS Edit
71260	Ct Thorax Dx C+	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
71260	Ct Thorax Dx C+	71550	Mri Chest W/O Dye	0	EVC Edit
71260	Ct Thorax Dx C+	71551	Mri Chest W/Dye	0	EVC Edit
71260	Ct Thorax Dx C+	71552	Mri Chest W/O & W/Dye	0	EVC Edit
71260	Ct Thorax Dx C+	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
71260	Ct Thorax Dx C+	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71260	Ct Thorax Dx C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
71260	Ct Thorax Dx C+	76942	Echo Guide For Biopsy	1	CMS Edit
71260	Ct Thorax Dx C+	76998	Us Guide Intraop	1	CMS Edit
71260	Ct Thorax Dx C+	77001	Fluoroguide For Vein Device	1	CMS Edit
71260	Ct Thorax Dx C+	77002	Needle Localization By Xray	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
71270	Ct Thorax Dx C-/C+	71250	Ct Thorax Dx C-	0	CMS Edit
71270	Ct Thorax Dx C-/C+	71260	Ct Thorax Dx C+	0	CMS Edit
71270	Ct Thorax Dx C-/C+	71550	Mri Chest W/O Dye	0	EVC Edit
71270	Ct Thorax Dx C-/C+	71551	Mri Chest W/Dye	0	EVC Edit
71270	Ct Thorax Dx C-/C+	71552	Mri Chest W/O & W/Dye	0	EVC Edit
71270	Ct Thorax Dx C-/C+	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
71270	Ct Thorax Dx C-/C+	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71270	Ct Thorax Dx C-/C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
71270	Ct Thorax Dx C-/C+	76942	Echo Guide For Biopsy	1	CMS Edit
71270	Ct Thorax Dx C-/C+	76998	Us Guide Intraop	1	CMS Edit
71270	Ct Thorax Dx C-/C+	77001	Fluoroguide For Vein Device	1	CMS Edit
71270	Ct Thorax Dx C-/C+	77002	Needle Localization By Xray	1	CMS Edit
71270	Ct Thorax Dx C-/C+	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
71270	Ct Thorax Dx C-/C+	78830	Rp Locljz Tum Spect W/Ct 1	0	CMS Edit
71270	Ct Thorax Dx C-/C+	78831	Rp Locljz Tum Spect 2 Areas	0	CMS Edit
71270	Ct Thorax Dx C-/C+	78832	Rp Locljz Tum Spect W/Ct 2	0	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	71270	Ct Thorax Dx C-/C+	0	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	76380	Cat Scan Follow-Up Study	1	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	78830	Rp Locljz Tum Spect W/Ct 1	0	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	78831	Rp Locljz Tum Spect 2 Areas	0	CMS Edit
71271	Ct Thorax Lung Cancer Scr C-	78832	Rp Locljz Tum Spect W/Ct 2	0	CMS Edit
71275	Ct Angiography Chest	71250	Ct Thorax Dx C-	1	CMS Edit
71275	Ct Angiography Chest	71260	Ct Thorax Dx C+	1	CMS Edit
71275	Ct Angiography Chest	71270	Ct Thorax Dx C-/C+	1	CMS Edit
71275	Ct Angiography Chest	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
71275	Ct Angiography Chest	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71275	Ct Angiography Chest	76376	3D Render W/Intrp Postproces	0	CMS Edit
71275	Ct Angiography Chest	76377	3D Render W/Intrp Postproces	0	CMS Edit
71275	Ct Angiography Chest	76380	Cat Scan Follow-Up Study	1	CMS Edit
71275	Ct Angiography Chest	76942	Echo Guide For Biopsy	1	CMS Edit
71275	Ct Angiography Chest	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
71275	Ct Angiography Chest	77001	Fluoroguide For Vein Device	1	CMS Edit
71275	Ct Angiography Chest	77002	Needle Localization By Xray	1	CMS Edit
71275	Ct Angiography Chest	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
71275	Ct Angiography Chest	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
71275	Ct Angiography Chest	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
71275	Ct Angiography Chest	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
71551	Mri Chest W/Dye	71550	Mri Chest W/O Dye	1	CMS Edit
71551	Mri Chest W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71551	Mri Chest W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
71551	Mri Chest W/Dye	76998	Us Guide Intraop	1	CMS Edit
71551	Mri Chest W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
71551	Mri Chest W/Dye	77002	Needle Localization By Xray	1	CMS Edit
71552	Mri Chest W/O & W/Dye	71550	Mri Chest W/O Dye	1	CMS Edit
71552	Mri Chest W/O & W/Dye	71551	Mri Chest W/Dye	1	CMS Edit
71552	Mri Chest W/O & W/Dye	71555	Mri Angio Chest W Or W/O Dye	1	CMS Edit
71552	Mri Chest W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71552	Mri Chest W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
71552	Mri Chest W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
71552	Mri Chest W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
71552	Mri Chest W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	71275	Ct Angiography Chest	0	EVC Edit
71555	Mri Angio Chest W Or W/O Dye	71550	Mri Chest W/O Dye	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	71551	Mri Chest W/Dye	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	76942	Echo Guide For Biopsy	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	76998	Us Guide Intraop	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
71555	Mri Angio Chest W Or W/O Dye	77002	Needle Localization By Xray	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72020	X-Ray Exam Of Spine 1 View	77085	Dxa Bone Density Study	0	EVC Edit
72020	X-Ray Exam Of Spine 1 View	77086	Fracture Assessment Via Dxa	0	EVC Edit
72040	X-Ray Exam Neck Spine 2-3 Vw	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72050	X-Ray Exam Neck Spine 4/5Vws	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72050	X-Ray Exam Neck Spine 4/5Vws	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72052	X-Ray Exam Neck Spine 6/>Vws	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72052	X-Ray Exam Neck Spine 6/>Vws	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72052	X-Ray Exam Neck Spine 6/>Vws	72050	X-Ray Exam Neck Spine 4/5Vws	1	CMS Edit
72070	X-Ray Exam Thorac Spine 2Vws	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72070	X-Ray Exam Thorac Spine 2Vws	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72072	X-Ray Exam Thorac Spine 3Vws	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72072	X-Ray Exam Thorac Spine 3Vws	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72072	X-Ray Exam Thorac Spine 3Vws	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72074	X-Ray Exam Thorac Spine4/>Vw	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72074	X-Ray Exam Thorac Spine4/>Vw	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72074	X-Ray Exam Thorac Spine4/>Vw	72072	X-Ray Exam Thorac Spine 3Vws	1	CMS Edit
72074	X-Ray Exam Thorac Spine4/>Vw	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72080	X-Ray Exam Thoracolmb 2/> Vw	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72081	X-Ray Exam Entire Spi 1 Vw	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72050	X-Ray Exam Neck Spine 4/5Vws	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72052	X-Ray Exam Neck Spine 6/>Vws	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72072	X-Ray Exam Thorac Spine 3Vws	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72081	X-Ray Exam Entire Spi 1 Vw	72074	X-Ray Exam Thorac Spine4/>Vw	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72080	X-Ray Exam Thoracolumb 2/> Vw	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72110	X-Ray Exam L-2 Spine 4/>Vws	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72114	X-Ray Exam L-S Spine Bending	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72120	X-Ray Bend Only L-S Spine	1	CMS Edit
72081	X-Ray Exam Entire Spi 1 Vw	72220	X-Ray Exam Sacrum Tailbone	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72050	X-Ray Exam Neck Spine 4/5Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72052	X-Ray Exam Neck Spine 6/>Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72072	X-Ray Exam Thorac Spine 3Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72074	X-Ray Exam Thorac Spine4/>Vw	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72080	X-Ray Exam Thoracolumb 2/> Vw	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72081	X-Ray Exam Entire Spi 1 Vw	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72110	X-Ray Exam L-2 Spine 4/>Vws	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72114	X-Ray Exam L-S Spine Bending	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72120	X-Ray Bend Only L-S Spine	1	CMS Edit
72082	X-Ray Exam Entire Spi 2/3 Vw	72220	X-Ray Exam Sacrum Tailbone	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72050	X-Ray Exam Neck Spine 4/5Vws	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72083	X-Ray Exam Entire Spi 4/5 Vw	72052	X-Ray Exam Neck Spine 6/>Vws	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72072	X-Ray Exam Thorac Spine 3Vws	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72074	X-Ray Exam Thorac Spine4/>Vw	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72081	X-Ray Exam Entire Spi 1 Vw	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72082	X-Ray Exam Entire Spi 2/3 Vw	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72110	X-Ray Exam L-2 Spine 4/>Vws	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72114	X-Ray Exam L-S Spine Bending	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72120	X-Ray Bend Only L-S Spine	1	CMS Edit
72083	X-Ray Exam Entire Spi 4/5 Vw	72220	X-Ray Exam Sacrum Tailbone	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72040	X-Ray Exam Neck Spine 2-3 Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72050	X-Ray Exam Neck Spine 4/5Vws	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72052	X-Ray Exam Neck Spine 6/>Vws	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72070	X-Ray Exam Thorac Spine 2Vws	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72072	X-Ray Exam Thorac Spine 3Vws	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72074	X-Ray Exam Thorac Spine4/>Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72081	X-Ray Exam Entire Spi 1 Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72082	X-Ray Exam Entire Spi 2/3 Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72083	X-Ray Exam Entire Spi 4/5 Vw	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/> Vw	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72084	X-Ray Exam Entire Spi 6/>Vw	72110	X-Ray Exam L-2 Spine 4/>Vws	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/>Vw	72114	X-Ray Exam L-S Spine Bending	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/>Vw	72120	X-Ray Bend Only L-S Spine	1	CMS Edit
72084	X-Ray Exam Entire Spi 6/>Vw	72220	X-Ray Exam Sacrum Tailbone	1	CMS Edit
72100	X-Ray Exam L-S Spine 2/3 Vws	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72100	X-Ray Exam L-S Spine 2/3 Vws	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72110	X-Ray Exam L-2 Spine 4/>Vws	72020	X-Ray Exam Of Spine 1 View	1	CMS Edit
72110	X-Ray Exam L-2 Spine 4/>Vws	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72110	X-Ray Exam L-2 Spine 4/>Vws	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit
72110	X-Ray Exam L-2 Spine 4/>Vws	72114	X-Ray Exam L-S Spine Bending	1	CMS Edit
72114	X-Ray Exam L-S Spine Bending	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72114	X-Ray Exam L-S Spine Bending	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72114	X-Ray Exam L-S Spine Bending	72100	X-Ray Exam L-S Spine 2/3 Vws	1	CMS Edit
72114	X-Ray Exam L-S Spine Bending	72120	X-Ray Bend Only L-S Spine	1	CMS Edit
72120	X-Ray Bend Only L-S Spine	72080	X-Ray Exam Thoracolmb 2/> Vw	1	CMS Edit
72120	X-Ray Bend Only L-S Spine	72100	X-Ray Exam L-S Spine 2/3 Vws	0	EVC Edit
72120	X-Ray Bend Only L-S Spine	72110	X-Ray Exam L-2 Spine 4/>Vws	0	CMS Edit
72125	Ct Neck Spine W/O Dye	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
72125	Ct Neck Spine W/O Dye	72040	X-Ray Exam Neck Spine 2-3 Vw	0	EVC Edit
72125	Ct Neck Spine W/O Dye	72050	X-Ray Exam Neck Spine 4/5Vws	0	EVC Edit
72125	Ct Neck Spine W/O Dye	72052	X-Ray Exam Neck Spine 6/>Vws	0	EVC Edit
72125	Ct Neck Spine W/O Dye	72240	Myelography Neck Spine	1	CMS Edit
72125	Ct Neck Spine W/O Dye	72270	Myelophy 2/> Spine Regions	1	CMS Edit
72125	Ct Neck Spine W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72126	Ct Neck Spine W/Dye	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72126	Ct Neck Spine W/Dye	72040	X-Ray Exam Neck Spine 2-3 Vw	0	EVC Edit
72126	Ct Neck Spine W/Dye	72050	X-Ray Exam Neck Spine 4/5Vws	0	EVC Edit
72126	Ct Neck Spine W/Dye	72052	X-Ray Exam Neck Spine 6/>Vws	0	EVC Edit
72126	Ct Neck Spine W/Dye	72125	Ct Neck Spine W/O Dye	0	CMS Edit
72126	Ct Neck Spine W/Dye	72240	Myelography Neck Spine	1	CMS Edit
72126	Ct Neck Spine W/Dye	72270	Myelography 2/> Spine Regions	1	CMS Edit
72126	Ct Neck Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72126	Ct Neck Spine W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72126	Ct Neck Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72126	Ct Neck Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72126	Ct Neck Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72126	Ct Neck Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	72040	X-Ray Exam Neck Spine 2-3 Vw	0	EVC Edit
72127	Ct Neck Spine W/O & W/Dye	72125	Ct Neck Spine W/O Dye	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	72126	Ct Neck Spine W/Dye	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	72240	Myelography Neck Spine	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	72270	Myelography 2/> Spine Regions	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72127	Ct Neck Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72128	Ct Chest Spine W/O Dye	72070	X-Ray Exam Thorac Spine 2Vws	0	EVC Edit
72128	Ct Chest Spine W/O Dye	72072	X-Ray Exam Thorac Spine 3Vws	0	EVC Edit
72128	Ct Chest Spine W/O Dye	72074	X-Ray Exam Thorac Spine4/>Vw	0	EVC Edit
72128	Ct Chest Spine W/O Dye	72080	X-Ray Exam Thoracolmb 2/> Vw	0	EVC Edit
72128	Ct Chest Spine W/O Dye	72255	Myelography Thoracic Spine	1	CMS Edit
72128	Ct Chest Spine W/O Dye	72270	Myelography 2/> Spine Regions	1	CMS Edit
72128	Ct Chest Spine W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72129	Ct Chest Spine W/Dye	72070	X-Ray Exam Thorac Spine 2Vws	0	EVC Edit
72129	Ct Chest Spine W/Dye	72072	X-Ray Exam Thorac Spine 3Vws	0	EVC Edit
72129	Ct Chest Spine W/Dye	72074	X-Ray Exam Thorac Spine4/>Vw	0	EVC Edit
72129	Ct Chest Spine W/Dye	72080	X-Ray Exam Thoracolmb 2/> Vw	0	EVC Edit
72129	Ct Chest Spine W/Dye	72128	Ct Chest Spine W/O Dye	1	CMS Edit
72129	Ct Chest Spine W/Dye	72255	Myelography Thoracic Spine	1	CMS Edit
72129	Ct Chest Spine W/Dye	72270	Myelogphy 2/> Spine Regions	1	CMS Edit
72129	Ct Chest Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72129	Ct Chest Spine W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72129	Ct Chest Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72129	Ct Chest Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72129	Ct Chest Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72129	Ct Chest Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	72070	X-Ray Exam Thorac Spine 2Vws	0	EVC Edit
72130	Ct Chest Spine W/O & W/Dye	72072	X-Ray Exam Thorac Spine 3Vws	0	EVC Edit
72130	Ct Chest Spine W/O & W/Dye	72074	X-Ray Exam Thorac Spine4/>Vw	0	EVC Edit
72130	Ct Chest Spine W/O & W/Dye	72080	X-Ray Exam Thoracolmb 2/> Vw	0	EVC Edit
72130	Ct Chest Spine W/O & W/Dye	72128	Ct Chest Spine W/O Dye	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	72129	Ct Chest Spine W/Dye	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	72255	Myelography Thoracic Spine	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	72270	Myelogphy 2/> Spine Regions	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72130	Ct Chest Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72131	Ct Lumbar Spine W/O Dye	72265	Myelography L-S Spine	1	CMS Edit
72131	Ct Lumbar Spine W/O Dye	72270	Myelogphy 2/> Spine Regions	1	CMS Edit
72131	Ct Lumbar Spine W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72132	Ct Lumbar Spine W/Dye	72100	X-Ray Exam L-S Spine 2/3 Vws	0	EVC Edit
72132	Ct Lumbar Spine W/Dye	72110	X-Ray Exam L-2 Spine 4/>Vws	0	EVC Edit
72132	Ct Lumbar Spine W/Dye	72114	X-Ray Exam L-S Spine Bending	0	EVC Edit
72132	Ct Lumbar Spine W/Dye	72120	X-Ray Bend Only L-S Spine	0	EVC Edit
72132	Ct Lumbar Spine W/Dye	72131	Ct Lumbar Spine W/O Dye	0	CMS Edit
72132	Ct Lumbar Spine W/Dye	72265	Myelography L-S Spine	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	72270	Myelophy 2/> Spine Regions	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72132	Ct Lumbar Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	72132	Ct Lumbar Spine W/Dye	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	72265	Myelography L-S Spine	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	72270	Myelophy 2/> Spine Regions	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72133	Ct Lumbar Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72141	Mri Neck Spine W/O Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72141	Mri Neck Spine W/O Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72141	Mri Neck Spine W/O Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72141	Mri Neck Spine W/O Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72142	Mri Neck Spine W/Dye	72141	Mri Neck Spine W/O Dye	0	CMS Edit
72142	Mri Neck Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72142	Mri Neck Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72142	Mri Neck Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72142	Mri Neck Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72142	Mri Neck Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72142	Mri Neck Spine W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72142	Mri Neck Spine W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72142	Mri Neck Spine W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72142	Mri Neck Spine W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72146	Mri Chest Spine W/O Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72146	Mri Chest Spine W/O Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72146	Mri Chest Spine W/O Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72146	Mri Chest Spine W/O Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72147	Mri Chest Spine W/Dye	72146	Mri Chest Spine W/O Dye	0	CMS Edit
72147	Mri Chest Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72147	Mri Chest Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72147	Mri Chest Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72147	Mri Chest Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72147	Mri Chest Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72147	Mri Chest Spine W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72147	Mri Chest Spine W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72147	Mri Chest Spine W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72147	Mri Chest Spine W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72148	Mri Lumbar Spine W/O Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72148	Mri Lumbar Spine W/O Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72148	Mri Lumbar Spine W/O Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72148	Mri Lumbar Spine W/O Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72149	Mri Lumbar Spine W/Dye	72148	Mri Lumbar Spine W/O Dye	0	CMS Edit
72149	Mri Lumbar Spine W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72149	Mri Lumbar Spine W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72149	Mri Lumbar Spine W/Dye	76998	Us Guide Intraop	1	CMS Edit
72149	Mri Lumbar Spine W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72149	Mri Lumbar Spine W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72149	Mri Lumbar Spine W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72149	Mri Lumbar Spine W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72149	Mri Lumbar Spine W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72149	Mri Lumbar Spine W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	72141	Mri Neck Spine W/O Dye	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72156	Mri Neck Spine W/O & W/Dye	72142	Mri Neck Spine W/Dye	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72156	Mri Neck Spine W/O & W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	72146	Mri Chest Spine W/O Dye	0	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	72147	Mri Chest Spine W/Dye	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72157	Mri Chest Spine W/O & W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	72148	Mri Lumbar Spine W/O Dye	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	72149	Mri Lumbar Spine W/Dye	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72158	Mri Lumbar Spine W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72158	Mri Lumbar Spine W/O & W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72141	Mri Neck Spine W/O Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72142	Mri Neck Spine W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72146	Mri Chest Spine W/O Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72147	Mri Chest Spine W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72148	Mri Lumbar Spine W/O Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72149	Mri Lumbar Spine W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72156	Mri Neck Spine W/O & W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72157	Mri Chest Spine W/O & W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	72158	Mri Lumbar Spine W/O & W/Dye	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	0609T	Mrs Disc Pain Acquisj Data	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	0610T	Mrs Disc Pain Transmis Data	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	0611T	Mrs Disc Pain Alg Alys Data	0	CMS Edit
72159	Mr Angio Spine W/O&W/Dye	0612T	Mrs Discogenic Pain I&R	0	CMS Edit
72190	X-Ray Exam Of Pelvis	72170	X-Ray Exam Of Pelvis	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	72192	Ct Pelvis W/O Dye	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	72193	Ct Pelvis W/Dye	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	74177	Ct Abd & Pelv W/Contrast	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72191	Ct Angiograph Pelv W/O&W/Dye	74178	Ct Abd & Pelv 1/> Regns	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72191	Ct Angiograph Pelv W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72192	Ct Pelvis W/O Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
72192	Ct Pelvis W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72193	Ct Pelvis W/Dye	72192	Ct Pelvis W/O Dye	0	CMS Edit
72193	Ct Pelvis W/Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
72193	Ct Pelvis W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72193	Ct Pelvis W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72193	Ct Pelvis W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72193	Ct Pelvis W/Dye	76998	Us Guide Intraop	1	CMS Edit
72193	Ct Pelvis W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72193	Ct Pelvis W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	72192	Ct Pelvis W/O Dye	0	CMS Edit
72194	Ct Pelvis W/O & W/Dye	72193	Ct Pelvis W/Dye	0	CMS Edit
72194	Ct Pelvis W/O & W/Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
72194	Ct Pelvis W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72194	Ct Pelvis W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72195	Mri Pelvis W/O Dye	72192	Ct Pelvis W/O Dye	0	EVC Edit
72195	Mri Pelvis W/O Dye	72193	Ct Pelvis W/Dye	0	EVC Edit
72195	Mri Pelvis W/O Dye	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72196	Mri Pelvis W/Dye	72192	Ct Pelvis W/O Dye	0	EVC Edit
72196	Mri Pelvis W/Dye	72193	Ct Pelvis W/Dye	0	EVC Edit
72196	Mri Pelvis W/Dye	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
72196	Mri Pelvis W/Dye	72195	Mri Pelvis W/O Dye	1	CMS Edit
72196	Mri Pelvis W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72196	Mri Pelvis W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72196	Mri Pelvis W/Dye	76998	Us Guide Intraop	1	CMS Edit
72196	Mri Pelvis W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72196	Mri Pelvis W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	72192	Ct Pelvis W/O Dye	0	EVC Edit
72197	Mri Pelvis W/O & W/Dye	72193	Ct Pelvis W/Dye	0	EVC Edit
72197	Mri Pelvis W/O & W/Dye	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
72197	Mri Pelvis W/O & W/Dye	72195	Mri Pelvis W/O Dye	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	72196	Mri Pelvis W/Dye	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	72198	Mr Angio Pelvis W/O & W/Dye	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	74713	Mri Fetal Ea Addl Gestation	0	CMS Edit
72197	Mri Pelvis W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
72197	Mri Pelvis W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	72191	Ct Angiograph Pelv W/O&W/Dye	0	EVC Edit
72198	Mr Angio Pelvis W/O & W/Dye	72195	Mri Pelvis W/O Dye	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	72196	Mri Pelvis W/Dye	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	74712	Mri Fetal Sngl/1St Gestation	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
72198	Mr Angio Pelvis W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72198	Mr Angio Pelvis W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
72202	X-Ray Exam Si Joints 3/> Vws	72200	X-Ray Exam Si Joints	1	CMS Edit
72240	Myelography Neck Spine	72255	Myelography Thoracic Spine	0	CMS Edit
72240	Myelography Neck Spine	72265	Myelography L-S Spine	0	CMS Edit
72240	Myelography Neck Spine	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72240	Myelography Neck Spine	77001	Fluoroguide For Vein Device	1	CMS Edit
72240	Myelography Neck Spine	77002	Needle Localization By Xray	1	CMS Edit
72255	Myelography Thoracic Spine	72265	Myelography L-S Spine	0	CMS Edit
72255	Myelography Thoracic Spine	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72255	Myelography Thoracic Spine	77001	Fluoroguide For Vein Device	1	CMS Edit
72255	Myelography Thoracic Spine	77002	Needle Localization By Xray	1	CMS Edit
72265	Myelography L-S Spine	72100	X-Ray Exam L-S Spine 2/3 Vws	0	EVC Edit
72265	Myelography L-S Spine	72110	X-Ray Exam L-2 Spine 4/>Vws	0	EVC Edit
72265	Myelography L-S Spine	72114	X-Ray Exam L-S Spine Bending	0	EVC Edit
72265	Myelography L-S Spine	72120	X-Ray Bend Only L-S Spine	0	EVC Edit
72265	Myelography L-S Spine	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72265	Myelography L-S Spine	77001	Fluoroguide For Vein Device	1	CMS Edit
72265	Myelography L-S Spine	77002	Needle Localization By Xray	1	CMS Edit
72270	Myelography 2/> Spine Regions	72240	Myelography Neck Spine	0	CMS Edit
72270	Myelography 2/> Spine Regions	72255	Myelography Thoracic Spine	0	CMS Edit
72270	Myelography 2/> Spine Regions	72265	Myelography L-S Spine	0	CMS Edit
72270	Myelography 2/> Spine Regions	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72270	Myelography 2/> Spine Regions	77001	Fluoroguide For Vein Device	1	CMS Edit
72270	Myelography 2/> Spine Regions	77002	Needle Localization By Xray	1	CMS Edit
72285	Discography Cerv/Thor Spine	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
72285	Discography Cerv/Thor Spine	77001	Fluoroguide For Vein Device	1	CMS Edit
72285	Discography Cerv/Thor Spine	77002	Needle Localization By Xray	1	CMS Edit
72295	X-Ray Of Lower Spine Disk	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
72295	X-Ray Of Lower Spine Disk	77001	Fluoroguide For Vein Device	1	CMS Edit
72295	X-Ray Of Lower Spine Disk	77002	Needle Localization By Xray	1	CMS Edit
73030	X-Ray Exam Of Shoulder	73020	X-Ray Exam Of Shoulder	1	CMS Edit
73040	Contrast X-Ray Of Shoulder	73020	X-Ray Exam Of Shoulder	1	CMS Edit
73040	Contrast X-Ray Of Shoulder	73030	X-Ray Exam Of Shoulder	1	CMS Edit
73040	Contrast X-Ray Of Shoulder	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73040	Contrast X-Ray Of Shoulder	77001	Fluoroguide For Vein Device	1	CMS Edit
73040	Contrast X-Ray Of Shoulder	77002	Needle Localization By Xray	1	CMS Edit
73080	X-Ray Exam Of Elbow	73070	X-Ray Exam Of Elbow	1	CMS Edit
73085	Contrast X-Ray Of Elbow	73070	X-Ray Exam Of Elbow	1	CMS Edit
73085	Contrast X-Ray Of Elbow	73080	X-Ray Exam Of Elbow	1	CMS Edit
73085	Contrast X-Ray Of Elbow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73085	Contrast X-Ray Of Elbow	77001	Fluoroguide For Vein Device	1	CMS Edit
73085	Contrast X-Ray Of Elbow	77002	Needle Localization By Xray	1	CMS Edit
73092	X-Ray Exam Of Arm Infant	73090	X-Ray Exam Of Forearm	0	CMS Edit
73110	X-Ray Exam Of Wrist	73100	X-Ray Exam Of Wrist	1	CMS Edit
73115	Contrast X-Ray Of Wrist	73100	X-Ray Exam Of Wrist	1	CMS Edit
73115	Contrast X-Ray Of Wrist	73110	X-Ray Exam Of Wrist	1	CMS Edit
73115	Contrast X-Ray Of Wrist	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73115	Contrast X-Ray Of Wrist	77001	Fluoroguide For Vein Device	1	CMS Edit
73115	Contrast X-Ray Of Wrist	77002	Needle Localization By Xray	1	CMS Edit
73120	X-Ray Exam Of Hand	73140	X-Ray Exam Of Finger(S)	1	CMS Edit
73130	X-Ray Exam Of Hand	73120	X-Ray Exam Of Hand	1	CMS Edit
73130	X-Ray Exam Of Hand	73140	X-Ray Exam Of Finger(S)	1	CMS Edit
73200	Ct Upper Extremity W/O Dye	73218	Mri Upper Extremity W/O Dye	0	EVC Edit
73200	Ct Upper Extremity W/O Dye	73220	Mri Uppr Extremity W/O&W/Dye	0	EVC Edit
73200	Ct Upper Extremity W/O Dye	73221	Mri Joint Upr Extrem W/O Dye	0	EVC Edit
73200	Ct Upper Extremity W/O Dye	73222	Mri Joint Upr Extrem W/Dye	0	EVC Edit
73200	Ct Upper Extremity W/O Dye	73223	Mri Joint Upr Extr W/O&W/Dye	0	EVC Edit
73200	Ct Upper Extremity W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73201	Ct Upper Extremity W/Dye	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
73201	Ct Upper Extremity W/Dye	73218	Mri Upper Extremity W/O Dye	0	EVC Edit
73201	Ct Upper Extremity W/Dye	73219	Mri Upper Extremity W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73201	Ct Upper Extremity W/Dye	73220	Mri Uppr Extremity W/O&W/Dye	0	EVC Edit
73201	Ct Upper Extremity W/Dye	73222	Mri Joint Uppr Extrem W/Dye	0	EVC Edit
73201	Ct Upper Extremity W/Dye	73223	Mri Joint Uppr Extr W/O&W/Dye	0	EVC Edit
73201	Ct Upper Extremity W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73201	Ct Upper Extremity W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73201	Ct Upper Extremity W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73201	Ct Upper Extremity W/Dye	76998	Us Guide Intraop	1	CMS Edit
73201	Ct Upper Extremity W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73201	Ct Upper Extremity W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	73201	Ct Upper Extremity W/Dye	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	73218	Mri Upper Extremity W/O Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	73219	Mri Upper Extremity W/Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	73220	Mri Uppr Extremity W/O&W/Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	73221	Mri Joint Uppr Extrem W/O Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	73222	Mri Joint Uppr Extrem W/Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	73223	Mri Joint Uppr Extr W/O&W/Dye	0	EVC Edit
73202	Ct Uppr Extremity W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73202	Ct Uppr Extremity W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73206	Ct Angio Uppr Extrm W/O&W/Dye	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
73206	Ct Angio Uppr Extrm W/O&W/Dye	73201	Ct Upper Extremity W/Dye	1	CMS Edit
73206	Ct Angio Uppr Extrm W/O&W/Dye	73202	Ct Uppr Extremity W/O&W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73206	Ct Angio Upr Extrm W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73206	Ct Angio Upr Extrm W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73219	Mri Upper Extremity W/Dye	73200	Ct Upper Extremity W/O Dye	0	EVC Edit
73219	Mri Upper Extremity W/Dye	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
73219	Mri Upper Extremity W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73219	Mri Upper Extremity W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73219	Mri Upper Extremity W/Dye	76998	Us Guide Intraop	1	CMS Edit
73219	Mri Upper Extremity W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73219	Mri Upper Extremity W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	73218	Mri Uppr Extremity W/O Dye	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	73219	Mri Uppr Extremity W/Dye	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73220	Mri Uppr Extremity W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73222	Mri Joint Upr Extrem W/Dye	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
73223	Mri Joint Upr Extr W/O&W/Dye	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
73223	Mri Joint Upr Extr W/O&W/Dye	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73225	Mr Angio Upr Extr W/O&W/Dye	73206	Ct Angio Upr Extrm W/O&W/Dye	0	EVC Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73219	Mri Upper Extremity W/Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73220	Mri Uppr Extremity W/O&W/Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	73223	Mri Joint Upr Extr W/O&W/Dye	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73225	Mr Angio Upr Extr W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73501	X-Ray Exam Hip Uni 1 View	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73501	X-Ray Exam Hip Uni 1 View	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73502	X-Ray Exam Hip Uni 2-3 Views	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73502	X-Ray Exam Hip Uni 2-3 Views	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73502	X-Ray Exam Hip Uni 2-3 Views	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73503	X-Ray Exam Hip Uni 4/> Views	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73503	X-Ray Exam Hip Uni 4/> Views	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73503	X-Ray Exam Hip Uni 4/> Views	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73503	X-Ray Exam Hip Uni 4/> Views	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit
73521	X-Ray Exam Hips Bi 2 Views	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73521	X-Ray Exam Hips Bi 2 Views	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73521	X-Ray Exam Hips Bi 2 Views	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73521	X-Ray Exam Hips Bi 2 Views	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73521	X-Ray Exam Hips Bi 2 Views	73503	X-Ray Exam Hip Uni 4/> Views	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	73503	X-Ray Exam Hip Uni 4/> Views	1	CMS Edit
73522	X-Ray Exam Hips Bi 3-4 Views	73521	X-Ray Exam Hips Bi 2 Views	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	72170	X-Ray Exam Of Pelvis	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	72190	X-Ray Exam Of Pelvis	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	73503	X-Ray Exam Hip Uni 4/> Views	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	73521	X-Ray Exam Hips Bi 2 Views	1	CMS Edit
73523	X-Ray Exam Hips Bi 5/> Views	73522	X-Ray Exam Hips Bi 3-4 Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
73525	Contrast X-Ray Of Hip	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	73503	X-Ray Exam Hip Uni 4/> Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	73521	X-Ray Exam Hips Bi 2 Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	73522	X-Ray Exam Hips Bi 3-4 Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	73523	X-Ray Exam Hips Bi 5/> Views	1	CMS Edit
73525	Contrast X-Ray Of Hip	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73525	Contrast X-Ray Of Hip	77001	Fluoroguide For Vein Device	1	CMS Edit
73525	Contrast X-Ray Of Hip	77002	Needle Localization By Xray	1	CMS Edit
73552	X-Ray Exam Of Femur 2/>	73551	X-Ray Exam Of Femur 1	1	CMS Edit
73562	X-Ray Exam Of Knee 3	73560	X-Ray Exam Of Knee 1 Or 2	1	CMS Edit
73562	X-Ray Exam Of Knee 3	73565	X-Ray Exam Of Knees	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73564	X-Ray Exam Knee 4 Or More	73560	X-Ray Exam Of Knee 1 Or 2	1	CMS Edit
73564	X-Ray Exam Knee 4 Or More	73562	X-Ray Exam Of Knee 3	1	CMS Edit
73564	X-Ray Exam Knee 4 Or More	73565	X-Ray Exam Of Knees	0	CMS Edit
73580	Contrast X-Ray Of Knee Joint	73560	X-Ray Exam Of Knee 1 Or 2	1	CMS Edit
73580	Contrast X-Ray Of Knee Joint	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73580	Contrast X-Ray Of Knee Joint	77001	Fluoroguide For Vein Device	1	CMS Edit
73580	Contrast X-Ray Of Knee Joint	77002	Needle Localization By Xray	1	CMS Edit
73590	X-Ray Exam Of Lower Leg	73592	X-Ray Exam Of Leg Infant	1	CMS Edit
73592	X-Ray Exam Of Leg Infant	73610	X-Ray Exam Of Ankle	1	CMS Edit
73600	X-Ray Exam Of Ankle	73592	X-Ray Exam Of Leg Infant	1	CMS Edit
73610	X-Ray Exam Of Ankle	73600	X-Ray Exam Of Ankle	1	CMS Edit
73615	Contrast X-Ray Of Ankle	73600	X-Ray Exam Of Ankle	1	CMS Edit
73615	Contrast X-Ray Of Ankle	73610	X-Ray Exam Of Ankle	1	CMS Edit
73615	Contrast X-Ray Of Ankle	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73615	Contrast X-Ray Of Ankle	77001	Fluoroguide For Vein Device	1	CMS Edit
73615	Contrast X-Ray Of Ankle	77002	Needle Localization By Xray	1	CMS Edit
73620	X-Ray Exam Of Foot	73660	X-Ray Exam Of Toe(S)	1	CMS Edit
73630	X-Ray Exam Of Foot	73620	X-Ray Exam Of Foot	1	CMS Edit
73630	X-Ray Exam Of Foot	73650	X-Ray Exam Of Heel	1	CMS Edit
73630	X-Ray Exam Of Foot	73660	X-Ray Exam Of Toe(S)	1	CMS Edit
73700	Ct Lower Extremity W/O Dye	73718	Mri Lower Extremity W/O Dye	0	EVC Edit
73700	Ct Lower Extremity W/O Dye	73719	Mri Lower Extremity W/Dye	0	EVC Edit
73700	Ct Lower Extremity W/O Dye	73720	Mri Lwr Extremity W/O&W/Dye	0	EVC Edit
73700	Ct Lower Extremity W/O Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	0	EVC Edit
73700	Ct Lower Extremity W/O Dye	73723	Mri Joint Lwr Extr W/O&W/Dye	0	EVC Edit
73700	Ct Lower Extremity W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73701	Ct Lower Extremity W/Dye	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
73701	Ct Lower Extremity W/Dye	73718	Mri Lower Extremity W/O Dye	0	EVC Edit
73701	Ct Lower Extremity W/Dye	73719	Mri Lower Extremity W/Dye	0	EVC Edit
73701	Ct Lower Extremity W/Dye	73720	Mri Lwr Extremity W/O&W/Dye	0	EVC Edit
73701	Ct Lower Extremity W/Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	0	EVC Edit
73701	Ct Lower Extremity W/Dye	73722	Mri Joint Of Lwr Extr W/Dye	0	EVC Edit
73701	Ct Lower Extremity W/Dye	73723	Mri Joint Lwr Extr W/O&W/Dye	0	EVC Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73701	Ct Lower Extremity W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73701	Ct Lower Extremity W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73701	Ct Lower Extremity W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73701	Ct Lower Extremity W/Dye	76998	Us Guide Intraop	1	CMS Edit
73701	Ct Lower Extremity W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73701	Ct Lower Extremity W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	73701	Ct Lower Extremity W/Dye	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	73718	Mri Lower Extremity W/O Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	73719	Mri Lower Extremity W/Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	73720	Mri Lwr Extremity W/O&W/Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	73722	Mri Joint Of Lwr Extr W/Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	73723	Mri Joint Lwr Extr W/O&W/Dye	0	EVC Edit
73702	Ct Lwr Extremity W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73702	Ct Lwr Extremity W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	72191	Ct Angiograph Pelv W/O&W/Dye	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	73701	Ct Lower Extremity W/Dye	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	73702	Ct Lwr Extremity W/O&W/Dye	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73706	Ct Angio Lwr Extr W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73706	Ct Angio Lwr Extr W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73719	Mri Lower Extremity W/Dye	73718	Mri Lower Extremity W/O Dye	1	CMS Edit
73719	Mri Lower Extremity W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73719	Mri Lower Extremity W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73719	Mri Lower Extremity W/Dye	76998	Us Guide Intraop	1	CMS Edit
73719	Mri Lower Extremity W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73719	Mri Lower Extremity W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	73718	Mri Lower Extremity W/O Dye	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	73719	Mri Lower Extremity W/Dye	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	73725	Mr Ang Lwr Ext W Or W/O Dye	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73720	Mri Lwr Extremity W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
73722	Mri Joint Of Lwr Extr W/Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	1	CMS Edit
73723	Mri Joint Lwr Extr W/O&W/Dye	73700	Ct Lower Extremity W/O Dye	0	EVC Edit
73723	Mri Joint Lwr Extr W/O&W/Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	1	CMS Edit
73723	Mri Joint Lwr Extr W/O&W/Dye	73722	Mri Joint Of Lwr Extr W/Dye	1	CMS Edit
73723	Mri Joint Lwr Extr W/O&W/Dye	73725	Mr Ang Lwr Ext W Or W/O Dye	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	73706	Ct Angio Lwr Extr W/O&W/Dye	0	EVC Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	73718	Mri Lower Extremity W/O Dye	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	73719	Mri Lower Extremity W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
73725	Mr Ang Lwr Ext W Or W/O Dye	73721	Mri Jnt Of Lwr Extre W/O Dye	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	73722	Mri Joint Of Lwr Extr W/Dye	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	76942	Echo Guide For Biopsy	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	76998	Us Guide Intraop	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
73725	Mr Ang Lwr Ext W Or W/O Dye	77002	Needle Localization By Xray	1	CMS Edit
74019	X-Ray Exam Abdomen 2 Views	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74021	X-Ray Exam Abdomen 3+ Views	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74021	X-Ray Exam Abdomen 3+ Views	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74022	X-Ray Exam Complete Abdomen	71045	X-Ray Exam Chest 1 View	1	CMS Edit
74022	X-Ray Exam Complete Abdomen	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74022	X-Ray Exam Complete Abdomen	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74022	X-Ray Exam Complete Abdomen	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74150	Ct Abdomen W/O Dye	72192	Ct Pelvis W/O Dye	1	CMS Edit
74150	Ct Abdomen W/O Dye	72193	Ct Pelvis W/Dye	1	CMS Edit
74150	Ct Abdomen W/O Dye	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74150	Ct Abdomen W/O Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74150	Ct Abdomen W/O Dye	74181	Mri Abdomen W/O Dye	0	EVC Edit
74150	Ct Abdomen W/O Dye	74182	Mri Abdomen W/Dye	0	EVC Edit
74150	Ct Abdomen W/O Dye	74183	Mri Abdomen W/O & W/Dye	0	EVC Edit
74150	Ct Abdomen W/O Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
74160	Ct Abdomen W/Dye	72192	Ct Pelvis W/O Dye	1	CMS Edit
74160	Ct Abdomen W/Dye	72193	Ct Pelvis W/Dye	1	CMS Edit
74160	Ct Abdomen W/Dye	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74160	Ct Abdomen W/Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74160	Ct Abdomen W/Dye	74150	Ct Abdomen W/O Dye	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74160	Ct Abdomen W/Dye	74181	Mri Abdomen W/O Dye	0	EVC Edit
74160	Ct Abdomen W/Dye	74182	Mri Abdomen W/Dye	0	EVC Edit
74160	Ct Abdomen W/Dye	74183	Mri Abdomen W/O & W/Dye	0	EVC Edit
74160	Ct Abdomen W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74160	Ct Abdomen W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
74160	Ct Abdomen W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74160	Ct Abdomen W/Dye	76998	Us Guide Intraop	1	CMS Edit
74160	Ct Abdomen W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74160	Ct Abdomen W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	72192	Ct Pelvis W/O Dye	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	72193	Ct Pelvis W/Dye	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74170	Ct Abdomen W/O & W/Dye	74150	Ct Abdomen W/O Dye	0	CMS Edit
74170	Ct Abdomen W/O & W/Dye	74160	Ct Abdomen W/Dye	0	CMS Edit
74170	Ct Abdomen W/O & W/Dye	74181	Mri Abdomen W/O Dye	0	EVC Edit
74170	Ct Abdomen W/O & W/Dye	74182	Mri Abdomen W/Dye	0	EVC Edit
74170	Ct Abdomen W/O & W/Dye	74183	Mri Abdomen W/O & W/Dye	0	EVC Edit
74170	Ct Abdomen W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74170	Ct Abdomen W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	72191	Ct Angiograph Pelv W/O&W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	72192	Ct Pelvis W/O Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	72193	Ct Pelvis W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	73706	Ct Angio Lwr Extr W/O&W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74150	Ct Abdomen W/O Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74160	Ct Abdomen W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74175	Ct Angio Abdom W/O & W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74174	Ct Angio Abd&Pelv W/O&W/Dye	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74177	Ct Abd & Pelv W/Contrast	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	74178	Ct Abd & Pelv 1/> Regns	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	76998	Us Guide Intraop	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74174	Ct Angio Abd&Pelv W/O&W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	72191	Ct Angiograph Pelv W/O&W/Dye	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	73706	Ct Angio Lwr Extr W/O&W/Dye	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74150	Ct Abdomen W/O Dye	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74160	Ct Abdomen W/Dye	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74177	Ct Abd & Pelv W/Contrast	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	74178	Ct Abd & Pelv 1/> Regns	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	76380	Cat Scan Follow-Up Study	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74175	Ct Angio Abdom W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74175	Ct Angio Abdom W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	72192	Ct Pelvis W/O Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	72193	Ct Pelvis W/Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74176	Ct Abd & Pelvis W/O Contrast	74150	Ct Abdomen W/O Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	74160	Ct Abdomen W/Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74176	Ct Abd & Pelvis W/O Contrast	74263	Ct Colonography Screening	0	EVC Edit
74176	Ct Abd & Pelvis W/O Contrast	76380	Cat Scan Follow-Up Study	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	72192	Ct Pelvis W/O Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	72193	Ct Pelvis W/Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74177	Ct Abd & Pelv W/Contrast	74150	Ct Abdomen W/O Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	74160	Ct Abdomen W/Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
74177	Ct Abd & Pelv W/Contrast	74263	Ct Colonography Screening	0	EVC Edit
74177	Ct Abd & Pelv W/Contrast	76380	Cat Scan Follow-Up Study	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	72192	Ct Pelvis W/O Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	72193	Ct Pelvis W/Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74178	Ct Abd & Pelv 1/> Regns	74150	Ct Abdomen W/O Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74160	Ct Abdomen W/Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74177	Ct Abd & Pelv W/Contrast	1	CMS Edit
74178	Ct Abd & Pelv 1/> Regns	74263	Ct Colonography Screening	0	EVC Edit
74178	Ct Abd & Pelv 1/> Regns	76380	Cat Scan Follow-Up Study	1	CMS Edit
74182	Mri Abdomen W/Dye	74181	Mri Abdomen W/O Dye	1	CMS Edit
74182	Mri Abdomen W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74182	Mri Abdomen W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74182	Mri Abdomen W/Dye	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74182	Mri Abdomen W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74182	Mri Abdomen W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	74181	Mri Abdomen W/O Dye	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	74182	Mri Abdomen W/Dye	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	74185	Mri Angio Abdom W Orw/O Dye	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	76998	Us Guide Intraop	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74183	Mri Abdomen W/O & W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	74175	Ct Angio Abdom W/O & W/Dye	0	EVC Edit
74185	Mri Angio Abdom W Orw/O Dye	74181	Mri Abdomen W/O Dye	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	74182	Mri Abdomen W/Dye	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	75635	Ct Angio Abdominal Arteries	0	EVC Edit
74185	Mri Angio Abdom W Orw/O Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	76376	3D Render W/Intrp Postproces	0	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	76377	3D Render W/Intrp Postproces	0	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	76998	Us Guide Intraop	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74185	Mri Angio Abdom W Orw/O Dye	77002	Needle Localization By Xray	1	CMS Edit
74190	X-Ray Exam Of Peritoneum	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74190	X-Ray Exam Of Peritoneum	77001	Fluoroguide For Vein Device	1	CMS Edit
74190	X-Ray Exam Of Peritoneum	77002	Needle Localization By Xray	1	CMS Edit
74210	X-Ray Xm Phrnx&/Crv Esoph C+	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74210	X-Ray Xm Phrnx&/Crv Esoph C+	77001	Fluoroguide For Vein Device	1	CMS Edit
74210	X-Ray Xm Phrnx&/Crv Esoph C+	77002	Needle Localization By Xray	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74220	X-Ray Xm Esophagus 1Cntrst	74210	X-Ray Xm Phrnx&/Crv Esoph C+	1	CMS Edit
74220	X-Ray Xm Esophagus 1Cntrst	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74220	X-Ray Xm Esophagus 1Cntrst	77001	Fluoroguide For Vein Device	1	CMS Edit
74220	X-Ray Xm Esophagus 1Cntrst	77002	Needle Localization By Xray	1	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	74210	X-Ray Xm Phrnx&/Crv Esoph C+	1	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	74220	X-Ray Xm Esophagus 1Cntrst	0	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	74248	X-Ray Sm Int F-Thru Std	0	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	77001	Fluoroguide For Vein Device	1	CMS Edit
74221	X-Ray Xm Esophagus 2Cntrst	77002	Needle Localization By Xray	1	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	74210	X-Ray Xm Phrnx&/Crv Esoph C+	0	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	74220	X-Ray Xm Esophagus 1Cntrst	0	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	74221	X-Ray Xm Esophagus 2Cntrst	0	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	77001	Fluoroguide For Vein Device	1	CMS Edit
74230	X-Ray Xm Swlng Funcj C+	77002	Needle Localization By Xray	1	CMS Edit
74235	Remove Esophagus Obstruction	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74235	Remove Esophagus Obstruction	77001	Fluoroguide For Vein Device	1	CMS Edit
74235	Remove Esophagus Obstruction	77002	Needle Localization By Xray	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74210	X-Ray Xm Phrnx&/Crv Esoph C+	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74220	X-Ray Xm Esophagus 1Cntrst	0	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74221	X-Ray Xm Esophagus 2Cntrst	0	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	74250	X-Ray Xm Sm Int 1Cntrst Std	0	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	77001	Fluoroguide For Vein Device	1	CMS Edit
74240	X-Ray Xm Upr Gi Trc 1Cntrst	77002	Needle Localization By Xray	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74210	X-Ray Xm PhrnX&/Crv Esoph C+	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74220	X-Ray Xm Esophagus 1Cntrst	0	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74221	X-Ray Xm Esophagus 2Cntrst	0	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74240	X-Ray Xm Upr Gi Trc 1Cntrst	0	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	74250	X-Ray Xm Sm Int 1Cntrst Std	0	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	77001	Fluoroguide For Vein Device	1	CMS Edit
74246	X-Ray Xm Upr Gi Trc 2Cntrst	77002	Needle Localization By Xray	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	74210	X-Ray Xm PhrnX&/Crv Esoph C+	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	74220	X-Ray Xm Esophagus 1Cntrst	0	CMS Edit
74248	X-Ray Sm Int F-Thru Std	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	77001	Fluoroguide For Vein Device	1	CMS Edit
74248	X-Ray Sm Int F-Thru Std	77002	Needle Localization By Xray	1	CMS Edit
74250	X-Ray Xm Sm Int 1Cntrst Std	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74250	X-Ray Xm Sm Int 1Cntrst Std	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74250	X-Ray Xm Sm Int 1Cntrst Std	74248	X-Ray Sm Int F-Thru Std	0	CMS Edit
74250	X-Ray Xm Sm Int 1Cntrst Std	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74250	X-Ray Xm Sm Int 1Cntrst Std	77001	Fluoroguide For Vein Device	1	CMS Edit
74250	X-Ray Xm Sm Int 1Cntrst Std	77002	Needle Localization By Xray	1	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	74246	X-Ray Xm Uptr Gi Trc 2Cntrst	1	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	74248	X-Ray Sm Int F-Thru Std	0	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	74250	X-Ray Xm Sm Int 1Cntrst Std	0	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	77001	Fluoroguide For Vein Device	1	CMS Edit
74251	X-Ray Xm Sm Int 2Cntrst Std	77002	Needle Localization By Xray	1	CMS Edit
74261	Ct Colonography Dx	72192	Ct Pelvis W/O Dye	0	CMS Edit
74261	Ct Colonography Dx	72193	Ct Pelvis W/Dye	0	CMS Edit
74261	Ct Colonography Dx	72194	Ct Pelvis W/O & W/Dye	0	CMS Edit
74261	Ct Colonography Dx	74150	Ct Abdomen W/O Dye	0	CMS Edit
74261	Ct Colonography Dx	74160	Ct Abdomen W/Dye	0	CMS Edit
74261	Ct Colonography Dx	74170	Ct Abdomen W/O & W/Dye	0	CMS Edit
74261	Ct Colonography Dx	74176	Ct Abd & Pelvis W/O Contrast	0	CMS Edit
74261	Ct Colonography Dx	74177	Ct Abd & Pelv W/Contrast	0	CMS Edit
74261	Ct Colonography Dx	74178	Ct Abd & Pelv 1/> Regns	0	CMS Edit
74261	Ct Colonography Dx	74263	Ct Colonography Screening	1	CMS Edit
74261	Ct Colonography Dx	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74261	Ct Colonography Dx	76376	3D Render W/Intrp Postproces	1	CMS Edit
74261	Ct Colonography Dx	76377	3D Render W/Intrp Postproces	1	CMS Edit
74261	Ct Colonography Dx	77001	Fluoroguide For Vein Device	1	CMS Edit
74261	Ct Colonography Dx	77002	Needle Localization By Xray	1	CMS Edit
74262	Ct Colonography Dx W/Dye	72192	Ct Pelvis W/O Dye	0	CMS Edit
74262	Ct Colonography Dx W/Dye	72193	Ct Pelvis W/Dye	0	CMS Edit
74262	Ct Colonography Dx W/Dye	72194	Ct Pelvis W/O & W/Dye	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74150	Ct Abdomen W/O Dye	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74160	Ct Abdomen W/Dye	0	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74262	Ct Colonography Dx W/Dye	74170	Ct Abdomen W/O & W/Dye	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74176	Ct Abd & Pelvis W/O Contrast	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74177	Ct Abd & Pelv W/Contrast	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74178	Ct Abd & Pelv 1/> Regns	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74261	Ct Colonography Dx	0	CMS Edit
74262	Ct Colonography Dx W/Dye	74263	Ct Colonography Screening	1	CMS Edit
74262	Ct Colonography Dx W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74262	Ct Colonography Dx W/Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit
74262	Ct Colonography Dx W/Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
74262	Ct Colonography Dx W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
74262	Ct Colonography Dx W/Dye	76998	Us Guide Intraop	1	CMS Edit
74262	Ct Colonography Dx W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
74262	Ct Colonography Dx W/Dye	77002	Needle Localization By Xray	1	CMS Edit
74263	Ct Colonography Screening	72192	Ct Pelvis W/O Dye	1	CMS Edit
74263	Ct Colonography Screening	72193	Ct Pelvis W/Dye	1	CMS Edit
74263	Ct Colonography Screening	72194	Ct Pelvis W/O & W/Dye	1	CMS Edit
74263	Ct Colonography Screening	74150	Ct Abdomen W/O Dye	1	CMS Edit
74263	Ct Colonography Screening	74160	Ct Abdomen W/Dye	1	CMS Edit
74263	Ct Colonography Screening	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
74263	Ct Colonography Screening	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74263	Ct Colonography Screening	76376	3D Render W/Intrp Postproces	1	CMS Edit
74263	Ct Colonography Screening	76377	3D Render W/Intrp Postproces	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74270	X-Ray Xm Colon 1Cntrst Std	74280	X-Ray Xm Colon 2Cntrst Std	0	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	74283	Ther Nma Rdctj Intus/Obstrcj	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	76942	Echo Guide For Biopsy	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	76998	Us Guide Intraop	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	77001	Fluoroguide For Vein Device	1	CMS Edit
74270	X-Ray Xm Colon 1Cntrst Std	77002	Needle Localization By Xray	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74280	X-Ray Xm Colon 2Cntrst Std	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74280	X-Ray Xm Colon 2Cntrst Std	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74280	X-Ray Xm Colon 2Cntrst Std	74022	X-Ray Exam Complete Abdomen	0	EVC Edit
74280	X-Ray Xm Colon 2Cntrst Std	74283	Ther Nma Rdctj Intus/Obstrcj	1	CMS Edit
74280	X-Ray Xm Colon 2Cntrst Std	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74280	X-Ray Xm Colon 2Cntrst Std	77001	Fluoroguide For Vein Device	1	CMS Edit
74280	X-Ray Xm Colon 2Cntrst Std	77002	Needle Localization By Xray	1	CMS Edit
74283	Ther Nma Rdctj Intus/Obstrcj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74283	Ther Nma Rdctj Intus/Obstrcj	77001	Fluoroguide For Vein Device	1	CMS Edit
74283	Ther Nma Rdctj Intus/Obstrcj	77002	Needle Localization By Xray	1	CMS Edit
74290	Contrast X-Ray Gallbladder	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74290	Contrast X-Ray Gallbladder	77001	Fluoroguide For Vein Device	1	CMS Edit
74290	Contrast X-Ray Gallbladder	77002	Needle Localization By Xray	1	CMS Edit
74300	X-Ray Bile Ducts/Pancreas	74290	Contrast X-Ray Gallbladder	1	CMS Edit
74300	X-Ray Bile Ducts/Pancreas	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74300	X-Ray Bile Ducts/Pancreas	77001	Fluoroguide For Vein Device	1	CMS Edit
74300	X-Ray Bile Ducts/Pancreas	77002	Needle Localization By Xray	1	CMS Edit
74301	X-Rays At Surgery Add-On	74290	Contrast X-Ray Gallbladder	1	CMS Edit
74328	X-Ray Bile Duct Endoscopy	74360	X-Ray Guide Gi Dilation	1	CMS Edit
74328	X-Ray Bile Duct Endoscopy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74328	X-Ray Bile Duct Endoscopy	77001	Fluoroguide For Vein Device	1	CMS Edit
74328	X-Ray Bile Duct Endoscopy	77002	Needle Localization By Xray	1	CMS Edit
74329	X-Ray For Pancreas Endoscopy	74360	X-Ray Guide Gi Dilation	1	CMS Edit
74329	X-Ray For Pancreas Endoscopy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74329	X-Ray For Pancreas Endoscopy	77001	Fluoroguide For Vein Device	1	CMS Edit
74329	X-Ray For Pancreas Endoscopy	77002	Needle Localization By Xray	1	CMS Edit
74330	X-Ray Bile/Panc Endoscopy	74328	X-Ray Bile Duct Endoscopy	0	CMS Edit
74330	X-Ray Bile/Panc Endoscopy	74329	X-Ray For Pancreas Endoscopy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74330	X-Ray Bile/Panc Endoscopy	74360	X-Ray Guide Gi Dilation	1	CMS Edit
74330	X-Ray Bile/Panc Endoscopy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74330	X-Ray Bile/Panc Endoscopy	77001	Fluoroguide For Vein Device	1	CMS Edit
74330	X-Ray Bile/Panc Endoscopy	77002	Needle Localization By Xray	1	CMS Edit
74340	X-Ray Guide For Gi Tube	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74340	X-Ray Guide For Gi Tube	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74340	X-Ray Guide For Gi Tube	77001	Fluoroguide For Vein Device	1	CMS Edit
74340	X-Ray Guide For Gi Tube	77002	Needle Localization By Xray	1	CMS Edit
74355	X-Ray Guide Intestinal Tube	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74355	X-Ray Guide Intestinal Tube	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74355	X-Ray Guide Intestinal Tube	77001	Fluoroguide For Vein Device	1	CMS Edit
74355	X-Ray Guide Intestinal Tube	77002	Needle Localization By Xray	1	CMS Edit
74360	X-Ray Guide Gi Dilation	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74360	X-Ray Guide Gi Dilation	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74360	X-Ray Guide Gi Dilation	77001	Fluoroguide For Vein Device	1	CMS Edit
74360	X-Ray Guide Gi Dilation	77002	Needle Localization By Xray	1	CMS Edit
74363	X-Ray Bile Duct Dilation	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74363	X-Ray Bile Duct Dilation	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74363	X-Ray Bile Duct Dilation	77001	Fluoroguide For Vein Device	1	CMS Edit
74363	X-Ray Bile Duct Dilation	77002	Needle Localization By Xray	1	CMS Edit
74400	Urography Iv +-Kub Tomog	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74400	Urography Iv +-Kub Tomog	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74400	Urography Iv +-Kub Tomog	74022	X-Ray Exam Complete Abdomen	1	CMS Edit
74400	Urography Iv +-Kub Tomog	74410	Urography Nfs Drip&/Bolus	1	CMS Edit
74400	Urography Iv +-Kub Tomog	74420	Urography Rtgr +-Kub	1	CMS Edit
74400	Urography Iv +-Kub Tomog	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74400	Urography Iv +-Kub Tomog	76942	Echo Guide For Biopsy	1	CMS Edit
74400	Urography Iv +-Kub Tomog	76998	Us Guide Intraop	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74400	Urography Iv +-Kub Tomog	77001	Fluoroguide For Vein Device	1	CMS Edit
74400	Urography Iv +-Kub Tomog	77002	Needle Localization By Xray	1	CMS Edit
74410	Urography Nfs Drip&/Bolus	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74410	Urography Nfs Drip&/Bolus	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74410	Urography Nfs Drip&/Bolus	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74410	Urography Nfs Drip&/Bolus	74420	Urography Rtrgr +-Kub	1	CMS Edit
74410	Urography Nfs Drip&/Bolus	74425	Urography Antegrade Rs&l	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74400	Urography Iv +-Kub Tomog	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74410	Urography Nfs Drip&/Bolus	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74420	Urography Rtrgr +-Kub	1	CMS Edit
74415	Urography Nfs Drip&/Blis W/Nf	74425	Urography Antegrade Rs&l	1	CMS Edit
74420	Urography Rtrgr +-Kub	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74420	Urography Rtrgr +-Kub	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74420	Urography Rtrgr +-Kub	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74420	Urography Rtrgr +-Kub	74425	Urography Antegrade Rs&l	1	CMS Edit
74420	Urography Rtrgr +-Kub	74430	Contrast X-Ray Bladder	0	CMS Edit
74420	Urography Rtrgr +-Kub	74450	X-Ray Urethra/Bladder	0	CMS Edit
74420	Urography Rtrgr +-Kub	74455	X-Ray Urethra/Bladder	0	CMS Edit
74420	Urography Rtrgr +-Kub	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74420	Urography Rtrgr +-Kub	76942	Echo Guide For Biopsy	1	CMS Edit
74420	Urography Rtrgr +-Kub	76998	Us Guide Intraop	1	CMS Edit
74420	Urography Rtrgr +-Kub	77001	Fluoroguide For Vein Device	1	CMS Edit
74420	Urography Rtrgr +-Kub	77002	Needle Localization By Xray	1	CMS Edit
74425	Urography Antegrade Rs&l	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74425	Urography Antegrade Rs&l	74019	X-Ray Exam Abdomen 2 Views	1	CMS Edit
74425	Urography Antegrade Rs&l	74021	X-Ray Exam Abdomen 3+ Views	1	CMS Edit
74425	Urography Antegrade Rs&l	74400	Urography Iv +-Kub Tomog	1	CMS Edit
74425	Urography Antegrade Rs&l	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74425	Urography Antegrade Rs&l	77001	Fluoroguide For Vein Device	1	CMS Edit
74425	Urography Antegrade Rs&l	77002	Needle Localization By Xray	1	CMS Edit
74430	Contrast X-Ray Bladder	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74430	Contrast X-Ray Bladder	74455	X-Ray Urethra/Bladder	1	CMS Edit
74430	Contrast X-Ray Bladder	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74430	Contrast X-Ray Bladder	77001	Fluoroguide For Vein Device	1	CMS Edit
74440	X-Ray Male Genital Tract	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74440	X-Ray Male Genital Tract	74450	X-Ray Urethra/Bladder	1	CMS Edit
74440	X-Ray Male Genital Tract	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74440	X-Ray Male Genital Tract	76942	Echo Guide For Biopsy	1	CMS Edit
74440	X-Ray Male Genital Tract	76998	Us Guide Intraop	1	CMS Edit
74440	X-Ray Male Genital Tract	77001	Fluoroguide For Vein Device	1	CMS Edit
74440	X-Ray Male Genital Tract	77002	Needle Localization By Xray	1	CMS Edit
74445	X-Ray Exam Of Penis	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74445	X-Ray Exam Of Penis	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74445	X-Ray Exam Of Penis	76942	Echo Guide For Biopsy	1	CMS Edit
74445	X-Ray Exam Of Penis	76998	Us Guide Intraop	1	CMS Edit
74445	X-Ray Exam Of Penis	77001	Fluoroguide For Vein Device	1	CMS Edit
74445	X-Ray Exam Of Penis	77002	Needle Localization By Xray	1	CMS Edit
74450	X-Ray Urethra/Bladder	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74450	X-Ray Urethra/Bladder	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74450	X-Ray Urethra/Bladder	77001	Fluoroguide For Vein Device	1	CMS Edit
74450	X-Ray Urethra/Bladder	77002	Needle Localization By Xray	1	CMS Edit
74455	X-Ray Urethra/Bladder	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
74455	X-Ray Urethra/Bladder	74450	X-Ray Urethra/Bladder	1	CMS Edit
74455	X-Ray Urethra/Bladder	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74455	X-Ray Urethra/Bladder	77001	Fluoroguide For Vein Device	1	CMS Edit
74455	X-Ray Urethra/Bladder	77002	Needle Localization By Xray	1	CMS Edit
74470	X-Ray Exam Of Kidney Lesion	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
74470	X-Ray Exam Of Kidney Lesion	77001	Fluoroguide For Vein Device	1	CMS Edit
74470	X-Ray Exam Of Kidney Lesion	77002	Needle Localization By Xray	1	CMS Edit
74485	Dilation Urtr/Urt Rs&I	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74485	Dilation Urtr/Urt Rs&I	76942	Echo Guide For Biopsy	1	CMS Edit
74485	Dilation Urtr/Urt Rs&I	76998	Us Guide Intraop	1	CMS Edit
74485	Dilation Urtr/Urt Rs&I	77001	Fluoroguide For Vein Device	1	CMS Edit
74485	Dilation Urtr/Urt Rs&I	77002	Needle Localization By Xray	1	CMS Edit
74712	Mri Fetal Sngl/1St Gestation	72195	Mri Pelvis W/O Dye	0	CMS Edit
74712	Mri Fetal Sngl/1St Gestation	72196	Mri Pelvis W/Dye	0	CMS Edit
74712	Mri Fetal Sngl/1St Gestation	72197	Mri Pelvis W/O & W/Dye	0	CMS Edit
74713	Mri Fetal Ea Addl Gestation	72195	Mri Pelvis W/O Dye	0	CMS Edit
74713	Mri Fetal Ea Addl Gestation	72196	Mri Pelvis W/Dye	0	CMS Edit
74740	X-Ray Female Genital Tract	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74740	X-Ray Female Genital Tract	77001	Fluoroguide For Vein Device	1	CMS Edit
74740	X-Ray Female Genital Tract	77002	Needle Localization By Xray	1	CMS Edit
74742	X-Ray Fallopian Tube	74740	X-Ray Female Genital Tract	1	CMS Edit
74742	X-Ray Fallopian Tube	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74742	X-Ray Fallopian Tube	77001	Fluoroguide For Vein Device	1	CMS Edit
74742	X-Ray Fallopian Tube	77002	Needle Localization By Xray	1	CMS Edit
74775	X-Ray Exam Of Perineum	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
74775	X-Ray Exam Of Perineum	77001	Fluoroguide For Vein Device	1	CMS Edit
74775	X-Ray Exam Of Perineum	77002	Needle Localization By Xray	1	CMS Edit
75557	Cardiac Mri For Morph	76376	3D Render W/Intrp Postproces	1	CMS Edit
75557	Cardiac Mri For Morph	76377	3D Render W/Intrp Postproces	1	CMS Edit
75559	Cardiac Mri W/Stress Img	75557	Cardiac Mri For Morph	0	CMS Edit
75559	Cardiac Mri W/Stress Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
75559	Cardiac Mri W/Stress Img	76377	3D Render W/Intrp Postproces	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	75557	Cardiac Mri For Morph	0	CMS Edit
75561	Cardiac Mri For Morph W/Dye	75559	Cardiac Mri W/Stress Img	0	CMS Edit
75561	Cardiac Mri For Morph W/Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75561	Cardiac Mri For Morph W/Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	76942	Echo Guide For Biopsy	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	76998	Us Guide Intraop	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	77002	Needle Localization By Xray	1	CMS Edit
75561	Cardiac Mri For Morph W/Dye	C9762	Cmri Mrphol&Fnc Q Seg Dysf;Str Imag	0	CMS Edit
75563	Card Mri W/Stress Img & Dye	75557	Cardiac Mri For Morph	0	CMS Edit
75563	Card Mri W/Stress Img & Dye	75559	Cardiac Mri W/Stress Img	0	CMS Edit
75563	Card Mri W/Stress Img & Dye	75561	Cardiac Mri For Morph W/Dye	0	CMS Edit
75563	Card Mri W/Stress Img & Dye	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	76376	3D Render W/Intrp Postproces	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	76377	3D Render W/Intrp Postproces	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	76942	Echo Guide For Biopsy	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	76998	Us Guide Intraop	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	77001	Fluoroguide For Vein Device	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	77002	Needle Localization By Xray	1	CMS Edit
75563	Card Mri W/Stress Img & Dye	C9762	Cmri Mrphol&Fnc Q Seg Dysf;Str Imag	0	CMS Edit
75565	Card Mri Veloc Flow Mapping	76376	3D Render W/Intrp Postproces	1	CMS Edit
75565	Card Mri Veloc Flow Mapping	76377	3D Render W/Intrp Postproces	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	76120	Cine/Video X-Rays	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	76376	3D Render W/Intrp Postproces	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	76377	3D Render W/Intrp Postproces	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	77001	Fluoroguide For Vein Device	1	CMS Edit
75571	Ct Hrt W/O Dye W/Ca Test	77002	Needle Localization By Xray	1	CMS Edit
75572	Ct Hrt W/3D Image	71250	Ct Thorax Dx C-	1	CMS Edit
75572	Ct Hrt W/3D Image	71260	Ct Thorax Dx C+	1	CMS Edit
75572	Ct Hrt W/3D Image	71270	Ct Thorax Dx C-/C+	1	CMS Edit
75572	Ct Hrt W/3D Image	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
75572	Ct Hrt W/3D Image	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75572	Ct Hrt W/3D Image	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75572	Ct Hrt W/3D Image	76120	Cine/Video X-Rays	1	CMS Edit
75572	Ct Hrt W/3D Image	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75572	Ct Hrt W/3D Image	76376	3D Render W/Intrp Postproces	1	CMS Edit
75572	Ct Hrt W/3D Image	76377	3D Render W/Intrp Postproces	1	CMS Edit
75572	Ct Hrt W/3D Image	76942	Echo Guide For Biopsy	1	CMS Edit
75572	Ct Hrt W/3D Image	76998	Us Guide Intraop	1	CMS Edit
75572	Ct Hrt W/3D Image	77001	Fluoroguide For Vein Device	1	CMS Edit
75572	Ct Hrt W/3D Image	77002	Needle Localization By Xray	1	CMS Edit
75572	Ct Hrt W/3D Image	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
75572	Ct Hrt W/3D Image	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
75572	Ct Hrt W/3D Image	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
75572	Ct Hrt W/3D Image	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	71250	Ct Thorax Dx C-	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	71260	Ct Thorax Dx C+	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	71270	Ct Thorax Dx C-/C+	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	75572	Ct Hrt W/3D Image	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	75574	Ct Angio Hrt W/3D Image	0	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76120	Cine/Video X-Rays	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76376	3D Render W/Intrp Postproces	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76377	3D Render W/Intrp Postproces	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76942	Echo Guide For Biopsy	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	76998	Us Guide Intraop	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	77001	Fluoroguide For Vein Device	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	77002	Needle Localization By Xray	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78431	Myocrd Img Pet Rst&Strs Ct	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78433	Myocrd Img Pet 2Rtracer Ct	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
75573	Ct Hrt C+ Strux Cgen Hrt Ds	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	71250	Ct Thorax Dx C-	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75574	Ct Angio Hrt W/3D Image	71260	Ct Thorax Dx C+	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	71270	Ct Thorax Dx C-/C+	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	71275	Ct Angiography Chest	0	EVC Edit
75574	Ct Angio Hrt W/3D Image	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	75572	Ct Hrt W/3D Image	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76120	Cine/Video X-Rays	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76376	3D Render W/Intrp Postproces	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76377	3D Render W/Intrp Postproces	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76942	Echo Guide For Biopsy	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	76998	Us Guide Intraop	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	77001	Fluoroguide For Vein Device	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	77002	Needle Localization By Xray	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78431	Myocrd Img Pet Rst&Strs Ct	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78433	Myocrd Img Pet 2Rtracer Ct	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	0623T	Auto Quantification C Plaque	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	0624T	Auto Quan C Plaq Data Prep	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	0625T	Auto Quan C Plaq Cptr Alys	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	0626T	Auto Quan C Plaq I&R	1	CMS Edit
75574	Ct Angio Hrt W/3D Image	0710T	N-Invas Artl Plaq Alys	0	CMS Edit
75574	Ct Angio Hrt W/3D Image	0711T	N-Nvs Artl Plaq Alys Dat Prp	0	CMS Edit
75574	Ct Angio Hrt W/3D Image	0712T	N-Nvs Artl Plaq Alys Quan	0	CMS Edit
75574	Ct Angio Hrt W/3D Image	0713T	N-Nvs Artl Plaq Alys Rvw I&R	0	CMS Edit
75600	Contrast Exam Thoracic Aorta	75827	Vein X-Ray Chest	1	CMS Edit
75600	Contrast Exam Thoracic Aorta	75893	Venous Sampling By Catheter	1	CMS Edit
75600	Contrast Exam Thoracic Aorta	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75600	Contrast Exam Thoracic Aorta	76942	Echo Guide For Biopsy	1	CMS Edit
75600	Contrast Exam Thoracic Aorta	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75600	Contrast Exam Thoracic Aorta	77001	Fluoroguide For Vein Device	1	CMS Edit
75600	Contrast Exam Thoracic Aorta	77002	Needle Localization By Xray	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	75827	Vein X-Ray Chest	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	75893	Venous Sampling By Catheter	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	76942	Echo Guide For Biopsy	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	76998	Us Guide Intraop	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	77001	Fluoroguide For Vein Device	1	CMS Edit
75605	Contrast Exam Thoracic Aorta	77002	Needle Localization By Xray	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	75825	Vein X-Ray Trunk	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	75893	Venous Sampling By Catheter	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	76942	Echo Guide For Biopsy	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	76998	Us Guide Intraop	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	77001	Fluoroguide For Vein Device	1	CMS Edit
75625	Contrast Exam Abdominl Aorta	77002	Needle Localization By Xray	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	75625	Contrast Exam Abdominl Aorta	0	CMS Edit
75630	X-Ray Aorta Leg Arteries	75716	Artery X-Rays Arms/Legs	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	75825	Vein X-Ray Trunk	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	75893	Venous Sampling By Catheter	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	76942	Echo Guide For Biopsy	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	76998	Us Guide Intraop	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	77001	Fluoroguide For Vein Device	1	CMS Edit
75630	X-Ray Aorta Leg Arteries	77002	Needle Localization By Xray	1	CMS Edit
75635	Ct Angio Abdominal Arteries	72191	Ct Angiograph Pelv W/O&W/Dye	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75635	Ct Angio Abdominal Arteries	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	73701	Ct Lower Extremity W/Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	73702	Ct Lwr Extremity W/O&W/Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	73706	Ct Angio Lwr Extr W/O&W/Dye	0	CMS Edit
75635	Ct Angio Abdominal Arteries	74150	Ct Abdomen W/O Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	74160	Ct Abdomen W/Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	74170	Ct Abdomen W/O & W/Dye	1	CMS Edit
75635	Ct Angio Abdominal Arteries	74174	Ct Angio Abd&Pelv W/O&W/Dye	0	CMS Edit
75635	Ct Angio Abdominal Arteries	74175	Ct Angio Abdom W/O & W/Dye	0	CMS Edit
75635	Ct Angio Abdominal Arteries	75893	Venous Sampling By Catheter	1	CMS Edit
75635	Ct Angio Abdominal Arteries	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75635	Ct Angio Abdominal Arteries	76376	3D Render W/Intrp Postproces	0	CMS Edit
75635	Ct Angio Abdominal Arteries	76377	3D Render W/Intrp Postproces	0	CMS Edit
75635	Ct Angio Abdominal Arteries	76942	Echo Guide For Biopsy	1	CMS Edit
75635	Ct Angio Abdominal Arteries	76998	Us Guide Intraop	1	CMS Edit
75635	Ct Angio Abdominal Arteries	77001	Fluoroguide For Vein Device	1	CMS Edit
75635	Ct Angio Abdominal Arteries	77002	Needle Localization By Xray	1	CMS Edit
75705	Artery X-Rays Spine	75893	Venous Sampling By Catheter	1	CMS Edit
75705	Artery X-Rays Spine	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75705	Artery X-Rays Spine	76942	Echo Guide For Biopsy	1	CMS Edit
75705	Artery X-Rays Spine	76998	Us Guide Intraop	1	CMS Edit
75705	Artery X-Rays Spine	77001	Fluoroguide For Vein Device	1	CMS Edit
75705	Artery X-Rays Spine	77002	Needle Localization By Xray	1	CMS Edit
75710	Artery X-Rays Arm/Leg	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
75710	Artery X-Rays Arm/Leg	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75710	Artery X-Rays Arm/Leg	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75710	Artery X-Rays Arm/Leg	75893	Venous Sampling By Catheter	1	CMS Edit
75710	Artery X-Rays Arm/Leg	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75710	Artery X-Rays Arm/Leg	76942	Echo Guide For Biopsy	1	CMS Edit
75710	Artery X-Rays Arm/Leg	76998	Us Guide Intraop	1	CMS Edit
75710	Artery X-Rays Arm/Leg	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75710	Artery X-Rays Arm/Leg	77002	Needle Localization By Xray	1	CMS Edit
75716	Artery X-Rays Arms/Legs	75710	Artery X-Rays Arm/Leg	1	CMS Edit
75716	Artery X-Rays Arms/Legs	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75716	Artery X-Rays Arms/Legs	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75716	Artery X-Rays Arms/Legs	75893	Venous Sampling By Catheter	1	CMS Edit
75716	Artery X-Rays Arms/Legs	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75716	Artery X-Rays Arms/Legs	76942	Echo Guide For Biopsy	1	CMS Edit
75716	Artery X-Rays Arms/Legs	76998	Us Guide Intraop	1	CMS Edit
75716	Artery X-Rays Arms/Legs	77001	Fluoroguide For Vein Device	1	CMS Edit
75716	Artery X-Rays Arms/Legs	77002	Needle Localization By Xray	1	CMS Edit
75726	Artery X-Rays Abdomen	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
75726	Artery X-Rays Abdomen	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75726	Artery X-Rays Abdomen	75891	Vein X-Ray Liver	1	CMS Edit
75726	Artery X-Rays Abdomen	75893	Venous Sampling By Catheter	1	CMS Edit
75726	Artery X-Rays Abdomen	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75726	Artery X-Rays Abdomen	76942	Echo Guide For Biopsy	1	CMS Edit
75726	Artery X-Rays Abdomen	76998	Us Guide Intraop	1	CMS Edit
75726	Artery X-Rays Abdomen	77001	Fluoroguide For Vein Device	1	CMS Edit
75726	Artery X-Rays Abdomen	77002	Needle Localization By Xray	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	75893	Venous Sampling By Catheter	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	76942	Echo Guide For Biopsy	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	76998	Us Guide Intraop	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	77001	Fluoroguide For Vein Device	1	CMS Edit
75731	Artery X-Rays Adrenal Gland	77002	Needle Localization By Xray	1	CMS Edit
75733	Artery X-Rays Adrenals	75731	Artery X-Rays Adrenal Gland	1	CMS Edit
75733	Artery X-Rays Adrenals	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75733	Artery X-Rays Adrenals	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75733	Artery X-Rays Adrenals	75893	Venous Sampling By Catheter	1	CMS Edit
75733	Artery X-Rays Adrenals	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75733	Artery X-Rays Adrenals	76942	Echo Guide For Biopsy	1	CMS Edit
75733	Artery X-Rays Adrenals	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75733	Artery X-Rays Adrenals	77001	Fluoroguide For Vein Device	1	CMS Edit
75733	Artery X-Rays Adrenals	77002	Needle Localization By Xray	1	CMS Edit
75736	Artery X-Rays Pelvis	75825	Vein X-Ray Trunk	1	CMS Edit
75736	Artery X-Rays Pelvis	75893	Venous Sampling By Catheter	1	CMS Edit
75736	Artery X-Rays Pelvis	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75736	Artery X-Rays Pelvis	76942	Echo Guide For Biopsy	1	CMS Edit
75736	Artery X-Rays Pelvis	76998	Us Guide Intraop	1	CMS Edit
75736	Artery X-Rays Pelvis	77001	Fluoroguide For Vein Device	1	CMS Edit
75736	Artery X-Rays Pelvis	77002	Needle Localization By Xray	1	CMS Edit
75741	Artery X-Rays Lung	75746	Artery X-Rays Lung	1	CMS Edit
75741	Artery X-Rays Lung	75893	Venous Sampling By Catheter	1	CMS Edit
75741	Artery X-Rays Lung	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75741	Artery X-Rays Lung	76942	Echo Guide For Biopsy	1	CMS Edit
75741	Artery X-Rays Lung	76998	Us Guide Intraop	1	CMS Edit
75741	Artery X-Rays Lung	77001	Fluoroguide For Vein Device	1	CMS Edit
75741	Artery X-Rays Lung	77002	Needle Localization By Xray	1	CMS Edit
75743	Artery X-Rays Lungs	75741	Artery X-Rays Lung	1	CMS Edit
75743	Artery X-Rays Lungs	75746	Artery X-Rays Lung	1	CMS Edit
75743	Artery X-Rays Lungs	75893	Venous Sampling By Catheter	1	CMS Edit
75743	Artery X-Rays Lungs	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75743	Artery X-Rays Lungs	76942	Echo Guide For Biopsy	1	CMS Edit
75743	Artery X-Rays Lungs	76998	Us Guide Intraop	1	CMS Edit
75743	Artery X-Rays Lungs	77001	Fluoroguide For Vein Device	1	CMS Edit
75743	Artery X-Rays Lungs	77002	Needle Localization By Xray	1	CMS Edit
75746	Artery X-Rays Lung	75893	Venous Sampling By Catheter	1	CMS Edit
75746	Artery X-Rays Lung	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75746	Artery X-Rays Lung	76942	Echo Guide For Biopsy	1	CMS Edit
75746	Artery X-Rays Lung	76998	Us Guide Intraop	1	CMS Edit
75746	Artery X-Rays Lung	77001	Fluoroguide For Vein Device	1	CMS Edit
75746	Artery X-Rays Lung	77002	Needle Localization By Xray	1	CMS Edit
75756	Artery X-Rays Chest	75893	Venous Sampling By Catheter	1	CMS Edit
75756	Artery X-Rays Chest	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75756	Artery X-Rays Chest	76942	Echo Guide For Biopsy	1	CMS Edit
75756	Artery X-Rays Chest	76998	Us Guide Intraop	1	CMS Edit
75756	Artery X-Rays Chest	77001	Fluoroguide For Vein Device	1	CMS Edit
75756	Artery X-Rays Chest	77002	Needle Localization By Xray	1	CMS Edit
75774	Artery X-Ray Each Vessel	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75774	Artery X-Ray Each Vessel	76942	Echo Guide For Biopsy	1	CMS Edit
75774	Artery X-Ray Each Vessel	76998	Us Guide Intraop	1	CMS Edit
75774	Artery X-Ray Each Vessel	77001	Fluoroguide For Vein Device	1	CMS Edit
75774	Artery X-Ray Each Vessel	77002	Needle Localization By Xray	1	CMS Edit
75801	Lymph Vessel X-Ray Arm/Leg	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75801	Lymph Vessel X-Ray Arm/Leg	76942	Echo Guide For Biopsy	1	CMS Edit
75801	Lymph Vessel X-Ray Arm/Leg	76998	Us Guide Intraop	1	CMS Edit
75801	Lymph Vessel X-Ray Arm/Leg	77001	Fluoroguide For Vein Device	1	CMS Edit
75801	Lymph Vessel X-Ray Arm/Leg	77002	Needle Localization By Xray	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	75801	Lymph Vessel X-Ray Arm/Leg	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	76942	Echo Guide For Biopsy	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	76998	Us Guide Intraop	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	77001	Fluoroguide For Vein Device	1	CMS Edit
75803	Lymph Vessel X-Ray Arms/Legs	77002	Needle Localization By Xray	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	76810	Ob Us >= 14 Wks Addl Fetus	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	76942	Echo Guide For Biopsy	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	76998	Us Guide Intraop	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	77001	Fluoroguide For Vein Device	1	CMS Edit
75805	Lymph Vessel X-Ray Trunk	77002	Needle Localization By Xray	1	CMS Edit
75807	Lymph Vessel X-Ray Trunk	75805	Lymph Vessel X-Ray Trunk	1	CMS Edit
75807	Lymph Vessel X-Ray Trunk	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75807	Lymph Vessel X-Ray Trunk	76942	Echo Guide For Biopsy	1	CMS Edit
75807	Lymph Vessel X-Ray Trunk	76998	Us Guide Intraop	1	CMS Edit
75807	Lymph Vessel X-Ray Trunk	77001	Fluoroguide For Vein Device	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75807	Lymph Vessel X-Ray Trunk	77002	Needle Localization By Xray	1	CMS Edit
75809	Nonvascular Shunt X-Ray	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75809	Nonvascular Shunt X-Ray	76942	Echo Guide For Biopsy	1	CMS Edit
75809	Nonvascular Shunt X-Ray	76998	Us Guide Intraop	1	CMS Edit
75809	Nonvascular Shunt X-Ray	77001	Fluoroguide For Vein Device	1	CMS Edit
75809	Nonvascular Shunt X-Ray	77002	Needle Localization By Xray	1	CMS Edit
75810	Vein X-Ray Spleen/Liver	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75810	Vein X-Ray Spleen/Liver	76942	Echo Guide For Biopsy	1	CMS Edit
75810	Vein X-Ray Spleen/Liver	76998	Us Guide Intraop	1	CMS Edit
75810	Vein X-Ray Spleen/Liver	77001	Fluoroguide For Vein Device	1	CMS Edit
75810	Vein X-Ray Spleen/Liver	77002	Needle Localization By Xray	1	CMS Edit
75820	Vein X-Ray Arm/Leg	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75820	Vein X-Ray Arm/Leg	76942	Echo Guide For Biopsy	1	CMS Edit
75820	Vein X-Ray Arm/Leg	76998	Us Guide Intraop	1	CMS Edit
75820	Vein X-Ray Arm/Leg	77002	Needle Localization By Xray	1	CMS Edit
75820	Vein X-Ray Arm/Leg	78456	Acute Venous Thrombus Image	1	CMS Edit
75820	Vein X-Ray Arm/Leg	78457	Venous Thrombosis Imaging	1	CMS Edit
75820	Vein X-Ray Arm/Leg	78458	Ven Thrombosis Images Bilat	1	CMS Edit
75822	Vein X-Ray Arms/Legs	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75822	Vein X-Ray Arms/Legs	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75822	Vein X-Ray Arms/Legs	76942	Echo Guide For Biopsy	1	CMS Edit
75822	Vein X-Ray Arms/Legs	76998	Us Guide Intraop	1	CMS Edit
75822	Vein X-Ray Arms/Legs	77002	Needle Localization By Xray	1	CMS Edit
75825	Vein X-Ray Trunk	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75825	Vein X-Ray Trunk	76942	Echo Guide For Biopsy	1	CMS Edit
75825	Vein X-Ray Trunk	76998	Us Guide Intraop	1	CMS Edit
75825	Vein X-Ray Trunk	77002	Needle Localization By Xray	1	CMS Edit
75827	Vein X-Ray Chest	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75827	Vein X-Ray Chest	76942	Echo Guide For Biopsy	1	CMS Edit
75827	Vein X-Ray Chest	76998	Us Guide Intraop	1	CMS Edit
75827	Vein X-Ray Chest	77002	Needle Localization By Xray	1	CMS Edit
75831	Vein X-Ray Kidney	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75831	Vein X-Ray Kidney	76942	Echo Guide For Biopsy	1	CMS Edit
75831	Vein X-Ray Kidney	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75831	Vein X-Ray Kidney	77001	Fluoroguide For Vein Device	1	CMS Edit
75831	Vein X-Ray Kidney	77002	Needle Localization By Xray	1	CMS Edit
75833	Vein X-Ray Kidneys	75831	Vein X-Ray Kidney	1	CMS Edit
75833	Vein X-Ray Kidneys	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75833	Vein X-Ray Kidneys	76942	Echo Guide For Biopsy	1	CMS Edit
75833	Vein X-Ray Kidneys	76998	Us Guide Intraop	1	CMS Edit
75833	Vein X-Ray Kidneys	77001	Fluoroguide For Vein Device	1	CMS Edit
75833	Vein X-Ray Kidneys	77002	Needle Localization By Xray	1	CMS Edit
75840	Vein X-Ray Adrenal Gland	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75840	Vein X-Ray Adrenal Gland	76942	Echo Guide For Biopsy	1	CMS Edit
75840	Vein X-Ray Adrenal Gland	76998	Us Guide Intraop	1	CMS Edit
75840	Vein X-Ray Adrenal Gland	77001	Fluoroguide For Vein Device	1	CMS Edit
75840	Vein X-Ray Adrenal Gland	77002	Needle Localization By Xray	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	76942	Echo Guide For Biopsy	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	76998	Us Guide Intraop	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	77001	Fluoroguide For Vein Device	1	CMS Edit
75842	Vein X-Ray Adrenal Glands	77002	Needle Localization By Xray	1	CMS Edit
75860	Vein X-Ray Neck	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75860	Vein X-Ray Neck	76942	Echo Guide For Biopsy	1	CMS Edit
75860	Vein X-Ray Neck	76998	Us Guide Intraop	1	CMS Edit
75860	Vein X-Ray Neck	77001	Fluoroguide For Vein Device	1	CMS Edit
75860	Vein X-Ray Neck	77002	Needle Localization By Xray	1	CMS Edit
75870	Vein X-Ray Skull	75860	Vein X-Ray Neck	1	CMS Edit
75870	Vein X-Ray Skull	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75870	Vein X-Ray Skull	76942	Echo Guide For Biopsy	1	CMS Edit
75870	Vein X-Ray Skull	76998	Us Guide Intraop	1	CMS Edit
75870	Vein X-Ray Skull	77001	Fluoroguide For Vein Device	1	CMS Edit
75870	Vein X-Ray Skull	77002	Needle Localization By Xray	1	CMS Edit
75872	Vein X-Ray Skull Epidural	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75872	Vein X-Ray Skull Epidural	76942	Echo Guide For Biopsy	1	CMS Edit
75872	Vein X-Ray Skull Epidural	76998	Us Guide Intraop	1	CMS Edit
75872	Vein X-Ray Skull Epidural	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75872	Vein X-Ray Skull Epidural	77002	Needle Localization By Xray	1	CMS Edit
75880	Vein X-Ray Eye Socket	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75880	Vein X-Ray Eye Socket	76942	Echo Guide For Biopsy	1	CMS Edit
75880	Vein X-Ray Eye Socket	76998	Us Guide Intraop	1	CMS Edit
75880	Vein X-Ray Eye Socket	77001	Fluoroguide For Vein Device	1	CMS Edit
75880	Vein X-Ray Eye Socket	77002	Needle Localization By Xray	1	CMS Edit
75880	Vein X-Ray Eye Socket	78456	Acute Venous Thrombus Image	1	CMS Edit
75880	Vein X-Ray Eye Socket	78457	Venous Thrombosis Imaging	1	CMS Edit
75880	Vein X-Ray Eye Socket	78458	Ven Thrombosis Images Bilat	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	76942	Echo Guide For Biopsy	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	76998	Us Guide Intraop	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	77001	Fluoroguide For Vein Device	1	CMS Edit
75885	Vein X-Ray Liver W/Hemodynam	77002	Needle Localization By Xray	1	CMS Edit
75887	Vein X-Ray Liver W/O Hemodyn	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75887	Vein X-Ray Liver W/O Hemodyn	76942	Echo Guide For Biopsy	1	CMS Edit
75887	Vein X-Ray Liver W/O Hemodyn	76998	Us Guide Intraop	1	CMS Edit
75887	Vein X-Ray Liver W/O Hemodyn	77001	Fluoroguide For Vein Device	1	CMS Edit
75887	Vein X-Ray Liver W/O Hemodyn	77002	Needle Localization By Xray	1	CMS Edit
75889	Vein X-Ray Liver W/Hemodynam	75891	Vein X-Ray Liver	1	CMS Edit
75889	Vein X-Ray Liver W/Hemodynam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75889	Vein X-Ray Liver W/Hemodynam	76942	Echo Guide For Biopsy	1	CMS Edit
75889	Vein X-Ray Liver W/Hemodynam	76998	Us Guide Intraop	1	CMS Edit
75889	Vein X-Ray Liver W/Hemodynam	77001	Fluoroguide For Vein Device	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75889	Vein X-Ray Liver W/Hemodynam	77002	Needle Localization By Xray	1	CMS Edit
75891	Vein X-Ray Liver	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75891	Vein X-Ray Liver	76942	Echo Guide For Biopsy	1	CMS Edit
75891	Vein X-Ray Liver	76998	Us Guide Intraop	1	CMS Edit
75891	Vein X-Ray Liver	77001	Fluoroguide For Vein Device	1	CMS Edit
75891	Vein X-Ray Liver	77002	Needle Localization By Xray	1	CMS Edit
75893	Venous Sampling By Catheter	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
75893	Venous Sampling By Catheter	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75893	Venous Sampling By Catheter	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75893	Venous Sampling By Catheter	75825	Vein X-Ray Trunk	1	CMS Edit
75893	Venous Sampling By Catheter	75827	Vein X-Ray Chest	1	CMS Edit
75893	Venous Sampling By Catheter	75831	Vein X-Ray Kidney	1	CMS Edit
75893	Venous Sampling By Catheter	75833	Vein X-Ray Kidneys	1	CMS Edit
75893	Venous Sampling By Catheter	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75893	Venous Sampling By Catheter	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75893	Venous Sampling By Catheter	75860	Vein X-Ray Neck	1	CMS Edit
75893	Venous Sampling By Catheter	75870	Vein X-Ray Skull	1	CMS Edit
75893	Venous Sampling By Catheter	75872	Vein X-Ray Skull Epidural	1	CMS Edit
75893	Venous Sampling By Catheter	75880	Vein X-Ray Eye Socket	1	CMS Edit
75893	Venous Sampling By Catheter	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75893	Venous Sampling By Catheter	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
75893	Venous Sampling By Catheter	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75893	Venous Sampling By Catheter	75891	Vein X-Ray Liver	1	CMS Edit
75893	Venous Sampling By Catheter	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75893	Venous Sampling By Catheter	76942	Echo Guide For Biopsy	1	CMS Edit
75893	Venous Sampling By Catheter	76998	Us Guide Intraop	1	CMS Edit
75893	Venous Sampling By Catheter	77001	Fluoroguide For Vein Device	1	CMS Edit
75893	Venous Sampling By Catheter	77002	Needle Localization By Xray	1	CMS Edit
75894	X-Rays Transcath Therapy	74425	Urography Antegrade Rs&l	0	EVC Edit
75894	X-Rays Transcath Therapy	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75894	X-Rays Transcath Therapy	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
75894	X-Rays Transcath Therapy	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
75894	X-Rays Transcath Therapy	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
75894	X-Rays Transcath Therapy	75635	Ct Angio Abdominal Arteries	1	CMS Edit
75894	X-Rays Transcath Therapy	75705	Artery X-Rays Spine	1	CMS Edit
75894	X-Rays Transcath Therapy	75710	Artery X-Rays Arm/Leg	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75894	X-Rays Transcath Therapy	75716	Artery X-Rays Arms/Legs	1	CMS Edit
75894	X-Rays Transcath Therapy	75726	Artery X-Rays Abdomen	1	CMS Edit
75894	X-Rays Transcath Therapy	75731	Artery X-Rays Adrenal Gland	1	CMS Edit
75894	X-Rays Transcath Therapy	75733	Artery X-Rays Adrenals	1	CMS Edit
75894	X-Rays Transcath Therapy	75736	Artery X-Rays Pelvis	1	CMS Edit
75894	X-Rays Transcath Therapy	75741	Artery X-Rays Lung	1	CMS Edit
75894	X-Rays Transcath Therapy	75743	Artery X-Rays Lungs	1	CMS Edit
75894	X-Rays Transcath Therapy	75746	Artery X-Rays Lung	1	CMS Edit
75894	X-Rays Transcath Therapy	75756	Artery X-Rays Chest	1	CMS Edit
75894	X-Rays Transcath Therapy	75774	Artery X-Ray Each Vessel	1	CMS Edit
75894	X-Rays Transcath Therapy	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
75894	X-Rays Transcath Therapy	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75894	X-Rays Transcath Therapy	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75894	X-Rays Transcath Therapy	75825	Vein X-Ray Trunk	1	CMS Edit
75894	X-Rays Transcath Therapy	75827	Vein X-Ray Chest	1	CMS Edit
75894	X-Rays Transcath Therapy	75831	Vein X-Ray Kidney	1	CMS Edit
75894	X-Rays Transcath Therapy	75833	Vein X-Ray Kidneys	1	CMS Edit
75894	X-Rays Transcath Therapy	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75894	X-Rays Transcath Therapy	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75894	X-Rays Transcath Therapy	75860	Vein X-Ray Neck	1	CMS Edit
75894	X-Rays Transcath Therapy	75870	Vein X-Ray Skull	1	CMS Edit
75894	X-Rays Transcath Therapy	75872	Vein X-Ray Skull Epidural	1	CMS Edit
75894	X-Rays Transcath Therapy	75880	Vein X-Ray Eye Socket	1	CMS Edit
75894	X-Rays Transcath Therapy	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75894	X-Rays Transcath Therapy	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
75894	X-Rays Transcath Therapy	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75894	X-Rays Transcath Therapy	75891	Vein X-Ray Liver	1	CMS Edit
75894	X-Rays Transcath Therapy	75893	Venous Sampling By Catheter	1	CMS Edit
75894	X-Rays Transcath Therapy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75894	X-Rays Transcath Therapy	76942	Echo Guide For Biopsy	1	CMS Edit
75894	X-Rays Transcath Therapy	76998	Us Guide Intraop	1	CMS Edit
75894	X-Rays Transcath Therapy	77001	Fluoroguide For Vein Device	1	CMS Edit
75894	X-Rays Transcath Therapy	77002	Needle Localization By Xray	1	CMS Edit
75898	Follow-Up Angiography	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75898	Follow-Up Angiography	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
75898	Follow-Up Angiography	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
75898	Follow-Up Angiography	75630	X-Ray Aorta Leg Arteries	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75898	Follow-Up Angiography	75635	Ct Angio Abdominal Arteries	1	CMS Edit
75898	Follow-Up Angiography	75705	Artery X-Rays Spine	1	CMS Edit
75898	Follow-Up Angiography	75710	Artery X-Rays Arm/Leg	1	CMS Edit
75898	Follow-Up Angiography	75716	Artery X-Rays Arms/Legs	1	CMS Edit
75898	Follow-Up Angiography	75726	Artery X-Rays Abdomen	1	CMS Edit
75898	Follow-Up Angiography	75731	Artery X-Rays Adrenal Gland	1	CMS Edit
75898	Follow-Up Angiography	75733	Artery X-Rays Adrenals	1	CMS Edit
75898	Follow-Up Angiography	75736	Artery X-Rays Pelvis	1	CMS Edit
75898	Follow-Up Angiography	75741	Artery X-Rays Lung	1	CMS Edit
75898	Follow-Up Angiography	75743	Artery X-Rays Lungs	1	CMS Edit
75898	Follow-Up Angiography	75746	Artery X-Rays Lung	1	CMS Edit
75898	Follow-Up Angiography	75756	Artery X-Rays Chest	1	CMS Edit
75898	Follow-Up Angiography	75774	Artery X-Ray Each Vessel	1	CMS Edit
75898	Follow-Up Angiography	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
75898	Follow-Up Angiography	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75898	Follow-Up Angiography	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75898	Follow-Up Angiography	75825	Vein X-Ray Trunk	1	CMS Edit
75898	Follow-Up Angiography	75827	Vein X-Ray Chest	1	CMS Edit
75898	Follow-Up Angiography	75831	Vein X-Ray Kidney	1	CMS Edit
75898	Follow-Up Angiography	75833	Vein X-Ray Kidneys	1	CMS Edit
75898	Follow-Up Angiography	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75898	Follow-Up Angiography	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75898	Follow-Up Angiography	75860	Vein X-Ray Neck	1	CMS Edit
75898	Follow-Up Angiography	75870	Vein X-Ray Skull	1	CMS Edit
75898	Follow-Up Angiography	75872	Vein X-Ray Skull Epidural	1	CMS Edit
75898	Follow-Up Angiography	75880	Vein X-Ray Eye Socket	1	CMS Edit
75898	Follow-Up Angiography	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75898	Follow-Up Angiography	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
75898	Follow-Up Angiography	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75898	Follow-Up Angiography	75891	Vein X-Ray Liver	1	CMS Edit
75898	Follow-Up Angiography	75893	Venous Sampling By Catheter	1	CMS Edit
75898	Follow-Up Angiography	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75898	Follow-Up Angiography	76942	Echo Guide For Biopsy	1	CMS Edit
75898	Follow-Up Angiography	76998	Us Guide Intraop	1	CMS Edit
75898	Follow-Up Angiography	77001	Fluoroguide For Vein Device	1	CMS Edit
75898	Follow-Up Angiography	77002	Needle Localization By Xray	1	CMS Edit
75901	Remove Cva Device Obstruct	75741	Artery X-Rays Lung	1	CMS Edit
75901	Remove Cva Device Obstruct	75743	Artery X-Rays Lungs	1	CMS Edit
75901	Remove Cva Device Obstruct	75746	Artery X-Rays Lung	1	CMS Edit
75901	Remove Cva Device Obstruct	75825	Vein X-Ray Trunk	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75901	Remove Cva Device Obstruct	75827	Vein X-Ray Chest	1	CMS Edit
75901	Remove Cva Device Obstruct	75893	Venous Sampling By Catheter	1	CMS Edit
75901	Remove Cva Device Obstruct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75901	Remove Cva Device Obstruct	76942	Echo Guide For Biopsy	1	CMS Edit
75901	Remove Cva Device Obstruct	76998	Us Guide Intraop	1	CMS Edit
75901	Remove Cva Device Obstruct	77001	Fluoroguide For Vein Device	1	CMS Edit
75901	Remove Cva Device Obstruct	77002	Needle Localization By Xray	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75741	Artery X-Rays Lung	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75743	Artery X-Rays Lungs	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75746	Artery X-Rays Lung	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75827	Vein X-Ray Chest	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75891	Vein X-Ray Liver	1	CMS Edit
75902	Remove Cva Lumen Obstruct	75893	Venous Sampling By Catheter	1	CMS Edit
75902	Remove Cva Lumen Obstruct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75902	Remove Cva Lumen Obstruct	76942	Echo Guide For Biopsy	1	CMS Edit
75902	Remove Cva Lumen Obstruct	76998	Us Guide Intraop	1	CMS Edit
75902	Remove Cva Lumen Obstruct	77001	Fluoroguide For Vein Device	1	CMS Edit
75902	Remove Cva Lumen Obstruct	77002	Needle Localization By Xray	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	75893	Venous Sampling By Catheter	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	75957	Xray Endovasc Thor Ao Repr	0	CMS Edit
75956	Xray Endovasc Thor Ao Repr	75959	Xray Place Dist Ext Thor Ao	0	CMS Edit
75956	Xray Endovasc Thor Ao Repr	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	76120	Cine/Video X-Rays	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	76942	Echo Guide For Biopsy	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	76998	Us Guide Intraop	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	77001	Fluoroguide For Vein Device	1	CMS Edit
75956	Xray Endovasc Thor Ao Repr	77002	Needle Localization By Xray	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	75605	Contrast Exam Thoracic Aorta	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75957	Xray Endovasc Thor Ao Repr	75893	Venous Sampling By Catheter	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	75959	Xray Place Dist Ext Thor Ao	0	CMS Edit
75957	Xray Endovasc Thor Ao Repr	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	76120	Cine/Video X-Rays	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	76942	Echo Guide For Biopsy	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	76998	Us Guide Intraop	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	77001	Fluoroguide For Vein Device	1	CMS Edit
75957	Xray Endovasc Thor Ao Repr	77002	Needle Localization By Xray	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	75893	Venous Sampling By Catheter	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	76120	Cine/Video X-Rays	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	76942	Echo Guide For Biopsy	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	76998	Us Guide Intraop	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	77001	Fluoroguide For Vein Device	1	CMS Edit
75958	Xray Place Prox Ext Thor Ao	77002	Needle Localization By Xray	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	75893	Venous Sampling By Catheter	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	76120	Cine/Video X-Rays	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	76125	Cine/Video X-Rays Add-On	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	76942	Echo Guide For Biopsy	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	76998	Us Guide Intraop	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	77001	Fluoroguide For Vein Device	1	CMS Edit
75959	Xray Place Dist Ext Thor Ao	77002	Needle Localization By Xray	1	CMS Edit
75970	Vascular Biopsy	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
75970	Vascular Biopsy	75605	Contrast Exam Thoracic Aorta	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75970	Vascular Biopsy	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
75970	Vascular Biopsy	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
75970	Vascular Biopsy	75635	Ct Angio Abdominal Arteries	1	CMS Edit
75970	Vascular Biopsy	75705	Artery X-Rays Spine	1	CMS Edit
75970	Vascular Biopsy	75710	Artery X-Rays Arm/Leg	1	CMS Edit
75970	Vascular Biopsy	75716	Artery X-Rays Arms/Legs	1	CMS Edit
75970	Vascular Biopsy	75726	Artery X-Rays Abdomen	1	CMS Edit
75970	Vascular Biopsy	75731	Artery X-Rays Adrenal Gland	1	CMS Edit
75970	Vascular Biopsy	75733	Artery X-Rays Adrenals	1	CMS Edit
75970	Vascular Biopsy	75736	Artery X-Rays Pelvis	1	CMS Edit
75970	Vascular Biopsy	75741	Artery X-Rays Lung	1	CMS Edit
75970	Vascular Biopsy	75743	Artery X-Rays Lungs	1	CMS Edit
75970	Vascular Biopsy	75746	Artery X-Rays Lung	1	CMS Edit
75970	Vascular Biopsy	75756	Artery X-Rays Chest	1	CMS Edit
75970	Vascular Biopsy	75774	Artery X-Ray Each Vessel	1	CMS Edit
75970	Vascular Biopsy	75810	Vein X-Ray Spleen/Liver	1	CMS Edit
75970	Vascular Biopsy	75820	Vein X-Ray Arm/Leg	1	CMS Edit
75970	Vascular Biopsy	75822	Vein X-Ray Arms/Legs	1	CMS Edit
75970	Vascular Biopsy	75825	Vein X-Ray Trunk	1	CMS Edit
75970	Vascular Biopsy	75827	Vein X-Ray Chest	1	CMS Edit
75970	Vascular Biopsy	75831	Vein X-Ray Kidney	1	CMS Edit
75970	Vascular Biopsy	75833	Vein X-Ray Kidneys	1	CMS Edit
75970	Vascular Biopsy	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
75970	Vascular Biopsy	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
75970	Vascular Biopsy	75860	Vein X-Ray Neck	1	CMS Edit
75970	Vascular Biopsy	75870	Vein X-Ray Skull	1	CMS Edit
75970	Vascular Biopsy	75872	Vein X-Ray Skull Epidural	1	CMS Edit
75970	Vascular Biopsy	75880	Vein X-Ray Eye Socket	1	CMS Edit
75970	Vascular Biopsy	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75970	Vascular Biopsy	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
75970	Vascular Biopsy	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
75970	Vascular Biopsy	75891	Vein X-Ray Liver	1	CMS Edit
75970	Vascular Biopsy	75893	Venous Sampling By Catheter	1	CMS Edit
75970	Vascular Biopsy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75970	Vascular Biopsy	76942	Echo Guide For Biopsy	1	CMS Edit
75970	Vascular Biopsy	76998	Us Guide Intraop	1	CMS Edit
75970	Vascular Biopsy	77001	Fluoroguide For Vein Device	1	CMS Edit
75970	Vascular Biopsy	77002	Needle Localization By Xray	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
75984	Xray Control Catheter Change	75893	Venous Sampling By Catheter	1	CMS Edit
75984	Xray Control Catheter Change	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75984	Xray Control Catheter Change	77001	Fluoroguide For Vein Device	1	CMS Edit
75984	Xray Control Catheter Change	77002	Needle Localization By Xray	1	CMS Edit
75989	Abscess Drainage Under X-Ray	75893	Venous Sampling By Catheter	1	CMS Edit
75989	Abscess Drainage Under X-Ray	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
75989	Abscess Drainage Under X-Ray	76376	3D Render W/Intrp Postproces	1	CMS Edit
75989	Abscess Drainage Under X-Ray	76377	3D Render W/Intrp Postproces	1	CMS Edit
75989	Abscess Drainage Under X-Ray	76942	Echo Guide For Biopsy	1	CMS Edit
75989	Abscess Drainage Under X-Ray	76998	Us Guide Intraop	1	CMS Edit
75989	Abscess Drainage Under X-Ray	77001	Fluoroguide For Vein Device	1	CMS Edit
75989	Abscess Drainage Under X-Ray	77002	Needle Localization By Xray	1	CMS Edit
75989	Abscess Drainage Under X-Ray	77012	Ct Scan For Needle Biopsy	1	CMS Edit
75989	Abscess Drainage Under X-Ray	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
76000	Fluoroscopy <1 Hr Phys/Qhp	76125	Cine/Video X-Rays Add-On	1	CMS Edit
76000	Fluoroscopy <1 Hr Phys/Qhp	76942	Echo Guide For Biopsy	1	CMS Edit
76000	Fluoroscopy <1 Hr Phys/Qhp	76998	Us Guide Intraop	1	CMS Edit
76000	Fluoroscopy <1 Hr Phys/Qhp	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
76000	Fluoroscopy <1 Hr Phys/Qhp	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
76010	X-Ray Nose To Rectum	71045	X-Ray Exam Chest 1 View	1	CMS Edit
76010	X-Ray Nose To Rectum	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
76010	X-Ray Nose To Rectum	71047	X-Ray Exam Chest 3 Views	1	CMS Edit
76010	X-Ray Nose To Rectum	71048	X-Ray Exam Chest 4+ Views	1	CMS Edit
76010	X-Ray Nose To Rectum	74018	X-Ray Exam Abdomen 1 View	1	CMS Edit
76080	X-Ray Exam Of Fistula	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76080	X-Ray Exam Of Fistula	77001	Fluoroguide For Vein Device	1	CMS Edit
76080	X-Ray Exam Of Fistula	77002	Needle Localization By Xray	1	CMS Edit
76100	X-Ray Exam Of Body Section	74400	Urography Iv +-Kub Tomog	1	CMS Edit
76100	X-Ray Exam Of Body Section	74410	Urography Nfs Drip&/Bolus	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76100	X-Ray Exam Of Body Section	74415	Urography Nfs Drip&/Blis W/Nf	1	CMS Edit
76100	X-Ray Exam Of Body Section	74420	Urography Rtrgr +-Kub	1	CMS Edit
76100	X-Ray Exam Of Body Section	74425	Urography Antegrade Rs&l	1	CMS Edit
76100	X-Ray Exam Of Body Section	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76100	X-Ray Exam Of Body Section	77001	Fluoroguide For Vein Device	1	CMS Edit
76120	Cine/Video X-Rays	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76120	Cine/Video X-Rays	77001	Fluoroguide For Vein Device	1	CMS Edit
76120	Cine/Video X-Rays	77002	Needle Localization By Xray	1	CMS Edit
76125	Cine/Video X-Rays Add-On	76120	Cine/Video X-Rays	1	CMS Edit
76376	3D Render W/Intrp Postproces	76942	Echo Guide For Biopsy	1	CMS Edit
76376	3D Render W/Intrp Postproces	76998	Us Guide Intraop	1	CMS Edit
76376	3D Render W/Intrp Postproces	93319	3D Echo Img Cgen Car Anomal	0	CMS Edit
76376	3D Render W/Intrp Postproces	G0279	Dx Digtl Brst Tomosynthesis Uni/Bil	0	EVC Edit
76377	3D Render W/Intrp Postproces	76376	3D Render W/Intrp Postproces	0	CMS Edit
76377	3D Render W/Intrp Postproces	76942	Echo Guide For Biopsy	1	CMS Edit
76377	3D Render W/Intrp Postproces	76998	Us Guide Intraop	1	CMS Edit
76377	3D Render W/Intrp Postproces	93319	3D Echo Img Cgen Car Anomal	0	CMS Edit
76377	3D Render W/Intrp Postproces	G0279	Dx Digtl Brst Tomosynthesis Uni/Bil	0	EVC Edit
76380	Cat Scan Follow-Up Study	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
76380	Cat Scan Follow-Up Study	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
76506	Echo Exam Of Head	76998	Us Guide Intraop	1	CMS Edit
76536	Us Exam Of Head And Neck	76942	Echo Guide For Biopsy	1	CMS Edit
76536	Us Exam Of Head And Neck	76998	Us Guide Intraop	1	CMS Edit
76536	Us Exam Of Head And Neck	93880	Extracranial Bilat Study	1	CMS Edit
76604	Us Exam Chest	76942	Echo Guide For Biopsy	1	CMS Edit
76604	Us Exam Chest	76998	Us Guide Intraop	1	CMS Edit
76641	Ultrasound Breast Complete	76642	Ultrasound Breast Limited	1	CMS Edit
76641	Ultrasound Breast Complete	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
76641	Ultrasound Breast Complete	76942	Echo Guide For Biopsy	1	CMS Edit
76641	Ultrasound Breast Complete	76998	Us Guide Intraop	1	CMS Edit
76642	Ultrasound Breast Limited	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76642	Ultrasound Breast Limited	76942	Echo Guide For Biopsy	1	CMS Edit
76642	Ultrasound Breast Limited	76998	Us Guide Intraop	1	CMS Edit
76700	Us Exam Abdom Complete	76705	Echo Exam Of Abdomen	1	CMS Edit
76700	Us Exam Abdom Complete	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
76700	Us Exam Abdom Complete	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76700	Us Exam Abdom Complete	76776	Us Exam K Transpl W/Doppler	1	CMS Edit
76700	Us Exam Abdom Complete	76942	Echo Guide For Biopsy	1	CMS Edit
76700	Us Exam Abdom Complete	76998	Us Guide Intraop	1	CMS Edit
76705	Echo Exam Of Abdomen	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76705	Echo Exam Of Abdomen	76776	Us Exam K Transpl W/Doppler	1	CMS Edit
76705	Echo Exam Of Abdomen	76942	Echo Guide For Biopsy	1	CMS Edit
76705	Echo Exam Of Abdomen	76998	Us Guide Intraop	1	CMS Edit
76706	Us Abdl Aorta Screen Aaa	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76706	Us Abdl Aorta Screen Aaa	76857	Us Exam Pelvic Limited	1	CMS Edit
76706	Us Abdl Aorta Screen Aaa	76942	Echo Guide For Biopsy	1	CMS Edit
76706	Us Abdl Aorta Screen Aaa	76998	Us Guide Intraop	1	CMS Edit
76770	Us Exam Abdo Back Wall Comp	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
76770	Us Exam Abdo Back Wall Comp	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76770	Us Exam Abdo Back Wall Comp	76942	Echo Guide For Biopsy	1	CMS Edit
76770	Us Exam Abdo Back Wall Comp	76998	Us Guide Intraop	1	CMS Edit
76775	Us Exam Abdo Back Wall Lim	76857	Us Exam Pelvic Limited	1	CMS Edit
76775	Us Exam Abdo Back Wall Lim	76942	Echo Guide For Biopsy	1	CMS Edit
76775	Us Exam Abdo Back Wall Lim	76998	Us Guide Intraop	1	CMS Edit
76776	Us Exam K Transpl W/Doppler	76706	Us Abdl Aorta Screen Aaa	0	CMS Edit
76776	Us Exam K Transpl W/Doppler	76775	Us Exam Abdo Back Wall Lim	0	CMS Edit
76776	Us Exam K Transpl W/Doppler	76942	Echo Guide For Biopsy	1	CMS Edit
76776	Us Exam K Transpl W/Doppler	76998	Us Guide Intraop	1	CMS Edit
76800	Us Exam Spinal Canal	76942	Echo Guide For Biopsy	1	CMS Edit
76800	Us Exam Spinal Canal	76998	Us Guide Intraop	1	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76805	Ob Us >= 14 Wks Sngl Fetus	0	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76810	Ob Us >= 14 Wks Addl Fetus	0	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76801	Ob Us < 14 Wks Single Fetus	76812	Ob Us Detailed Addl Fetus	0	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76818	Fetal Biophys Profile W/Nst	0	EVC Edit
76801	Ob Us < 14 Wks Single Fetus	76819	Fetal Biophys Profil W/O Nst	0	EVC Edit
76801	Ob Us < 14 Wks Single Fetus	76830	Transvaginal Us Non-Ob	0	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76801	Ob Us < 14 Wks Single Fetus	76998	Us Guide Intraop	1	CMS Edit
76802	Ob Us < 14 Wks Addl Fetus	76815	Ob Us Limited Fetus(S)	0	EVC Edit
76802	Ob Us < 14 Wks Addl Fetus	76816	Ob Us Follow-Up Per Fetus	0	EVC Edit
76802	Ob Us < 14 Wks Addl Fetus	76818	Fetal Biophys Profile W/Nst	0	EVC Edit
76802	Ob Us < 14 Wks Addl Fetus	76819	Fetal Biophys Profil W/O Nst	0	EVC Edit
76802	Ob Us < 14 Wks Addl Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76802	Ob Us < 14 Wks Addl Fetus	76998	Us Guide Intraop	1	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76802	Ob Us < 14 Wks Addl Fetus	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76812	Ob Us Detailed Addl Fetus	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76830	Transvaginal Us Non-Ob	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76831	Echo Exam Uterus	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76856	Us Exam Pelvic Complete	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76857	Us Exam Pelvic Limited	0	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76805	Ob Us >= 14 Wks Snl Fetus	76998	Us Guide Intraop	1	CMS Edit
76810	Ob Us >= 14 Wks Addl Fetus	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76810	Ob Us >= 14 Wks Addl Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76810	Ob Us >= 14 Wks Addl Fetus	76998	Us Guide Intraop	1	CMS Edit
76811	Ob Us Detailed Snl Fetus	76801	Ob Us < 14 Wks Single Fetus	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76805	Ob Us >= 14 Wks Snl Fetus	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76810	Ob Us >= 14 Wks Addl Fetus	0	EVC Edit
76811	Ob Us Detailed Snl Fetus	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76830	Transvaginal Us Non-Ob	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76831	Echo Exam Uterus	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76856	Us Exam Pelvic Complete	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76857	Us Exam Pelvic Limited	0	CMS Edit
76811	Ob Us Detailed Snl Fetus	76941	Echo Guide For Transfusion	1	CMS Edit
76811	Ob Us Detailed Snl Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76811	Ob Us Detailed Snl Fetus	76998	Us Guide Intraop	1	CMS Edit
76812	Ob Us Detailed Addl Fetus	76810	Ob Us >= 14 Wks Addl Fetus	0	EVC Edit
76812	Ob Us Detailed Addl Fetus	76815	Ob Us Limited Fetus(S)	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76812	Ob Us Detailed Addl Fetus	76816	Ob Us Follow-Up Per Fetus	0	EVC Edit
76812	Ob Us Detailed Addl Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76812	Ob Us Detailed Addl Fetus	76998	Us Guide Intraop	1	CMS Edit
76813	Ob Us Nuchal Meas 1 Gest	76801	Ob Us < 14 Wks Single Fetus	0	EVC Edit
76813	Ob Us Nuchal Meas 1 Gest	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76813	Ob Us Nuchal Meas 1 Gest	76830	Transvaginal Us Non-Ob	1	CMS Edit
76813	Ob Us Nuchal Meas 1 Gest	76857	Us Exam Pelvic Limited	1	CMS Edit
76813	Ob Us Nuchal Meas 1 Gest	76942	Echo Guide For Biopsy	1	CMS Edit
76813	Ob Us Nuchal Meas 1 Gest	76998	Us Guide Intraop	1	CMS Edit
76814	Ob Us Nuchal Meas Add-On	76942	Echo Guide For Biopsy	1	CMS Edit
76814	Ob Us Nuchal Meas Add-On	76998	Us Guide Intraop	1	CMS Edit
76815	Ob Us Limited Fetus(S)	76827	Echo Exam Of Fetal Heart	1	CMS Edit
76815	Ob Us Limited Fetus(S)	76828	Echo Exam Of Fetal Heart	1	CMS Edit
76815	Ob Us Limited Fetus(S)	76857	Us Exam Pelvic Limited	0	CMS Edit
76815	Ob Us Limited Fetus(S)	76942	Echo Guide For Biopsy	1	CMS Edit
76815	Ob Us Limited Fetus(S)	76998	Us Guide Intraop	1	CMS Edit
76816	Ob Us Follow-Up Per Fetus	76810	Ob Us >= 14 Wks Addl Fetus	1	CMS Edit
76816	Ob Us Follow-Up Per Fetus	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76816	Ob Us Follow-Up Per Fetus	76857	Us Exam Pelvic Limited	0	CMS Edit
76816	Ob Us Follow-Up Per Fetus	76942	Echo Guide For Biopsy	1	CMS Edit
76816	Ob Us Follow-Up Per Fetus	76998	Us Guide Intraop	1	CMS Edit
76817	Transvaginal Us Obstetric	76830	Transvaginal Us Non-Ob	0	CMS Edit
76817	Transvaginal Us Obstetric	76831	Echo Exam Uterus	0	CMS Edit
76817	Transvaginal Us Obstetric	76856	Us Exam Pelvic Complete	0	CMS Edit
76817	Transvaginal Us Obstetric	76857	Us Exam Pelvic Limited	0	CMS Edit
76817	Transvaginal Us Obstetric	76941	Echo Guide For Transfusion	1	CMS Edit
76817	Transvaginal Us Obstetric	76942	Echo Guide For Biopsy	1	CMS Edit
76817	Transvaginal Us Obstetric	76998	Us Guide Intraop	1	CMS Edit
76818	Fetal Biophys Profile W/Nst	76376	3D Render W/Intrp Postproces	1	CMS Edit
76818	Fetal Biophys Profile W/Nst	76377	3D Render W/Intrp Postproces	1	CMS Edit
76818	Fetal Biophys Profile W/Nst	76819	Fetal Biophys Profil W/O Nst	1	CMS Edit
76818	Fetal Biophys Profile W/Nst	76998	Us Guide Intraop	1	CMS Edit
76819	Fetal Biophys Profil W/O Nst	76376	3D Render W/Intrp Postproces	1	CMS Edit
76819	Fetal Biophys Profil W/O Nst	76377	3D Render W/Intrp Postproces	1	CMS Edit
76819	Fetal Biophys Profil W/O Nst	76998	Us Guide Intraop	1	CMS Edit
76820	Umbilical Artery Echo	76827	Echo Exam Of Fetal Heart	0	EVC Edit
76820	Umbilical Artery Echo	93325	Doppler Color Flow Add-On	1	CMS Edit
76821	Middle Cerebral Artery Echo	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76821	Middle Cerebral Artery Echo	76377	3D Render W/Intrp Postproces	1	CMS Edit
76821	Middle Cerebral Artery Echo	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76821	Middle Cerebral Artery Echo	93325	Doppler Color Flow Add-On	1	CMS Edit
76825	Echo Exam Of Fetal Heart	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76825	Echo Exam Of Fetal Heart	76998	Us Guide Intraop	1	CMS Edit
76825	Echo Exam Of Fetal Heart	93325	Doppler Color Flow Add-On	0	EVC Edit
76826	Echo Exam Of Fetal Heart	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76826	Echo Exam Of Fetal Heart	76825	Echo Exam Of Fetal Heart	1	CMS Edit
76826	Echo Exam Of Fetal Heart	76998	Us Guide Intraop	1	CMS Edit
76826	Echo Exam Of Fetal Heart	93325	Doppler Color Flow Add-On	0	EVC Edit
76827	Echo Exam Of Fetal Heart	76376	3D Render W/Intrp Postproces	1	CMS Edit
76827	Echo Exam Of Fetal Heart	76377	3D Render W/Intrp Postproces	1	CMS Edit
76827	Echo Exam Of Fetal Heart	76998	Us Guide Intraop	1	CMS Edit
76828	Echo Exam Of Fetal Heart	76376	3D Render W/Intrp Postproces	1	CMS Edit
76828	Echo Exam Of Fetal Heart	76377	3D Render W/Intrp Postproces	1	CMS Edit
76828	Echo Exam Of Fetal Heart	76827	Echo Exam Of Fetal Heart	1	CMS Edit
76828	Echo Exam Of Fetal Heart	76998	Us Guide Intraop	1	CMS Edit
76830	Transvaginal Us Non-Ob	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76830	Transvaginal Us Non-Ob	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76830	Transvaginal Us Non-Ob	76942	Echo Guide For Biopsy	1	CMS Edit
76830	Transvaginal Us Non-Ob	76998	Us Guide Intraop	1	CMS Edit
76831	Echo Exam Uterus	76801	Ob Us < 14 Wks Single Fetus	0	CMS Edit
76831	Echo Exam Uterus	76813	Ob Us Nuchal Meas 1 Gest	1	CMS Edit
76831	Echo Exam Uterus	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76831	Echo Exam Uterus	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76831	Echo Exam Uterus	76830	Transvaginal Us Non-Ob	1	CMS Edit
76831	Echo Exam Uterus	76856	Us Exam Pelvic Complete	0	EVC Edit
76831	Echo Exam Uterus	76942	Echo Guide For Biopsy	1	CMS Edit
76831	Echo Exam Uterus	76998	Us Guide Intraop	1	CMS Edit
76856	Us Exam Pelvic Complete	76801	Ob Us < 14 Wks Single Fetus	0	CMS Edit
76856	Us Exam Pelvic Complete	76813	Ob Us Nuchal Meas 1 Gest	1	CMS Edit
76856	Us Exam Pelvic Complete	76815	Ob Us Limited Fetus(S)	0	CMS Edit
76856	Us Exam Pelvic Complete	76816	Ob Us Follow-Up Per Fetus	0	CMS Edit
76856	Us Exam Pelvic Complete	76857	Us Exam Pelvic Limited	1	CMS Edit
76856	Us Exam Pelvic Complete	76941	Echo Guide For Transfusion	1	CMS Edit
76856	Us Exam Pelvic Complete	76942	Echo Guide For Biopsy	1	CMS Edit
76856	Us Exam Pelvic Complete	76998	Us Guide Intraop	1	CMS Edit
76856	Us Exam Pelvic Complete	93976	Vascular Study	1	CMS Edit
76856	Us Exam Pelvic Complete	93980	Penile Vascular Study	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76857	Us Exam Pelvic Limited	76801	Ob Us < 14 Wks Single Fetus	0	CMS Edit
76857	Us Exam Pelvic Limited	76810	Ob Us >= 14 Wks Addl Fetus	1	CMS Edit
76857	Us Exam Pelvic Limited	76941	Echo Guide For Transfusion	1	CMS Edit
76857	Us Exam Pelvic Limited	76942	Echo Guide For Biopsy	1	CMS Edit
76857	Us Exam Pelvic Limited	76998	Us Guide Intraop	1	CMS Edit
76857	Us Exam Pelvic Limited	93975	Vascular Study	1	CMS Edit
76857	Us Exam Pelvic Limited	93976	Vascular Study	1	CMS Edit
76857	Us Exam Pelvic Limited	93978	Vascular Study	1	CMS Edit
76857	Us Exam Pelvic Limited	93979	Vascular Study	1	CMS Edit
76857	Us Exam Pelvic Limited	93980	Penile Vascular Study	1	CMS Edit
76857	Us Exam Pelvic Limited	93981	Penile Vascular Study	1	CMS Edit
76870	Us Exam Scrotum	76942	Echo Guide For Biopsy	1	CMS Edit
76870	Us Exam Scrotum	76998	Us Guide Intraop	1	CMS Edit
76872	Us Transrectal	76942	Echo Guide For Biopsy	1	CMS Edit
76872	Us Transrectal	76998	Us Guide Intraop	1	CMS Edit
76873	Echograp Trans R Pros Study	76942	Echo Guide For Biopsy	1	CMS Edit
76873	Echograp Trans R Pros Study	76998	Us Guide Intraop	1	CMS Edit
76881	Us Compl Joint R-T W/Img	76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	1	CMS Edit
76881	Us Compl Joint R-T W/Img	76942	Echo Guide For Biopsy	1	CMS Edit
76881	Us Compl Joint R-T W/Img	76998	Us Guide Intraop	1	CMS Edit
76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	76942	Echo Guide For Biopsy	1	CMS Edit
76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	76998	Us Guide Intraop	1	CMS Edit
76885	Us Exam Infant Hips Dynamic	76376	3D Render W/Intrp Postproces	1	CMS Edit
76885	Us Exam Infant Hips Dynamic	76377	3D Render W/Intrp Postproces	1	CMS Edit
76885	Us Exam Infant Hips Dynamic	76886	Us Exam Infant Hips Static	1	CMS Edit
76885	Us Exam Infant Hips Dynamic	76998	Us Guide Intraop	1	CMS Edit
76886	Us Exam Infant Hips Static	76376	3D Render W/Intrp Postproces	1	CMS Edit
76886	Us Exam Infant Hips Static	76377	3D Render W/Intrp Postproces	1	CMS Edit
76886	Us Exam Infant Hips Static	76998	Us Guide Intraop	1	CMS Edit
76932	Echo Guide For Heart Biopsy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76932	Echo Guide For Heart Biopsy	76376	3D Render W/Intrp Postproces	1	CMS Edit
76932	Echo Guide For Heart Biopsy	76377	3D Render W/Intrp Postproces	1	CMS Edit
76932	Echo Guide For Heart Biopsy	76942	Echo Guide For Biopsy	1	CMS Edit
76932	Echo Guide For Heart Biopsy	76998	Us Guide Intraop	1	CMS Edit
76932	Echo Guide For Heart Biopsy	77001	Fluoroguide For Vein Device	1	CMS Edit
76932	Echo Guide For Heart Biopsy	77002	Needle Localization By Xray	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76932	Echo Guide For Heart Biopsy	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76932	Echo Guide For Heart Biopsy	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
76936	Echo Guide For Artery Repair	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76936	Echo Guide For Artery Repair	76376	3D Render W/Intrp Postproces	1	CMS Edit
76936	Echo Guide For Artery Repair	76377	3D Render W/Intrp Postproces	1	CMS Edit
76936	Echo Guide For Artery Repair	76942	Echo Guide For Biopsy	1	CMS Edit
76936	Echo Guide For Artery Repair	76998	Us Guide Intraop	1	CMS Edit
76936	Echo Guide For Artery Repair	77001	Fluoroguide For Vein Device	1	CMS Edit
76936	Echo Guide For Artery Repair	77002	Needle Localization By Xray	1	CMS Edit
76936	Echo Guide For Artery Repair	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76936	Echo Guide For Artery Repair	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
76936	Echo Guide For Artery Repair	93922	Upr/L Xtremity Art 2 Levels	1	CMS Edit
76936	Echo Guide For Artery Repair	93923	Upr/Lxtr Art Stdy 3+ Lvls	1	CMS Edit
76936	Echo Guide For Artery Repair	93924	Lwr Xtr Vasc Stdy Bilat	1	CMS Edit
76936	Echo Guide For Artery Repair	93926	Lower Extremity Study	1	CMS Edit
76936	Echo Guide For Artery Repair	93930	Upper Extremity Study	1	CMS Edit
76936	Echo Guide For Artery Repair	93931	Upper Extremity Study	1	CMS Edit
76936	Echo Guide For Artery Repair	93985	Dup-Scan Hemo Compl Bi Std	1	CMS Edit
76936	Echo Guide For Artery Repair	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
76936	Echo Guide For Artery Repair	93990	Doppler Flow Testing	1	CMS Edit
76937	Us Guide Vascular Access	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76937	Us Guide Vascular Access	76942	Echo Guide For Biopsy	1	CMS Edit
76937	Us Guide Vascular Access	76998	Us Guide Intraop	1	CMS Edit
76937	Us Guide Vascular Access	77002	Needle Localization By Xray	1	CMS Edit
76940	Us Guide Tissue Ablation	76942	Echo Guide For Biopsy	1	CMS Edit
76940	Us Guide Tissue Ablation	76998	Us Guide Intraop	1	CMS Edit
76941	Echo Guide For Transfusion	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76941	Echo Guide For Transfusion	76801	Ob Us < 14 Wks Single Fetus	1	CMS Edit
76941	Echo Guide For Transfusion	76805	Ob Us >= 14 Wks Sngl Fetus	1	CMS Edit
76941	Echo Guide For Transfusion	76810	Ob Us >= 14 Wks Addl Fetus	1	CMS Edit
76941	Echo Guide For Transfusion	76815	Ob Us Limited Fetus(S)	1	CMS Edit
76941	Echo Guide For Transfusion	76816	Ob Us Follow-Up Per Fetus	1	CMS Edit
76941	Echo Guide For Transfusion	76825	Echo Exam Of Fetal Heart	1	CMS Edit
76941	Echo Guide For Transfusion	76826	Echo Exam Of Fetal Heart	1	CMS Edit
76941	Echo Guide For Transfusion	76827	Echo Exam Of Fetal Heart	1	CMS Edit
76941	Echo Guide For Transfusion	76828	Echo Exam Of Fetal Heart	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76941	Echo Guide For Transfusion	76830	Transvaginal Us Non-Ob	1	CMS Edit
76941	Echo Guide For Transfusion	76942	Echo Guide For Biopsy	1	CMS Edit
76941	Echo Guide For Transfusion	76998	Us Guide Intraop	1	CMS Edit
76941	Echo Guide For Transfusion	77001	Fluoroguide For Vein Device	1	CMS Edit
76941	Echo Guide For Transfusion	77002	Needle Localization By Xray	1	CMS Edit
76941	Echo Guide For Transfusion	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76941	Echo Guide For Transfusion	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
76942	Echo Guide For Biopsy	76641	Ultrasound Breast Complete	0	EVC Edit
76942	Echo Guide For Biopsy	76642	Ultrasound Breast Limited	0	EVC Edit
76942	Echo Guide For Biopsy	76883	Us Nrv&Acc Strux 1Xtr Compre	1	CMS Edit
76942	Echo Guide For Biopsy	76998	Us Guide Intraop	1	CMS Edit
76942	Echo Guide For Biopsy	77002	Needle Localization By Xray	1	CMS Edit
76942	Echo Guide For Biopsy	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76942	Echo Guide For Biopsy	77065	Dx Mammo Incl Cad Uni	0	EVC Edit
76942	Echo Guide For Biopsy	77066	Dx Mammo Incl Cad Bi	0	EVC Edit
76942	Echo Guide For Biopsy	77067	Scr Mammo Bi Incl Cad	0	EVC Edit
76942	Echo Guide For Biopsy	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
76942	Echo Guide For Biopsy	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
76945	Echo Guide Villus Sampling	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76945	Echo Guide Villus Sampling	76942	Echo Guide For Biopsy	1	CMS Edit
76945	Echo Guide Villus Sampling	76946	Echo Guide For Amniocentesis	1	CMS Edit
76945	Echo Guide Villus Sampling	76998	Us Guide Intraop	1	CMS Edit
76945	Echo Guide Villus Sampling	77001	Fluoroguide For Vein Device	1	CMS Edit
76945	Echo Guide Villus Sampling	77002	Needle Localization By Xray	1	CMS Edit
76945	Echo Guide Villus Sampling	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76945	Echo Guide Villus Sampling	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
76946	Echo Guide For Amniocentesis	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
76946	Echo Guide For Amniocentesis	76942	Echo Guide For Biopsy	1	CMS Edit
76946	Echo Guide For Amniocentesis	76998	Us Guide Intraop	1	CMS Edit
76946	Echo Guide For Amniocentesis	77001	Fluoroguide For Vein Device	1	CMS Edit
76946	Echo Guide For Amniocentesis	77002	Needle Localization By Xray	1	CMS Edit
76946	Echo Guide For Amniocentesis	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76946	Echo Guide For Amniocentesis	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
76948	Echo Guide Ova Aspiration	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76948	Echo Guide Ova Aspiration	76942	Echo Guide For Biopsy	1	CMS Edit
76948	Echo Guide Ova Aspiration	76945	Echo Guide Villus Sampling	0	CMS Edit
76948	Echo Guide Ova Aspiration	76998	Us Guide Intraop	1	CMS Edit
76948	Echo Guide Ova Aspiration	77001	Fluoroguide For Vein Device	1	CMS Edit
76948	Echo Guide Ova Aspiration	77002	Needle Localization By Xray	1	CMS Edit
76948	Echo Guide Ova Aspiration	77012	Ct Scan For Needle Biopsy	1	CMS Edit
76948	Echo Guide Ova Aspiration	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
76975	Gi Endoscopic Ultrasound	76376	3D Render W/Intrp Postproces	1	CMS Edit
76975	Gi Endoscopic Ultrasound	76377	3D Render W/Intrp Postproces	1	CMS Edit
76975	Gi Endoscopic Ultrasound	76942	Echo Guide For Biopsy	0	CMS Edit
76975	Gi Endoscopic Ultrasound	76998	Us Guide Intraop	1	CMS Edit
76977	Us Bone Density Measure	76376	3D Render W/Intrp Postproces	1	CMS Edit
76977	Us Bone Density Measure	76377	3D Render W/Intrp Postproces	1	CMS Edit
76977	Us Bone Density Measure	76998	Us Guide Intraop	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76506	Echo Exam Of Head	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76536	Us Exam Of Head And Neck	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76604	Us Exam Chest	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76641	Ultrasound Breast Complete	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76642	Ultrasound Breast Limited	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76700	Us Exam Abdom Complete	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76705	Echo Exam Of Abdomen	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76776	Us Exam K Transpl W/Doppler	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76800	Us Exam Spinal Canal	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76830	Transvaginal Us Non-Ob	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76831	Echo Exam Uterus	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76856	Us Exam Pelvic Complete	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76857	Us Exam Pelvic Limited	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76870	Us Exam Scrotum	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76872	Us Transrectal	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76881	Us Compl Joint R-T W/Img	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
76978	Us Trgt Dyn Mbubb 1St Les	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76506	Echo Exam Of Head	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
76979	Us Trgt Dyn Mbubb Ea Addl	76536	Us Exam Of Head And Neck	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76604	Us Exam Chest	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76641	Ultrasound Breast Complete	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76642	Ultrasound Breast Limited	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76700	Us Exam Abdom Complete	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76705	Echo Exam Of Abdomen	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76776	Us Exam K Transpl W/Doppler	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76800	Us Exam Spinal Canal	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76830	Transvaginal Us Non-Ob	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76831	Echo Exam Uterus	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76856	Us Exam Pelvic Complete	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76857	Us Exam Pelvic Limited	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76870	Us Exam Scrotum	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76872	Us Transrectal	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76881	Us Compl Joint R-T W/Img	1	CMS Edit
76979	Us Trgt Dyn Mbubb Ea Addl	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
76998	Us Guide Intraop	76883	Us Nrv&Acc Strux 1Xtr Compre	1	CMS Edit
77001	Fluoroguide For Vein Device	71045	X-Ray Exam Chest 1 View	1	CMS Edit
77001	Fluoroguide For Vein Device	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
77001	Fluoroguide For Vein Device	71047	X-Ray Exam Chest 3 Views	1	CMS Edit
77001	Fluoroguide For Vein Device	75820	Vein X-Ray Arm/Leg	1	CMS Edit
77001	Fluoroguide For Vein Device	75822	Vein X-Ray Arms/Legs	1	CMS Edit
77001	Fluoroguide For Vein Device	75825	Vein X-Ray Trunk	1	CMS Edit
77001	Fluoroguide For Vein Device	75827	Vein X-Ray Chest	1	CMS Edit
77001	Fluoroguide For Vein Device	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77001	Fluoroguide For Vein Device	76942	Echo Guide For Biopsy	1	CMS Edit
77001	Fluoroguide For Vein Device	76998	Us Guide Intraop	1	CMS Edit
77001	Fluoroguide For Vein Device	77002	Needle Localization By Xray	1	CMS Edit
77002	Needle Localization By Xray	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77002	Needle Localization By Xray	76125	Cine/Video X-Rays Add-On	1	CMS Edit
77011	Ct Scan For Localization	70450	Ct Head/Brain W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	70460	Ct Head/Brain W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70480	Ct Orbit/Ear/Fossa W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77011	Ct Scan For Localization	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70486	Ct Maxillofacial W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	70487	Ct Maxillofacial W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70490	Ct Soft Tissue Neck W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	70496	Ct Angiography Head	0	EVC Edit
77011	Ct Scan For Localization	70498	Ct Angiography Neck	0	EVC Edit
77011	Ct Scan For Localization	71250	Ct Thorax Dx C-	0	EVC Edit
77011	Ct Scan For Localization	71260	Ct Thorax Dx C+	0	EVC Edit
77011	Ct Scan For Localization	71270	Ct Thorax Dx C-/C+	0	EVC Edit
77011	Ct Scan For Localization	71275	Ct Angiography Chest	0	EVC Edit
77011	Ct Scan For Localization	72125	Ct Neck Spine W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	72126	Ct Neck Spine W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72128	Ct Chest Spine W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	72129	Ct Chest Spine W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72131	Ct Lumbar Spine W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72191	Ct Angiograph Pelv W/O&W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72192	Ct Pelvis W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	72193	Ct Pelvis W/Dye	0	EVC Edit
77011	Ct Scan For Localization	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	73200	Ct Upper Extremity W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	73201	Ct Upper Extremity W/Dye	0	EVC Edit
77011	Ct Scan For Localization	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
77011	Ct Scan For Localization	73206	Ct Angio Upr Extrm W/O&W/Dye	0	EVC Edit
77011	Ct Scan For Localization	73700	Ct Lower Extremity W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	73701	Ct Lower Extremity W/Dye	0	EVC Edit
77011	Ct Scan For Localization	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77011	Ct Scan For Localization	73706	Ct Angio Lwr Extr W/O&W/Dye	0	EVC Edit
77011	Ct Scan For Localization	74150	Ct Abdomen W/O Dye	0	EVC Edit
77011	Ct Scan For Localization	74160	Ct Abdomen W/Dye	0	EVC Edit
77011	Ct Scan For Localization	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	74175	Ct Angio Abdom W/O & W/Dye	0	EVC Edit
77011	Ct Scan For Localization	75635	Ct Angio Abdominal Arteries	0	EVC Edit
77011	Ct Scan For Localization	76380	Cat Scan Follow-Up Study	1	CMS Edit
77011	Ct Scan For Localization	77012	Ct Scan For Needle Biopsy	1	CMS Edit
77011	Ct Scan For Localization	77013	Ct Guide For Tissue Ablation	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70450	Ct Head/Brain W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70460	Ct Head/Brain W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70480	Ct Orbit/Ear/Fossa W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70486	Ct Maxillofacial W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70487	Ct Maxillofacial W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70490	Ct Soft Tissue Neck W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70496	Ct Angiography Head	0	EVC Edit
77012	Ct Scan For Needle Biopsy	70498	Ct Angiography Neck	0	EVC Edit
77012	Ct Scan For Needle Biopsy	71250	Ct Thorax Dx C-	0	EVC Edit
77012	Ct Scan For Needle Biopsy	71260	Ct Thorax Dx C+	0	EVC Edit
77012	Ct Scan For Needle Biopsy	71270	Ct Thorax Dx C-/C+	0	EVC Edit
77012	Ct Scan For Needle Biopsy	71275	Ct Angiography Chest	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72125	Ct Neck Spine W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72126	Ct Neck Spine W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72128	Ct Chest Spine W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72129	Ct Chest Spine W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72131	Ct Lumbar Spine W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77012	Ct Scan For Needle Biopsy	72191	Ct Angiograph Pelv W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72192	Ct Pelvis W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72193	Ct Pelvis W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73200	Ct Upper Extremity W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73201	Ct Upper Extremity W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73206	Ct Angio Upr Extrm W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73700	Ct Lower Extremity W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73701	Ct Lower Extremity W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	73706	Ct Angio Lwr Extr W/O&W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	74150	Ct Abdomen W/O Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	74160	Ct Abdomen W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	74175	Ct Angio Abdom W/O & W/Dye	0	EVC Edit
77012	Ct Scan For Needle Biopsy	75635	Ct Angio Abdominal Arteries	0	EVC Edit
77012	Ct Scan For Needle Biopsy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77012	Ct Scan For Needle Biopsy	76380	Cat Scan Follow-Up Study	1	CMS Edit
77012	Ct Scan For Needle Biopsy	77001	Fluoroguide For Vein Device	1	CMS Edit
77012	Ct Scan For Needle Biopsy	77002	Needle Localization By Xray	1	CMS Edit
77012	Ct Scan For Needle Biopsy	77065	Dx Mammo Incl Cad Uni	0	EVC Edit
77012	Ct Scan For Needle Biopsy	77066	Dx Mammo Incl Cad Bi	0	EVC Edit
77012	Ct Scan For Needle Biopsy	77067	Scr Mammo Bi Incl Cad	0	EVC Edit
77012	Ct Scan For Needle Biopsy	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
77012	Ct Scan For Needle Biopsy	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
77013	Ct Guide For Tissue Ablation	76380	Cat Scan Follow-Up Study	1	CMS Edit
77013	Ct Guide For Tissue Ablation	76940	Us Guide Tissue Ablation	1	CMS Edit
77013	Ct Guide For Tissue Ablation	76998	Us Guide Intraop	1	CMS Edit
77013	Ct Guide For Tissue Ablation	77012	Ct Scan For Needle Biopsy	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&I	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&I	76376	3D Render W/Intrp Postproces	0	EVC Edit
77021	Mri Guidance Ndl Plmt Rs&I	76377	3D Render W/Intrp Postproces	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77021	Mri Guidance Ndl Plmt Rs&l	77001	Fluoroguide For Vein Device	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&l	77002	Needle Localization By Xray	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&l	77012	Ct Scan For Needle Biopsy	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&l	77065	Dx Mammo Incl Cad Uni	0	EVC Edit
77021	Mri Guidance Ndl Plmt Rs&l	77066	Dx Mammo Incl Cad Bi	0	EVC Edit
77021	Mri Guidance Ndl Plmt Rs&l	77067	Scr Mammo Bi Incl Cad	0	EVC Edit
77021	Mri Guidance Ndl Plmt Rs&l	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
77021	Mri Guidance Ndl Plmt Rs&l	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
77022	Mri Gdn Parnchyma Tiss Abltj	76940	Us Guide Tissue Ablation	1	CMS Edit
77022	Mri Gdn Parnchyma Tiss Abltj	76998	Us Guide Intraop	1	CMS Edit
77022	Mri Gdn Parnchyma Tiss Abltj	77013	Ct Guide For Tissue Ablation	1	CMS Edit
77022	Mri Gdn Parnchyma Tiss Abltj	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
77046	Mri Breast C- Unilateral	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77046	Mri Breast C- Unilateral	76376	3D Render W/Intrp Postproces	1	CMS Edit
77046	Mri Breast C- Unilateral	76377	3D Render W/Intrp Postproces	1	CMS Edit
77046	Mri Breast C- Unilateral	76942	Echo Guide For Biopsy	1	CMS Edit
77046	Mri Breast C- Unilateral	76998	Us Guide Intraop	1	CMS Edit
77046	Mri Breast C- Unilateral	77001	Fluoroguide For Vein Device	1	CMS Edit
77046	Mri Breast C- Unilateral	77002	Needle Localization By Xray	1	CMS Edit
77047	Mri Breast C- Bilateral	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77047	Mri Breast C- Bilateral	76376	3D Render W/Intrp Postproces	1	CMS Edit
77047	Mri Breast C- Bilateral	76377	3D Render W/Intrp Postproces	1	CMS Edit
77047	Mri Breast C- Bilateral	76942	Echo Guide For Biopsy	1	CMS Edit
77047	Mri Breast C- Bilateral	76998	Us Guide Intraop	1	CMS Edit
77047	Mri Breast C- Bilateral	77001	Fluoroguide For Vein Device	1	CMS Edit
77047	Mri Breast C- Bilateral	77002	Needle Localization By Xray	1	CMS Edit
77047	Mri Breast C- Bilateral	77046	Mri Breast C- Unilateral	0	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	76376	3D Render W/Intrp Postproces	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	76377	3D Render W/Intrp Postproces	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	76942	Echo Guide For Biopsy	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	76998	Us Guide Intraop	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	77001	Fluoroguide For Vein Device	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77048	Mri Breast C-+ W/Cad Uni	77002	Needle Localization By Xray	1	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	77046	Mri Breast C- Unilateral	0	CMS Edit
77048	Mri Breast C-+ W/Cad Uni	77047	Mri Breast C- Bilateral	0	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	76376	3D Render W/Intrp Postproces	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	76377	3D Render W/Intrp Postproces	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	76942	Echo Guide For Biopsy	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	76998	Us Guide Intraop	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	77001	Fluoroguide For Vein Device	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	77002	Needle Localization By Xray	1	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	77046	Mri Breast C- Unilateral	0	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	77047	Mri Breast C- Bilateral	0	CMS Edit
77049	Mri Breast C-+ W/Cad Bi	77048	Mri Breast C-+ W/Cad Uni	0	CMS Edit
77054	X-Ray Of Mammary Ducts	77053	X-Ray Of Mammary Duct	1	CMS Edit
77061	Breast Tomosynthesis Uni	76376	3D Render W/Intrp Postproces	1	CMS Edit
77061	Breast Tomosynthesis Uni	76377	3D Render W/Intrp Postproces	1	CMS Edit
77062	Breast Tomosynthesis Bi	76376	3D Render W/Intrp Postproces	1	CMS Edit
77062	Breast Tomosynthesis Bi	76377	3D Render W/Intrp Postproces	1	CMS Edit
77062	Breast Tomosynthesis Bi	77061	Breast Tomosynthesis Uni	0	CMS Edit
77063	Breast Tomosynthesis Bi	76376	3D Render W/Intrp Postproces	1	CMS Edit
77063	Breast Tomosynthesis Bi	76377	3D Render W/Intrp Postproces	1	CMS Edit
77065	Dx Mammo Incl Cad Uni	77063	Breast Tomosynthesis Bi	1	CMS Edit
77065	Dx Mammo Incl Cad Uni	77067	Scr Mammo Bi Incl Cad	1	CMS Edit
77066	Dx Mammo Incl Cad Bi	77063	Breast Tomosynthesis Bi	1	CMS Edit
77066	Dx Mammo Incl Cad Bi	77065	Dx Mammo Incl Cad Uni	0	CMS Edit
77066	Dx Mammo Incl Cad Bi	77067	Scr Mammo Bi Incl Cad	1	CMS Edit
77067	Scr Mammo Bi Incl Cad	77061	Breast Tomosynthesis Uni	1	CMS Edit
77067	Scr Mammo Bi Incl Cad	77062	Breast Tomosynthesis Bi	1	CMS Edit
77073	X-Rays Bone Length Studies	72170	X-Ray Exam Of Pelvis	1	CMS Edit
77073	X-Rays Bone Length Studies	73501	X-Ray Exam Hip Uni 1 View	1	CMS Edit
77073	X-Rays Bone Length Studies	73502	X-Ray Exam Hip Uni 2-3 Views	1	CMS Edit
77073	X-Rays Bone Length Studies	73503	X-Ray Exam Hip Uni 4/> Views	1	CMS Edit
77073	X-Rays Bone Length Studies	73521	X-Ray Exam Hips Bi 2 Views	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77073	X-Rays Bone Length Studies	73522	X-Ray Exam Hips Bi 3-4 Views	1	CMS Edit
77073	X-Rays Bone Length Studies	73523	X-Ray Exam Hips Bi 5/> Views	1	CMS Edit
77073	X-Rays Bone Length Studies	73551	X-Ray Exam Of Femur 1	1	CMS Edit
77073	X-Rays Bone Length Studies	73552	X-Ray Exam Of Femur 2/>	1	CMS Edit
77073	X-Rays Bone Length Studies	73560	X-Ray Exam Of Knee 1 Or 2	1	CMS Edit
77073	X-Rays Bone Length Studies	73562	X-Ray Exam Of Knee 3	1	CMS Edit
77073	X-Rays Bone Length Studies	73564	X-Ray Exam Knee 4 Or More	1	CMS Edit
77073	X-Rays Bone Length Studies	73565	X-Ray Exam Of Knees	1	CMS Edit
77073	X-Rays Bone Length Studies	73590	X-Ray Exam Of Lower Leg	1	CMS Edit
77073	X-Rays Bone Length Studies	73592	X-Ray Exam Of Leg Infant	1	CMS Edit
77073	X-Rays Bone Length Studies	73600	X-Ray Exam Of Ankle	1	CMS Edit
77073	X-Rays Bone Length Studies	73610	X-Ray Exam Of Ankle	1	CMS Edit
77075	X-Rays Bone Survey Complete	70260	X-Ray Exam Of Skull	1	CMS Edit
77075	X-Rays Bone Survey Complete	70355	Panoramic X-Ray Of Jaws	1	CMS Edit
77075	X-Rays Bone Survey Complete	71045	X-Ray Exam Chest 1 View	1	CMS Edit
77075	X-Rays Bone Survey Complete	71046	X-Ray Exam Chest 2 Views	1	CMS Edit
77075	X-Rays Bone Survey Complete	71047	X-Ray Exam Chest 3 Views	1	CMS Edit
77075	X-Rays Bone Survey Complete	71100	X-Ray Exam Ribs Uni 2 Views	1	CMS Edit
77075	X-Rays Bone Survey Complete	71110	X-Ray Exam Ribs Bil 3 Views	1	CMS Edit
77075	X-Rays Bone Survey Complete	73030	X-Ray Exam Of Shoulder	1	CMS Edit
77075	X-Rays Bone Survey Complete	73590	X-Ray Exam Of Lower Leg	1	CMS Edit
77075	X-Rays Bone Survey Complete	73620	X-Ray Exam Of Foot	1	CMS Edit
77075	X-Rays Bone Survey Complete	77074	X-Rays Bone Survey Limited	0	CMS Edit
77075	X-Rays Bone Survey Complete	77076	X-Rays Bone Survey Infant	1	CMS Edit
77076	X-Rays Bone Survey Infant	77074	X-Rays Bone Survey Limited	1	CMS Edit
77077	Joint Survey Single View	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77077	Joint Survey Single View	77001	Fluoroguide For Vein Device	1	CMS Edit
77077	Joint Survey Single View	77002	Needle Localization By Xray	1	CMS Edit
77078	Ct Bone Density Axial	76380	Cat Scan Follow-Up Study	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77078	Ct Bone Density Axial	76977	Us Bone Density Measure	1	CMS Edit
77078	Ct Bone Density Axial	77080	Dxa Bone Density Axial	0	CMS Edit
77078	Ct Bone Density Axial	77081	Dxa Bone Density/Peripheral	1	CMS Edit
77078	Ct Bone Density Axial	77085	Dxa Bone Density Study	0	CMS Edit
77078	Ct Bone Density Axial	77086	Fracture Assessment Via Dxa	0	CMS Edit
77080	Dxa Bone Density Axial	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
77080	Dxa Bone Density Axial	72070	X-Ray Exam Thorac Spine 2Vws	0	EVC Edit
77080	Dxa Bone Density Axial	72072	X-Ray Exam Thorac Spine 3Vws	0	EVC Edit
77080	Dxa Bone Density Axial	72074	X-Ray Exam Thorac Spine4/>Vw	0	EVC Edit
77080	Dxa Bone Density Axial	72080	X-Ray Exam Thoracomb 2/> Vw	0	EVC Edit
77080	Dxa Bone Density Axial	72100	X-Ray Exam L-S Spine 2/3 Vws	0	EVC Edit
77080	Dxa Bone Density Axial	72110	X-Ray Exam L-2 Spine 4/>Vws	0	EVC Edit
77080	Dxa Bone Density Axial	72114	X-Ray Exam L-S Spine Bending	0	EVC Edit
77080	Dxa Bone Density Axial	72120	X-Ray Bend Only L-S Spine	0	EVC Edit
77080	Dxa Bone Density Axial	76977	Us Bone Density Measure	1	CMS Edit
77080	Dxa Bone Density Axial	77081	Dxa Bone Density/Peripheral	1	CMS Edit
77080	Dxa Bone Density Axial	77086	Fracture Assessment Via Dxa	0	CMS Edit
77081	Dxa Bone Density/Peripheral	72020	X-Ray Exam Of Spine 1 View	0	EVC Edit
77081	Dxa Bone Density/Peripheral	72100	X-Ray Exam L-S Spine 2/3 Vws	0	EVC Edit
77081	Dxa Bone Density/Peripheral	72110	X-Ray Exam L-2 Spine 4/>Vws	0	EVC Edit
77081	Dxa Bone Density/Peripheral	72114	X-Ray Exam L-S Spine Bending	0	EVC Edit
77084	Magnetic Image Bone Marrow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
77084	Magnetic Image Bone Marrow	76942	Echo Guide For Biopsy	1	CMS Edit
77084	Magnetic Image Bone Marrow	76998	Us Guide Intraop	1	CMS Edit
77084	Magnetic Image Bone Marrow	77001	Fluoroguide For Vein Device	1	CMS Edit
77084	Magnetic Image Bone Marrow	77002	Needle Localization By Xray	1	CMS Edit
77085	Dxa Bone Density Study	76977	Us Bone Density Measure	1	CMS Edit
77085	Dxa Bone Density Study	77080	Dxa Bone Density Axial	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
77085	Dxa Bone Density Study	77081	Dxa Bone Density/Peripheral	1	CMS Edit
77085	Dxa Bone Density Study	77086	Fracture Assessment Via Dxa	0	CMS Edit
78012	Thyroid Uptake Measurement	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78012	Thyroid Uptake Measurement	76376	3D Render W/Intrp Postproces	1	CMS Edit
78012	Thyroid Uptake Measurement	76377	3D Render W/Intrp Postproces	1	CMS Edit
78012	Thyroid Uptake Measurement	76942	Echo Guide For Biopsy	1	CMS Edit
78012	Thyroid Uptake Measurement	76998	Us Guide Intraop	1	CMS Edit
78012	Thyroid Uptake Measurement	77001	Fluoroguide For Vein Device	1	CMS Edit
78012	Thyroid Uptake Measurement	77002	Needle Localization By Xray	1	CMS Edit
78012	Thyroid Uptake Measurement	78445	Vascular Flow Imaging	0	CMS Edit
78013	Thyroid Imaging W/Blood Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	76998	Us Guide Intraop	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	77002	Needle Localization By Xray	1	CMS Edit
78013	Thyroid Imaging W/Blood Flow	78012	Thyroid Uptake Measurement	0	CMS Edit
78013	Thyroid Imaging W/Blood Flow	78445	Vascular Flow Imaging	0	CMS Edit
78014	Thyroid Imaging W/Blood Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	76998	Us Guide Intraop	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78014	Thyroid Imaging W/Blood Flow	77002	Needle Localization By Xray	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	78012	Thyroid Uptake Measurement	0	CMS Edit
78014	Thyroid Imaging W/Blood Flow	78013	Thyroid Imaging W/Blood Flow	0	CMS Edit
78014	Thyroid Imaging W/Blood Flow	78015	Thyroid Met Imaging	1	CMS Edit
78014	Thyroid Imaging W/Blood Flow	78445	Vascular Flow Imaging	0	CMS Edit
78015	Thyroid Met Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78015	Thyroid Met Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78015	Thyroid Met Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78015	Thyroid Met Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78015	Thyroid Met Imaging	76998	Us Guide Intraop	1	CMS Edit
78015	Thyroid Met Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78015	Thyroid Met Imaging	77002	Needle Localization By Xray	1	CMS Edit
78015	Thyroid Met Imaging	78012	Thyroid Uptake Measurement	1	CMS Edit
78015	Thyroid Met Imaging	78013	Thyroid Imaging W/Blood Flow	1	CMS Edit
78015	Thyroid Met Imaging	78020	Thyroid Met Uptake	0	EVC Edit
78015	Thyroid Met Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78015	Thyroid Met Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78015	Thyroid Met Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78016	Thyroid Met Imaging/Studies	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78016	Thyroid Met Imaging/Studies	76376	3D Render W/Intrp Postproces	1	CMS Edit
78016	Thyroid Met Imaging/Studies	76377	3D Render W/Intrp Postproces	1	CMS Edit
78016	Thyroid Met Imaging/Studies	76942	Echo Guide For Biopsy	1	CMS Edit
78016	Thyroid Met Imaging/Studies	76998	Us Guide Intraop	1	CMS Edit
78016	Thyroid Met Imaging/Studies	77001	Fluoroguide For Vein Device	1	CMS Edit
78016	Thyroid Met Imaging/Studies	77002	Needle Localization By Xray	1	CMS Edit
78016	Thyroid Met Imaging/Studies	78015	Thyroid Met Imaging	0	CMS Edit
78016	Thyroid Met Imaging/Studies	78445	Vascular Flow Imaging	0	CMS Edit
78016	Thyroid Met Imaging/Studies	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78016	Thyroid Met Imaging/Studies	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78016	Thyroid Met Imaging/Studies	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78016	Thyroid Met Imaging/Studies	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78018	Thyroid Met Imaging Body	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78018	Thyroid Met Imaging Body	76376	3D Render W/Intrp Postproces	1	CMS Edit
78018	Thyroid Met Imaging Body	76377	3D Render W/Intrp Postproces	1	CMS Edit
78018	Thyroid Met Imaging Body	76942	Echo Guide For Biopsy	1	CMS Edit
78018	Thyroid Met Imaging Body	76998	Us Guide Intraop	1	CMS Edit
78018	Thyroid Met Imaging Body	77001	Fluoroguide For Vein Device	1	CMS Edit
78018	Thyroid Met Imaging Body	77002	Needle Localization By Xray	1	CMS Edit
78018	Thyroid Met Imaging Body	78015	Thyroid Met Imaging	1	CMS Edit
78018	Thyroid Met Imaging Body	78445	Vascular Flow Imaging	0	CMS Edit
78018	Thyroid Met Imaging Body	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78018	Thyroid Met Imaging Body	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78018	Thyroid Met Imaging Body	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9512	Tc-99M Perchnetate Dx Per Mci	1	CMS Edit
78018	Thyroid Met Imaging Body	A9516	I-123 Sodium Iodide Dx To 999 Uci	1	CMS Edit
78018	Thyroid Met Imaging Body	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9539	Tc-99M Pentetate Dx Up To 25 Mci	1	CMS Edit
78018	Thyroid Met Imaging Body	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78018	Thyroid Met Imaging Body	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78018	Thyroid Met Imaging Body	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78018	Thyroid Met Imaging Body	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9572	In-111 Pentetrotide Dx To 6 Mci	0	CMS Edit
78018	Thyroid Met Imaging Body	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78020	Thyroid Met Uptake	78445	Vascular Flow Imaging	0	CMS Edit
78070	Parathyroid Planar Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78070	Parathyroid Planar Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78070	Parathyroid Planar Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78070	Parathyroid Planar Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78070	Parathyroid Planar Imaging	76998	Us Guide Intraop	1	CMS Edit
78070	Parathyroid Planar Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78070	Parathyroid Planar Imaging	77002	Needle Localization By Xray	1	CMS Edit
78070	Parathyroid Planar Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78070	Parathyroid Planar Imaging	78800	Rp Locljz Tum 1 Area 1 D lmg	1	CMS Edit
78070	Parathyroid Planar Imaging	78801	Rp Locljz Tum 2+Area 1+D lmg	1	CMS Edit
78070	Parathyroid Planar Imaging	78802	Rp Locljz Tum Whbdy 1 D lmg	1	CMS Edit
78070	Parathyroid Planar Imaging	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78070	Parathyroid Planar Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78070	Parathyroid Planar Imaging	A9531	I-131 Sodim Iodide Dx Up To 100 Uci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78070	Parathyroid Planar Imaging	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	76376	3D Render W/Intrp Postproces	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	76377	3D Render W/Intrp Postproces	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	76942	Echo Guide For Biopsy	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	76998	Us Guide Intraop	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	77001	Fluoroguide For Vein Device	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	77002	Needle Localization By Xray	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78070	Parathyroid Planar Imaging	0	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78445	Vascular Flow Imaging	0	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78800	Rp Locljz Tum 1 Area 1 D lmg	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78801	Rp Locljz Tum 2+Area 1+D lmg	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78802	Rp Locljz Tum Whbdy 1 D lmg	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78071	Parathyrd Planar W/Wo Subtrj	78804	Rp Locljz Tum Whbdy 2+D lmg	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78072	Parathyrd Planar W/Spect&Ct	76376	3D Render W/Intrp Postproces	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	76377	3D Render W/Intrp Postproces	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	76942	Echo Guide For Biopsy	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	76998	Us Guide Intraop	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	77001	Fluoroguide For Vein Device	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	77002	Needle Localization By Xray	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78070	Parathyroid Planar Imaging	0	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78071	Parathyrd Planar W/Wo Subtrj	0	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78445	Vascular Flow Imaging	0	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78800	Rp Locljz Tum 1 Area 1 D Img	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78801	Rp Locljz Tum 2+Area 1+D Img	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78802	Rp Locljz Tum Whbdy 1 D Img	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78072	Parathyrd Planar W/Spect&Ct	78804	Rp Locljz Tum Whbdy 2+D Img	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	76377	3D Render W/Intrp Postproces	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	76942	Echo Guide For Biopsy	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	76998	Us Guide Intraop	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	77001	Fluoroguide For Vein Device	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	77002	Needle Localization By Xray	1	CMS Edit
78075	Adrenal Cortex & Medulla Img	78445	Vascular Flow Imaging	0	CMS Edit
78075	Adrenal Cortex & Medulla Img	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78075	Adrenal Cortex & Medulla Img	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78102	Bone Marrow Imaging Ltd	76376	3D Render W/Intrp Postproces	1	CMS Edit
78102	Bone Marrow Imaging Ltd	76377	3D Render W/Intrp Postproces	1	CMS Edit
78102	Bone Marrow Imaging Ltd	76942	Echo Guide For Biopsy	1	CMS Edit
78102	Bone Marrow Imaging Ltd	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78102	Bone Marrow Imaging Ltd	77001	Fluoroguide For Vein Device	1	CMS Edit
78102	Bone Marrow Imaging Ltd	77002	Needle Localization By Xray	1	CMS Edit
78102	Bone Marrow Imaging Ltd	78445	Vascular Flow Imaging	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78102	Bone Marrow Imaging Ltd	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78102	Bone Marrow Imaging Ltd	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78103	Bone Marrow Imaging Mult	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78103	Bone Marrow Imaging Mult	76376	3D Render W/Intrp Postproces	1	CMS Edit
78103	Bone Marrow Imaging Mult	76377	3D Render W/Intrp Postproces	1	CMS Edit
78103	Bone Marrow Imaging Mult	76942	Echo Guide For Biopsy	1	CMS Edit
78103	Bone Marrow Imaging Mult	76998	Us Guide Intraop	1	CMS Edit
78103	Bone Marrow Imaging Mult	77001	Fluoroguide For Vein Device	1	CMS Edit
78103	Bone Marrow Imaging Mult	77002	Needle Localization By Xray	1	CMS Edit
78103	Bone Marrow Imaging Mult	78102	Bone Marrow Imaging Ltd	1	CMS Edit
78103	Bone Marrow Imaging Mult	78445	Vascular Flow Imaging	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78103	Bone Marrow Imaging Mult	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78103	Bone Marrow Imaging Mult	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78104	Bone Marrow Imaging Body	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78104	Bone Marrow Imaging Body	76376	3D Render W/Intrp Postproces	1	CMS Edit
78104	Bone Marrow Imaging Body	76377	3D Render W/Intrp Postproces	1	CMS Edit
78104	Bone Marrow Imaging Body	76942	Echo Guide For Biopsy	1	CMS Edit
78104	Bone Marrow Imaging Body	76998	Us Guide Intraop	1	CMS Edit
78104	Bone Marrow Imaging Body	77001	Fluoroguide For Vein Device	1	CMS Edit
78104	Bone Marrow Imaging Body	77002	Needle Localization By Xray	1	CMS Edit
78104	Bone Marrow Imaging Body	78102	Bone Marrow Imaging Ltd	1	CMS Edit
78104	Bone Marrow Imaging Body	78103	Bone Marrow Imaging Mult	1	CMS Edit
78104	Bone Marrow Imaging Body	78445	Vascular Flow Imaging	0	CMS Edit
78104	Bone Marrow Imaging Body	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78104	Bone Marrow Imaging Body	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78104	Bone Marrow Imaging Body	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78104	Bone Marrow Imaging Body	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78104	Bone Marrow Imaging Body	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78104	Bone Marrow Imaging Body	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78104	Bone Marrow Imaging Body	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78104	Bone Marrow Imaging Body	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78110	Plasma Volume Single	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78110	Plasma Volume Single	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78110	Plasma Volume Single	76377	3D Render W/Intrp Postproces	1	CMS Edit
78110	Plasma Volume Single	76942	Echo Guide For Biopsy	1	CMS Edit
78110	Plasma Volume Single	76998	Us Guide Intraop	1	CMS Edit
78110	Plasma Volume Single	77001	Fluoroguide For Vein Device	1	CMS Edit
78110	Plasma Volume Single	77002	Needle Localization By Xray	1	CMS Edit
78110	Plasma Volume Single	78445	Vascular Flow Imaging	0	CMS Edit
78111	Plasma Volume Multiple	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78111	Plasma Volume Multiple	76376	3D Render W/Intrp Postproces	1	CMS Edit
78111	Plasma Volume Multiple	76377	3D Render W/Intrp Postproces	1	CMS Edit
78111	Plasma Volume Multiple	76942	Echo Guide For Biopsy	1	CMS Edit
78111	Plasma Volume Multiple	76998	Us Guide Intraop	1	CMS Edit
78111	Plasma Volume Multiple	77001	Fluoroguide For Vein Device	1	CMS Edit
78111	Plasma Volume Multiple	77002	Needle Localization By Xray	1	CMS Edit
78111	Plasma Volume Multiple	78110	Plasma Volume Single	1	CMS Edit
78111	Plasma Volume Multiple	78445	Vascular Flow Imaging	0	CMS Edit
78120	Red Cell Mass Single	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78120	Red Cell Mass Single	76376	3D Render W/Intrp Postproces	1	CMS Edit
78120	Red Cell Mass Single	76377	3D Render W/Intrp Postproces	1	CMS Edit
78120	Red Cell Mass Single	76942	Echo Guide For Biopsy	1	CMS Edit
78120	Red Cell Mass Single	76998	Us Guide Intraop	1	CMS Edit
78120	Red Cell Mass Single	77001	Fluoroguide For Vein Device	1	CMS Edit
78120	Red Cell Mass Single	77002	Needle Localization By Xray	1	CMS Edit
78120	Red Cell Mass Single	78445	Vascular Flow Imaging	0	CMS Edit
78120	Red Cell Mass Single	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78120	Red Cell Mass Single	A9532	I-125 Serum Alb Dx Per 5 Microcurie	0	CMS Edit
78121	Red Cell Mass Multiple	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78121	Red Cell Mass Multiple	76376	3D Render W/Intrp Postproces	1	CMS Edit
78121	Red Cell Mass Multiple	76377	3D Render W/Intrp Postproces	1	CMS Edit
78121	Red Cell Mass Multiple	76942	Echo Guide For Biopsy	1	CMS Edit
78121	Red Cell Mass Multiple	76998	Us Guide Intraop	1	CMS Edit
78121	Red Cell Mass Multiple	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78121	Red Cell Mass Multiple	77002	Needle Localization By Xray	1	CMS Edit
78121	Red Cell Mass Multiple	78120	Red Cell Mass Single	1	CMS Edit
78121	Red Cell Mass Multiple	78445	Vascular Flow Imaging	0	CMS Edit
78122	Blood Volume	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78122	Blood Volume	76376	3D Render W/Intrp Postproces	1	CMS Edit
78122	Blood Volume	76377	3D Render W/Intrp Postproces	1	CMS Edit
78122	Blood Volume	76942	Echo Guide For Biopsy	1	CMS Edit
78122	Blood Volume	76998	Us Guide Intraop	1	CMS Edit
78122	Blood Volume	77001	Fluoroguide For Vein Device	1	CMS Edit
78122	Blood Volume	77002	Needle Localization By Xray	1	CMS Edit
78122	Blood Volume	78110	Plasma Volume Single	0	CMS Edit
78122	Blood Volume	78111	Plasma Volume Multiple	0	CMS Edit
78122	Blood Volume	78120	Red Cell Mass Single	0	CMS Edit
78122	Blood Volume	78121	Red Cell Mass Multiple	0	CMS Edit
78122	Blood Volume	78445	Vascular Flow Imaging	0	CMS Edit
78122	Blood Volume	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78122	Blood Volume	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78122	Blood Volume	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78122	Blood Volume	A9554	I-125 Sodum Iothalamte Dx To 10 Uci	0	CMS Edit
78122	Blood Volume	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78122	Blood Volume	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78122	Blood Volume	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78122	Blood Volume	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78122	Blood Volume	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78130	Red Cell Survival Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78130	Red Cell Survival Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78130	Red Cell Survival Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78130	Red Cell Survival Study	76942	Echo Guide For Biopsy	1	CMS Edit
78130	Red Cell Survival Study	76998	Us Guide Intraop	1	CMS Edit
78130	Red Cell Survival Study	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78130	Red Cell Survival Study	77002	Needle Localization By Xray	1	CMS Edit
78130	Red Cell Survival Study	78445	Vascular Flow Imaging	0	CMS Edit
78140	Red Cell Sequestration	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78140	Red Cell Sequestration	76376	3D Render W/Intrp Postproces	1	CMS Edit
78140	Red Cell Sequestration	76377	3D Render W/Intrp Postproces	1	CMS Edit
78140	Red Cell Sequestration	76942	Echo Guide For Biopsy	1	CMS Edit
78140	Red Cell Sequestration	76998	Us Guide Intraop	1	CMS Edit
78140	Red Cell Sequestration	77001	Fluoroguide For Vein Device	1	CMS Edit
78140	Red Cell Sequestration	77002	Needle Localization By Xray	1	CMS Edit
78140	Red Cell Sequestration	78445	Vascular Flow Imaging	0	CMS Edit
78140	Red Cell Sequestration	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78140	Red Cell Sequestration	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78140	Red Cell Sequestration	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78140	Red Cell Sequestration	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78185	Spleen Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78185	Spleen Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78185	Spleen Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78185	Spleen Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78185	Spleen Imaging	76998	Us Guide Intraop	1	CMS Edit
78185	Spleen Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78185	Spleen Imaging	77002	Needle Localization By Xray	1	CMS Edit
78185	Spleen Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78185	Spleen Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78185	Spleen Imaging	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78191	Platelet Survival	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78191	Platelet Survival	76376	3D Render W/Intrp Postproces	1	CMS Edit
78191	Platelet Survival	76377	3D Render W/Intrp Postproces	1	CMS Edit
78191	Platelet Survival	76942	Echo Guide For Biopsy	1	CMS Edit
78191	Platelet Survival	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78191	Platelet Survival	77001	Fluoroguide For Vein Device	1	CMS Edit
78191	Platelet Survival	77002	Needle Localization By Xray	1	CMS Edit
78191	Platelet Survival	78445	Vascular Flow Imaging	0	CMS Edit
78195	Lymph System Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78195	Lymph System Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78195	Lymph System Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78195	Lymph System Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78195	Lymph System Imaging	76998	Us Guide Intraop	1	CMS Edit
78195	Lymph System Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78195	Lymph System Imaging	77002	Needle Localization By Xray	1	CMS Edit
78195	Lymph System Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78195	Lymph System Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78195	Lymph System Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78195	Lymph System Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78195	Lymph System Imaging	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78195	Lymph System Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78195	Lymph System Imaging	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78195	Lymph System Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78195	Lymph System Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78195	Lymph System Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78195	Lymph System Imaging	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78195	Lymph System Imaging	A9542	In-111 Ibritumab TiuxtN Dx To 5 Mci	0	CMS Edit
78195	Lymph System Imaging	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78195	Lymph System Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78195	Lymph System Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit
78195	Lymph System Imaging	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78195	Lymph System Imaging	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78195	Lymph System Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78195	Lymph System Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78195	Lymph System Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78195	Lymph System Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78195	Lymph System Imaging	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78195	Lymph System Imaging	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78201	Liver Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78201	Liver Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78201	Liver Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78201	Liver Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78201	Liver Imaging	76998	Us Guide Intraop	1	CMS Edit
78201	Liver Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78201	Liver Imaging	77002	Needle Localization By Xray	1	CMS Edit
78201	Liver Imaging	78216	Liver & Spleen Image/Flow	0	CMS Edit
78201	Liver Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78201	Liver Imaging	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78201	Liver Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78201	Liver Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78201	Liver Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78201	Liver Imaging	A9512	Tc-99M Pertechetate Dx Per Mci	1	CMS Edit
78201	Liver Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78202	Liver Imaging With Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78202	Liver Imaging With Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78202	Liver Imaging With Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78202	Liver Imaging With Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78202	Liver Imaging With Flow	76998	Us Guide Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78202	Liver Imaging With Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78202	Liver Imaging With Flow	77002	Needle Localization By Xray	1	CMS Edit
78202	Liver Imaging With Flow	78201	Liver Imaging	0	CMS Edit
78202	Liver Imaging With Flow	78215	Liver And Spleen Imaging	0	CMS Edit
78202	Liver Imaging With Flow	78216	Liver & Spleen Image/Flow	0	CMS Edit
78202	Liver Imaging With Flow	78445	Vascular Flow Imaging	0	CMS Edit
78202	Liver Imaging With Flow	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78202	Liver Imaging With Flow	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78202	Liver Imaging With Flow	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78202	Liver Imaging With Flow	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78202	Liver Imaging With Flow	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78202	Liver Imaging With Flow	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78215	Liver And Spleen Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78215	Liver And Spleen Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78215	Liver And Spleen Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78215	Liver And Spleen Imaging	76998	Us Guide Intraop	1	CMS Edit
78215	Liver And Spleen Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78215	Liver And Spleen Imaging	77002	Needle Localization By Xray	1	CMS Edit
78215	Liver And Spleen Imaging	78185	Spleen Imaging	1	CMS Edit
78215	Liver And Spleen Imaging	78201	Liver Imaging	0	CMS Edit
78215	Liver And Spleen Imaging	78216	Liver & Spleen Image/Flow	0	CMS Edit
78215	Liver And Spleen Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78215	Liver And Spleen Imaging	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78215	Liver And Spleen Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78215	Liver And Spleen Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78215	Liver And Spleen Imaging	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78215	Liver And Spleen Imaging	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78215	Liver And Spleen Imaging	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78215	Liver And Spleen Imaging	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78216	Liver & Spleen Image/Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78216	Liver & Spleen Image/Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78216	Liver & Spleen Image/Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78216	Liver & Spleen Image/Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78216	Liver & Spleen Image/Flow	76998	Us Guide Intraop	1	CMS Edit
78216	Liver & Spleen Image/Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78216	Liver & Spleen Image/Flow	77002	Needle Localization By Xray	1	CMS Edit
78216	Liver & Spleen Image/Flow	78185	Spleen Imaging	1	CMS Edit
78216	Liver & Spleen Image/Flow	78445	Vascular Flow Imaging	0	CMS Edit
78216	Liver & Spleen Image/Flow	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78216	Liver & Spleen Image/Flow	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78216	Liver & Spleen Image/Flow	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78226	Hepatobiliary System Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78226	Hepatobiliary System Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78226	Hepatobiliary System Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78226	Hepatobiliary System Imaging	76998	Us Guide Intraop	1	CMS Edit
78226	Hepatobiliary System Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78226	Hepatobiliary System Imaging	77002	Needle Localization By Xray	1	CMS Edit
78226	Hepatobiliary System Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78226	Hepatobiliary System Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78226	Hepatobiliary System Imaging	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78226	Hepatobiliary System Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78226	Hepatobiliary System Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9504	Tc-99M Apcitide Dx Up To 20 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78226	Hepatobiliary System Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78226	Hepatobiliary System Imaging	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9567	Tc-99M Pentetate Dx Arosi To 75 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78226	Hepatobiliary System Imaging	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78226	Hepatobiliary System Imaging	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	76376	3D Render W/Intrp Postproces	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	76377	3D Render W/Intrp Postproces	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	76942	Echo Guide For Biopsy	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	76998	Us Guide Intraop	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	77001	Fluoroguide For Vein Device	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	77002	Needle Localization By Xray	1	CMS Edit
78227	Hepatobil Syst Image W/Drug	78226	Hepatobiliary System Imaging	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	78445	Vascular Flow Imaging	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78227	Hepatobil Syst Image W/Drug	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9504	Tc-99M Apcitide Dx Up To 20 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78227	Hepatobil Syst Image W/Drug	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78227	Hepatobil Syst Image W/Drug	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78230	Salivary Gland Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78230	Salivary Gland Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78230	Salivary Gland Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78230	Salivary Gland Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78230	Salivary Gland Imaging	76998	Us Guide Intraop	1	CMS Edit
78230	Salivary Gland Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78230	Salivary Gland Imaging	77002	Needle Localization By Xray	1	CMS Edit
78230	Salivary Gland Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78230	Salivary Gland Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78231	Serial Salivary Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78231	Serial Salivary Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78231	Serial Salivary Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78231	Serial Salivary Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78231	Serial Salivary Imaging	76998	Us Guide Intraop	1	CMS Edit
78231	Serial Salivary Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78231	Serial Salivary Imaging	77002	Needle Localization By Xray	1	CMS Edit
78231	Serial Salivary Imaging	78230	Salivary Gland Imaging	1	CMS Edit
78231	Serial Salivary Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78231	Serial Salivary Imaging	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78231	Serial Salivary Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78232	Salivary Gland Function Exam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78232	Salivary Gland Function Exam	76376	3D Render W/Intrp Postproces	1	CMS Edit
78232	Salivary Gland Function Exam	76377	3D Render W/Intrp Postproces	1	CMS Edit
78232	Salivary Gland Function Exam	76942	Echo Guide For Biopsy	1	CMS Edit
78232	Salivary Gland Function Exam	76998	Us Guide Intraop	1	CMS Edit
78232	Salivary Gland Function Exam	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78232	Salivary Gland Function Exam	77002	Needle Localization By Xray	1	CMS Edit
78232	Salivary Gland Function Exam	78445	Vascular Flow Imaging	0	CMS Edit
78258	Esophageal Motility Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78258	Esophageal Motility Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78258	Esophageal Motility Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78258	Esophageal Motility Study	76942	Echo Guide For Biopsy	1	CMS Edit
78258	Esophageal Motility Study	76998	Us Guide Intraop	1	CMS Edit
78258	Esophageal Motility Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78258	Esophageal Motility Study	77002	Needle Localization By Xray	1	CMS Edit
78258	Esophageal Motility Study	78445	Vascular Flow Imaging	0	CMS Edit
78258	Esophageal Motility Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78258	Esophageal Motility Study	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78258	Esophageal Motility Study	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78261	Gastric Mucosa Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78261	Gastric Mucosa Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78261	Gastric Mucosa Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78261	Gastric Mucosa Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78261	Gastric Mucosa Imaging	76998	Us Guide Intraop	1	CMS Edit
78261	Gastric Mucosa Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78261	Gastric Mucosa Imaging	77002	Needle Localization By Xray	1	CMS Edit
78261	Gastric Mucosa Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78261	Gastric Mucosa Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78261	Gastric Mucosa Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78262	Gastroesophageal Reflux Exam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78262	Gastroesophageal Reflux Exam	76376	3D Render W/Intrp Postproces	1	CMS Edit
78262	Gastroesophageal Reflux Exam	76377	3D Render W/Intrp Postproces	1	CMS Edit
78262	Gastroesophageal Reflux Exam	76942	Echo Guide For Biopsy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78262	Gastroesophageal Reflux Exam	76998	Us Guide Intraop	1	CMS Edit
78262	Gastroesophageal Reflux Exam	77001	Fluoroguide For Vein Device	1	CMS Edit
78262	Gastroesophageal Reflux Exam	77002	Needle Localization By Xray	1	CMS Edit
78262	Gastroesophageal Reflux Exam	78445	Vascular Flow Imaging	0	CMS Edit
78262	Gastroesophageal Reflux Exam	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78262	Gastroesophageal Reflux Exam	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78264	Gastric Emptying Imag Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78264	Gastric Emptying Imag Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78264	Gastric Emptying Imag Study	76942	Echo Guide For Biopsy	1	CMS Edit
78264	Gastric Emptying Imag Study	76998	Us Guide Intraop	1	CMS Edit
78264	Gastric Emptying Imag Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78264	Gastric Emptying Imag Study	77002	Needle Localization By Xray	1	CMS Edit
78264	Gastric Emptying Imag Study	78445	Vascular Flow Imaging	0	CMS Edit
78264	Gastric Emptying Imag Study	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78264	Gastric Emptying Imag Study	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78264	Gastric Emptying Imag Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78264	Gastric Emptying Imag Study	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78264	Gastric Emptying Imag Study	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78264	Gastric Emptying Imag Study	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78264	Gastric Emptying Imag Study	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78264	Gastric Emptying Imag Study	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78264	Gastric Emptying Imag Study	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78265	Gastric Emptying Imag Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78265	Gastric Emptying Imag Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78265	Gastric Emptying Imag Study	76942	Echo Guide For Biopsy	1	CMS Edit
78265	Gastric Emptying Imag Study	76998	Us Guide Intraop	1	CMS Edit
78265	Gastric Emptying Imag Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78265	Gastric Emptying Imag Study	77002	Needle Localization By Xray	1	CMS Edit
78265	Gastric Emptying Imag Study	78264	Gastric Emptying Imag Study	0	CMS Edit
78265	Gastric Emptying Imag Study	78445	Vascular Flow Imaging	0	CMS Edit
78265	Gastric Emptying Imag Study	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78265	Gastric Emptying Imag Study	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78265	Gastric Emptying Imag Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78265	Gastric Emptying Imag Study	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78265	Gastric Emptying Imag Study	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78265	Gastric Emptying Imag Study	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9567	Tc-99M Pentetate Dx ArosI To 75 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78265	Gastric Emptying Imag Study	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78265	Gastric Emptying Imag Study	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78265	Gastric Emptying Imag Study	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78266	Gastric Emptying Imag Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78266	Gastric Emptying Imag Study	76377	3D Render W/Intrp Postproces	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78266	Gastric Emptying Imag Study	76942	Echo Guide For Biopsy	1	CMS Edit
78266	Gastric Emptying Imag Study	76998	Us Guide Intraop	1	CMS Edit
78266	Gastric Emptying Imag Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78266	Gastric Emptying Imag Study	77002	Needle Localization By Xray	1	CMS Edit
78266	Gastric Emptying Imag Study	78264	Gastric Emptying Imag Study	0	CMS Edit
78266	Gastric Emptying Imag Study	78265	Gastric Emptying Imag Study	0	CMS Edit
78266	Gastric Emptying Imag Study	78445	Vascular Flow Imaging	0	CMS Edit
78266	Gastric Emptying Imag Study	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78266	Gastric Emptying Imag Study	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78266	Gastric Emptying Imag Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78266	Gastric Emptying Imag Study	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78266	Gastric Emptying Imag Study	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78266	Gastric Emptying Imag Study	A9562	Tc-99M Mertiotide Dx Up To 15 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78266	Gastric Emptying Imag Study	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78266	Gastric Emptying Imag Study	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78266	Gastric Emptying Imag Study	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78267	Breath Tst Attain/Anal C-14	76376	3D Render W/Intrp Postproces	1	CMS Edit
78267	Breath Tst Attain/Anal C-14	76377	3D Render W/Intrp Postproces	1	CMS Edit
78267	Breath Tst Attain/Anal C-14	78445	Vascular Flow Imaging	0	CMS Edit
78268	Breath Test Analysis C-14	76376	3D Render W/Intrp Postproces	1	CMS Edit
78268	Breath Test Analysis C-14	76377	3D Render W/Intrp Postproces	1	CMS Edit
78268	Breath Test Analysis C-14	78445	Vascular Flow Imaging	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	76998	Us Guide Intraop	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	77002	Needle Localization By Xray	1	CMS Edit
78278	Acute Gi Blood Loss Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78278	Acute Gi Blood Loss Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9566	Tc-99M Fanolesomab Dx Up To 25 Mci	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78278	Acute Gi Blood Loss Imaging	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78282	Gi Protein Loss Exam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78282	Gi Protein Loss Exam	76376	3D Render W/Intrp Postproces	1	CMS Edit
78282	Gi Protein Loss Exam	76377	3D Render W/Intrp Postproces	1	CMS Edit
78282	Gi Protein Loss Exam	76942	Echo Guide For Biopsy	1	CMS Edit
78282	Gi Protein Loss Exam	76998	Us Guide Intraop	1	CMS Edit
78282	Gi Protein Loss Exam	77001	Fluoroguide For Vein Device	1	CMS Edit
78282	Gi Protein Loss Exam	77002	Needle Localization By Xray	1	CMS Edit
78282	Gi Protein Loss Exam	78445	Vascular Flow Imaging	0	CMS Edit
78282	Gi Protein Loss Exam	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78282	Gi Protein Loss Exam	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78282	Gi Protein Loss Exam	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78290	Meckels Divert Exam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78290	Meckels Divert Exam	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78290	Meckels Divert Exam	76377	3D Render W/Intrp Postproces	1	CMS Edit
78290	Meckels Divert Exam	76942	Echo Guide For Biopsy	1	CMS Edit
78290	Meckels Divert Exam	76998	Us Guide Intraop	1	CMS Edit
78290	Meckels Divert Exam	77001	Fluoroguide For Vein Device	1	CMS Edit
78290	Meckels Divert Exam	77002	Needle Localization By Xray	1	CMS Edit
78290	Meckels Divert Exam	78445	Vascular Flow Imaging	0	CMS Edit
78290	Meckels Divert Exam	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78290	Meckels Divert Exam	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78290	Meckels Divert Exam	A9504	Tc-99M Apcitide Dx Up To 20 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	1	CMS Edit
78290	Meckels Divert Exam	A9548	Indium In-111 Pentetate Dx 0.5 Mci	1	CMS Edit
78290	Meckels Divert Exam	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78290	Meckels Divert Exam	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78290	Meckels Divert Exam	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78291	Leveen/Shunt Patency Exam	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78291	Leveen/Shunt Patency Exam	76376	3D Render W/Intrp Postproces	1	CMS Edit
78291	Leveen/Shunt Patency Exam	76377	3D Render W/Intrp Postproces	1	CMS Edit
78291	Leveen/Shunt Patency Exam	76942	Echo Guide For Biopsy	1	CMS Edit
78291	Leveen/Shunt Patency Exam	76998	Us Guide Intraop	1	CMS Edit
78291	Leveen/Shunt Patency Exam	77001	Fluoroguide For Vein Device	1	CMS Edit
78291	Leveen/Shunt Patency Exam	77002	Needle Localization By Xray	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78291	Leveen/Shunt Patency Exam	78445	Vascular Flow Imaging	0	CMS Edit
78291	Leveen/Shunt Patency Exam	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78291	Leveen/Shunt Patency Exam	A9548	Indium In-111 Pentetate Dx 0.5 Mci	1	CMS Edit
78291	Leveen/Shunt Patency Exam	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78291	Leveen/Shunt Patency Exam	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78300	Bone Imaging Limited Area	76376	3D Render W/Intrp Postproces	1	CMS Edit
78300	Bone Imaging Limited Area	76377	3D Render W/Intrp Postproces	1	CMS Edit
78300	Bone Imaging Limited Area	76942	Echo Guide For Biopsy	1	CMS Edit
78300	Bone Imaging Limited Area	76998	Us Guide Intraop	1	CMS Edit
78300	Bone Imaging Limited Area	77001	Fluoroguide For Vein Device	1	CMS Edit
78300	Bone Imaging Limited Area	77002	Needle Localization By Xray	1	CMS Edit
78300	Bone Imaging Limited Area	78445	Vascular Flow Imaging	0	CMS Edit
78300	Bone Imaging Limited Area	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78300	Bone Imaging Limited Area	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78300	Bone Imaging Limited Area	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78300	Bone Imaging Limited Area	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78300	Bone Imaging Limited Area	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9507	In-111 Capromb Pendetd Dx To 10 Mci	1	CMS Edit
78300	Bone Imaging Limited Area	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78300	Bone Imaging Limited Area	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78300	Bone Imaging Limited Area	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78300	Bone Imaging Limited Area	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9542	In-111 Ibritumab TiuxtN Dx To 5 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78300	Bone Imaging Limited Area	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78300	Bone Imaging Limited Area	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9566	Tc-99M Fanolesomab Dx Up To 25 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9569	Tc-99M Exametazime Autolg Wbc Dx	1	CMS Edit
78300	Bone Imaging Limited Area	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78300	Bone Imaging Limited Area	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78300	Bone Imaging Limited Area	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78305	Bone Imaging Multiple Areas	76376	3D Render W/Intrp Postproces	1	CMS Edit
78305	Bone Imaging Multiple Areas	76377	3D Render W/Intrp Postproces	1	CMS Edit
78305	Bone Imaging Multiple Areas	76942	Echo Guide For Biopsy	1	CMS Edit
78305	Bone Imaging Multiple Areas	76998	Us Guide Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78305	Bone Imaging Multiple Areas	77001	Fluoroguide For Vein Device	1	CMS Edit
78305	Bone Imaging Multiple Areas	77002	Needle Localization By Xray	1	CMS Edit
78305	Bone Imaging Multiple Areas	78300	Bone Imaging Limited Area	1	CMS Edit
78305	Bone Imaging Multiple Areas	78445	Vascular Flow Imaging	0	CMS Edit
78305	Bone Imaging Multiple Areas	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78305	Bone Imaging Multiple Areas	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9512	Tc-99M Per technetate Dx Per Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9542	In-111 Ibritumab Tiuxt n Dx To 5 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78305	Bone Imaging Multiple Areas	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78305	Bone Imaging Multiple Areas	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9566	Tc-99M Fanolesomab Dx Up To 25 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9569	Tc-99M Exametazime Autolg Wbc Dx	1	CMS Edit
78305	Bone Imaging Multiple Areas	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78305	Bone Imaging Multiple Areas	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78305	Bone Imaging Multiple Areas	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78306	Bone Imaging Whole Body	76376	3D Render W/Intrp Postproces	1	CMS Edit
78306	Bone Imaging Whole Body	76377	3D Render W/Intrp Postproces	1	CMS Edit
78306	Bone Imaging Whole Body	76942	Echo Guide For Biopsy	1	CMS Edit
78306	Bone Imaging Whole Body	76998	Us Guide Intraop	1	CMS Edit
78306	Bone Imaging Whole Body	77001	Fluoroguide For Vein Device	1	CMS Edit
78306	Bone Imaging Whole Body	77002	Needle Localization By Xray	1	CMS Edit
78306	Bone Imaging Whole Body	78300	Bone Imaging Limited Area	0	CMS Edit
78306	Bone Imaging Whole Body	78305	Bone Imaging Multiple Areas	0	CMS Edit
78306	Bone Imaging Whole Body	78445	Vascular Flow Imaging	0	CMS Edit
78306	Bone Imaging Whole Body	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78306	Bone Imaging Whole Body	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78306	Bone Imaging Whole Body	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78306	Bone Imaging Whole Body	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78306	Bone Imaging Whole Body	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78306	Bone Imaging Whole Body	A9507	In-111 Capromb Pendetd Dx To 10 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9510	Tc-99M Disofenin Dx Up To 15 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9512	Tc-99M Per technetate Dx Per Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78306	Bone Imaging Whole Body	A9528	I-131 Sodium Iodide Caps Dx Per Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9531	I-131 Sodim Iodide Dx Up To 100 Uci	1	CMS Edit
78306	Bone Imaging Whole Body	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9539	Tc-99M Pentetate Dx Up To 25 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	1	CMS Edit
78306	Bone Imaging Whole Body	A9548	Indium In-111 Pentetate Dx 0.5 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9567	Tc-99M Pentetate Dx Arosi To 75 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9568	Tc-99M Arcitumomab Dx To 45 Mci	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78306	Bone Imaging Whole Body	A9569	Tc-99M Exametazime Autolg Wbc Dx	1	CMS Edit
78306	Bone Imaging Whole Body	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78306	Bone Imaging Whole Body	A9572	In-111 Pentetreotide Dx To 6 Mci	1	CMS Edit
78306	Bone Imaging Whole Body	A9580	Naf F-18 Dx Study Dose To 30 Mci	0	CMS Edit
78306	Bone Imaging Whole Body	A9582	I-123 Iobenguane Dx Dose To 15 Mci	1	CMS Edit
78315	Bone Imaging 3 Phase	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78315	Bone Imaging 3 Phase	76376	3D Render W/Intrp Postproces	1	CMS Edit
78315	Bone Imaging 3 Phase	76377	3D Render W/Intrp Postproces	1	CMS Edit
78315	Bone Imaging 3 Phase	76942	Echo Guide For Biopsy	1	CMS Edit
78315	Bone Imaging 3 Phase	76998	Us Guide Intraop	1	CMS Edit
78315	Bone Imaging 3 Phase	77001	Fluoroguide For Vein Device	1	CMS Edit
78315	Bone Imaging 3 Phase	77002	Needle Localization By Xray	1	CMS Edit
78315	Bone Imaging 3 Phase	78300	Bone Imaging Limited Area	1	CMS Edit
78315	Bone Imaging 3 Phase	78305	Bone Imaging Multiple Areas	1	CMS Edit
78315	Bone Imaging 3 Phase	78306	Bone Imaging Whole Body	1	CMS Edit
78315	Bone Imaging 3 Phase	78445	Vascular Flow Imaging	0	CMS Edit
78315	Bone Imaging 3 Phase	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78315	Bone Imaging 3 Phase	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78315	Bone Imaging 3 Phase	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78315	Bone Imaging 3 Phase	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78315	Bone Imaging 3 Phase	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78315	Bone Imaging 3 Phase	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9542	In-111 Ibritumab Tiuxt D Dx To 5 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78315	Bone Imaging 3 Phase	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78315	Bone Imaging 3 Phase	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9566	Tc-99M Fanolesomab Dx Up To 25 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78315	Bone Imaging 3 Phase	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78315	Bone Imaging 3 Phase	A9571	Indium In-111 Autolg Platelets Dx	0	CMS Edit
78315	Bone Imaging 3 Phase	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78315	Bone Imaging 3 Phase	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78414	Non-Imaging Heart Function	76376	3D Render W/Intrp Postproces	1	CMS Edit
78414	Non-Imaging Heart Function	76377	3D Render W/Intrp Postproces	1	CMS Edit
78414	Non-Imaging Heart Function	76942	Echo Guide For Biopsy	1	CMS Edit
78414	Non-Imaging Heart Function	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78414	Non-Imaging Heart Function	77001	Fluoroguide For Vein Device	1	CMS Edit
78414	Non-Imaging Heart Function	77002	Needle Localization By Xray	1	CMS Edit
78414	Non-Imaging Heart Function	78445	Vascular Flow Imaging	0	CMS Edit
78428	Cardiac Shunt Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78428	Cardiac Shunt Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78428	Cardiac Shunt Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78428	Cardiac Shunt Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78428	Cardiac Shunt Imaging	76998	Us Guide Intraop	1	CMS Edit
78428	Cardiac Shunt Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78428	Cardiac Shunt Imaging	77002	Needle Localization By Xray	1	CMS Edit
78428	Cardiac Shunt Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78428	Cardiac Shunt Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78428	Cardiac Shunt Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9554	I-125 Sodum Iothalamte Dx To 10 Uci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78428	Cardiac Shunt Imaging	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78429	Myocrd Img Pet 1 Std W/Ct	76376	3D Render W/Intrp Postproces	1	CMS Edit
78429	Myocrd Img Pet 1 Std W/Ct	78445	Vascular Flow Imaging	0	CMS Edit
78429	Myocrd Img Pet 1 Std W/Ct	78459	Myocrd Img Pet Single Study	0	CMS Edit
78429	Myocrd Img Pet 1 Std W/Ct	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78430	Myocrd Img Pet Rst/Strs W/Ct	78445	Vascular Flow Imaging	0	CMS Edit
78430	Myocrd Img Pet Rst/Strs W/Ct	78459	Myocrd Img Pet Single Study	0	CMS Edit
78430	Myocrd Img Pet Rst/Strs W/Ct	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78430	Myocrd Img Pet Rst/Strs W/Ct	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	71250	Ct Thorax Dx C-	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78431	Myocrd Img Pet Rst&Strs Ct	71260	Ct Thorax Dx C+	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	71270	Ct Thorax Dx C-/C+	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76120	Cine/Video X-Rays	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76125	Cine/Video X-Rays Add-On	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76376	3D Render W/Intrp Postproces	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76377	3D Render W/Intrp Postproces	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76942	Echo Guide For Biopsy	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	76998	Us Guide Intraop	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	77001	Fluoroguide For Vein Device	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	77002	Needle Localization By Xray	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	78445	Vascular Flow Imaging	0	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	78491	Myocrd Img Pet 1Std Rst/Strs	0	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	78492	Myocrd Img Pet Mlt Rst&Strs	0	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	A9505	TI-201 Thallous Chlorid Dx Per Mci	1	CMS Edit
78431	Myocrd Img Pet Rst&Strs Ct	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78432	Myocrd Img Pet 2Rtracer	76376	3D Render W/Intrp Postproces	1	CMS Edit
78432	Myocrd Img Pet 2Rtracer	76377	3D Render W/Intrp Postproces	1	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78429	Myocrd Img Pet 1 Std W/Ct	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78430	Myocrd Img Pet Rst/Strs W/Ct	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78431	Myocrd Img Pet Rst&Strs Ct	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78445	Vascular Flow Imaging	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78459	Myocrd Img Pet Single Study	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	78492	Myocrd Img Pet Mlt Rst&Strs	0	CMS Edit
78432	Myocrd Img Pet 2Rtracer	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78432	Myocrd Img Pet 2Rtracer	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78432	Myocrd Img Pet 2Rtracer	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	71250	Ct Thorax Dx C-	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	71260	Ct Thorax Dx C+	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	71270	Ct Thorax Dx C-/C+	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76120	Cine/Video X-Rays	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76125	Cine/Video X-Rays Add-On	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76376	3D Render W/Intrp Postproces	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76377	3D Render W/Intrp Postproces	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76942	Echo Guide For Biopsy	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	76998	Us Guide Intraop	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	77001	Fluoroguide For Vein Device	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	77002	Needle Localization By Xray	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78429	Myocrd Img Pet 1 Std W/Ct	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78430	Myocrd Img Pet Rst/Strs W/Ct	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78431	Myocrd Img Pet Rst&Strs Ct	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78445	Vascular Flow Imaging	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78459	Myocrd Img Pet Single Study	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78491	Myocrd Img Pet 1Std Rst/Strs	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	78492	Myocrd Img Pet Mlt Rst&Strs	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78433	Myocrd Img Pet 2Rtracer Ct	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	76376	3D Render W/Intrp Postproces	1	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	76377	3D Render W/Intrp Postproces	1	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	78445	Vascular Flow Imaging	0	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	78491	Myocrd Img Pet 1Std Rst/Strs	0	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78434	Aqmbf Pet Rest & Rx Stress	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78434	Aqmbf Pet Rest & Rx Stress	A9505	Tl-201 Thallous Chlorid Dx Per Mci	1	CMS Edit
78445	Vascular Flow Imaging	75820	Vein X-Ray Arm/Leg	1	CMS Edit
78445	Vascular Flow Imaging	75822	Vein X-Ray Arms/Legs	1	CMS Edit
78445	Vascular Flow Imaging	75825	Vein X-Ray Trunk	1	CMS Edit
78445	Vascular Flow Imaging	75827	Vein X-Ray Chest	1	CMS Edit
78445	Vascular Flow Imaging	75831	Vein X-Ray Kidney	1	CMS Edit
78445	Vascular Flow Imaging	75833	Vein X-Ray Kidneys	1	CMS Edit
78445	Vascular Flow Imaging	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
78445	Vascular Flow Imaging	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
78445	Vascular Flow Imaging	75860	Vein X-Ray Neck	1	CMS Edit
78445	Vascular Flow Imaging	75870	Vein X-Ray Skull	1	CMS Edit
78445	Vascular Flow Imaging	75872	Vein X-Ray Skull Epidural	1	CMS Edit
78445	Vascular Flow Imaging	75880	Vein X-Ray Eye Socket	1	CMS Edit
78445	Vascular Flow Imaging	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78445	Vascular Flow Imaging	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
78445	Vascular Flow Imaging	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78445	Vascular Flow Imaging	75891	Vein X-Ray Liver	1	CMS Edit
78445	Vascular Flow Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78445	Vascular Flow Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78445	Vascular Flow Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78445	Vascular Flow Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78445	Vascular Flow Imaging	76998	Us Guide Intraop	1	CMS Edit
78445	Vascular Flow Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78445	Vascular Flow Imaging	77002	Needle Localization By Xray	1	CMS Edit
78445	Vascular Flow Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78445	Vascular Flow Imaging	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78445	Vascular Flow Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78445	Vascular Flow Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78445	Vascular Flow Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78445	Vascular Flow Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78445	Vascular Flow Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78445	Vascular Flow Imaging	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78445	Vascular Flow Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78445	Vascular Flow Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78451	Ht Muscle Image Spect Sing	76376	3D Render W/Intrp Postproces	1	CMS Edit
78451	Ht Muscle Image Spect Sing	76377	3D Render W/Intrp Postproces	1	CMS Edit
78451	Ht Muscle Image Spect Sing	76942	Echo Guide For Biopsy	1	CMS Edit
78451	Ht Muscle Image Spect Sing	76998	Us Guide Intraop	1	CMS Edit
78451	Ht Muscle Image Spect Sing	77001	Fluoroguide For Vein Device	1	CMS Edit
78451	Ht Muscle Image Spect Sing	77002	Needle Localization By Xray	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78445	Vascular Flow Imaging	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78453	Ht Muscle Image Planar Sing	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78454	Ht Musc Image Planar Mult	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78466	Heart Infarct Image	0	EVC Edit
78451	Ht Muscle Image Spect Sing	78468	Heart Infarct Image (Ef)	0	EVC Edit
78451	Ht Muscle Image Spect Sing	78469	Heart Infarct Image (3D)	0	EVC Edit
78451	Ht Muscle Image Spect Sing	78472	Gated Heart Planar Single	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78473	Gated Heart Multiple	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78481	Heart First Pass Single	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78483	Heart First Pass Multiple	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78494	Heart Image Spect	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78496	Heart First Pass Add-On	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78580	Lung Perfusion Imaging	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78582	Lung Ventil&Perfus Imaging	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78597	Lung Perfusion Differential	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78598	Lung Perf&Ventilat Diferentl	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78635	Csf Ventriculography	0	CMS Edit
78451	Ht Muscle Image Spect Sing	78800	Rp Locljz Tum 1 Area 1 D lmg	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78801	Rp Locljz Tum 2+Area 1+D lmg	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78802	Rp Locljz Tum Whbdy 1 D lmg	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78451	Ht Muscle Image Spect Sing	78804	Rp Locljz Tum Whbdy 2+D Img	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78451	Ht Muscle Image Spect Sing	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78451	Ht Muscle Image Spect Sing	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78451	Ht Muscle Image Spect Sing	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit
78451	Ht Muscle Image Spect Sing	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78451	Ht Muscle Image Spect Sing	A9572	In-111 Pentetretotide Dx To 6 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78452	Ht Muscle Image Spect Mult	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78452	Ht Muscle Image Spect Mult	76377	3D Render W/Intrp Postproces	1	CMS Edit
78452	Ht Muscle Image Spect Mult	76942	Echo Guide For Biopsy	1	CMS Edit
78452	Ht Muscle Image Spect Mult	76998	Us Guide Intraop	1	CMS Edit
78452	Ht Muscle Image Spect Mult	77001	Fluoroguide For Vein Device	1	CMS Edit
78452	Ht Muscle Image Spect Mult	77002	Needle Localization By Xray	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78445	Vascular Flow Imaging	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78451	Ht Muscle Image Spect Sing	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78453	Ht Muscle Image Planar Sing	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78454	Ht Musc Image Planar Mult	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78466	Heart Infarct Image	0	EVC Edit
78452	Ht Muscle Image Spect Mult	78468	Heart Infarct Image (Ef)	0	EVC Edit
78452	Ht Muscle Image Spect Mult	78469	Heart Infarct Image (3D)	0	EVC Edit
78452	Ht Muscle Image Spect Mult	78472	Gated Heart Planar Single	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78473	Gated Heart Multiple	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78481	Heart First Pass Single	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78483	Heart First Pass Multiple	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78494	Heart Image Spect	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78496	Heart First Pass Add-On	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78580	Lung Perfusion Imaging	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78582	Lung Ventilat&Perfus Imaging	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78597	Lung Perfusion Differential	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78598	Lung Perf&Ventilat Diferentl	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78635	Csf Ventriculography	0	CMS Edit
78452	Ht Muscle Image Spect Mult	78800	Rp Locljz Tum 1 Area 1 D lmg	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78801	Rp Locljz Tum 2+Area 1+D lmg	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78802	Rp Locljz Tum Whbdy 1 D lmg	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78452	Ht Muscle Image Spect Mult	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78452	Ht Muscle Image Spect Mult	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9504	Tc-99M Apcitide Dx Up To 20 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9508	I-131 Iobenguane Sulfate Dx 0.5 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78452	Ht Muscle Image Spect Mult	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9542	In-111 Ibritumab Tiuxt n Dx To 5 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78452	Ht Muscle Image Spect Mult	A9554	I-125 Sodum Iothalamte Dx To 10 Uci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit
78452	Ht Muscle Image Spect Mult	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78452	Ht Muscle Image Spect Mult	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78452	Ht Muscle Image Spect Mult	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9580	Naf F-18 Dx Study Dose To 30 Mci	0	CMS Edit
78452	Ht Muscle Image Spect Mult	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78453	Ht Muscle Image Planar Sing	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78453	Ht Muscle Image Planar Sing	76376	3D Render W/Intrp Postproces	1	CMS Edit
78453	Ht Muscle Image Planar Sing	76377	3D Render W/Intrp Postproces	1	CMS Edit
78453	Ht Muscle Image Planar Sing	76942	Echo Guide For Biopsy	1	CMS Edit
78453	Ht Muscle Image Planar Sing	76998	Us Guide Intraop	1	CMS Edit
78453	Ht Muscle Image Planar Sing	77001	Fluoroguide For Vein Device	1	CMS Edit
78453	Ht Muscle Image Planar Sing	77002	Needle Localization By Xray	1	CMS Edit
78453	Ht Muscle Image Planar Sing	78445	Vascular Flow Imaging	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78466	Heart Infarct Image	0	EVC Edit
78453	Ht Muscle Image Planar Sing	78468	Heart Infarct Image (Ef)	0	EVC Edit
78453	Ht Muscle Image Planar Sing	78469	Heart Infarct Image (3D)	0	EVC Edit
78453	Ht Muscle Image Planar Sing	78472	Gated Heart Planar Single	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78473	Gated Heart Multiple	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78481	Heart First Pass Single	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78483	Heart First Pass Multiple	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78496	Heart First Pass Add-On	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78580	Lung Perfusion Imaging	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78582	Lung Ventil&Perfus Imaging	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78597	Lung Perfusion Differential	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78598	Lung Perf&Ventilat Diferenti	0	CMS Edit
78453	Ht Muscle Image Planar Sing	78635	Csf Ventriculography	0	CMS Edit
78453	Ht Muscle Image Planar Sing	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78453	Ht Muscle Image Planar Sing	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78453	Ht Muscle Image Planar Sing	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78453	Ht Muscle Image Planar Sing	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78453	Ht Muscle Image Planar Sing	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78453	Ht Muscle Image Planar Sing	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78453	Ht Muscle Image Planar Sing	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78453	Ht Muscle Image Planar Sing	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78454	Ht Musc Image Planar Mult	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78454	Ht Musc Image Planar Mult	76376	3D Render W/Intrp Postproces	1	CMS Edit
78454	Ht Musc Image Planar Mult	76377	3D Render W/Intrp Postproces	1	CMS Edit
78454	Ht Musc Image Planar Mult	76942	Echo Guide For Biopsy	1	CMS Edit
78454	Ht Musc Image Planar Mult	76998	Us Guide Intraop	1	CMS Edit
78454	Ht Musc Image Planar Mult	77001	Fluoroguide For Vein Device	1	CMS Edit
78454	Ht Musc Image Planar Mult	77002	Needle Localization By Xray	1	CMS Edit
78454	Ht Musc Image Planar Mult	78445	Vascular Flow Imaging	0	CMS Edit
78454	Ht Musc Image Planar Mult	78453	Ht Muscle Image Planar Sing	0	CMS Edit
78454	Ht Musc Image Planar Mult	78466	Heart Infarct Image	0	EVC Edit
78454	Ht Musc Image Planar Mult	78468	Heart Infarct Image (Ef)	0	EVC Edit
78454	Ht Musc Image Planar Mult	78469	Heart Infarct Image (3D)	0	EVC Edit
78454	Ht Musc Image Planar Mult	78472	Gated Heart Planar Single	0	CMS Edit
78454	Ht Musc Image Planar Mult	78473	Gated Heart Multiple	0	CMS Edit
78454	Ht Musc Image Planar Mult	78481	Heart First Pass Single	0	CMS Edit
78454	Ht Musc Image Planar Mult	78483	Heart First Pass Multiple	0	CMS Edit
78454	Ht Musc Image Planar Mult	78496	Heart First Pass Add-On	0	CMS Edit
78454	Ht Musc Image Planar Mult	78580	Lung Perfusion Imaging	0	CMS Edit
78454	Ht Musc Image Planar Mult	78582	Lung Ventil&Perfus Imaging	0	CMS Edit
78454	Ht Musc Image Planar Mult	78597	Lung Perfusion Differential	0	CMS Edit
78454	Ht Musc Image Planar Mult	78598	Lung Perf&Ventilat Diferentl	0	CMS Edit
78454	Ht Musc Image Planar Mult	78635	Csf Ventriculography	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78454	Ht Musc Image Planar Mult	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78454	Ht Musc Image Planar Mult	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78456	Acute Venous Thrombus Image	75822	Vein X-Ray Arms/Legs	1	CMS Edit
78456	Acute Venous Thrombus Image	75825	Vein X-Ray Trunk	1	CMS Edit
78456	Acute Venous Thrombus Image	75827	Vein X-Ray Chest	1	CMS Edit
78456	Acute Venous Thrombus Image	75831	Vein X-Ray Kidney	1	CMS Edit
78456	Acute Venous Thrombus Image	75833	Vein X-Ray Kidneys	1	CMS Edit
78456	Acute Venous Thrombus Image	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
78456	Acute Venous Thrombus Image	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
78456	Acute Venous Thrombus Image	75860	Vein X-Ray Neck	1	CMS Edit
78456	Acute Venous Thrombus Image	75870	Vein X-Ray Skull	1	CMS Edit
78456	Acute Venous Thrombus Image	75872	Vein X-Ray Skull Epidural	1	CMS Edit
78456	Acute Venous Thrombus Image	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78456	Acute Venous Thrombus Image	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
78456	Acute Venous Thrombus Image	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78456	Acute Venous Thrombus Image	75891	Vein X-Ray Liver	1	CMS Edit
78456	Acute Venous Thrombus Image	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78456	Acute Venous Thrombus Image	76376	3D Render W/Intrp Postproces	1	CMS Edit
78456	Acute Venous Thrombus Image	76377	3D Render W/Intrp Postproces	1	CMS Edit
78456	Acute Venous Thrombus Image	76942	Echo Guide For Biopsy	1	CMS Edit
78456	Acute Venous Thrombus Image	76998	Us Guide Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78456	Acute Venous Thrombus Image	77001	Fluoroguide For Vein Device	1	CMS Edit
78456	Acute Venous Thrombus Image	77002	Needle Localization By Xray	1	CMS Edit
78456	Acute Venous Thrombus Image	78445	Vascular Flow Imaging	0	CMS Edit
78457	Venous Thrombosis Imaging	75822	Vein X-Ray Arms/Legs	1	CMS Edit
78457	Venous Thrombosis Imaging	75825	Vein X-Ray Trunk	1	CMS Edit
78457	Venous Thrombosis Imaging	75827	Vein X-Ray Chest	1	CMS Edit
78457	Venous Thrombosis Imaging	75831	Vein X-Ray Kidney	1	CMS Edit
78457	Venous Thrombosis Imaging	75833	Vein X-Ray Kidneys	1	CMS Edit
78457	Venous Thrombosis Imaging	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
78457	Venous Thrombosis Imaging	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
78457	Venous Thrombosis Imaging	75860	Vein X-Ray Neck	1	CMS Edit
78457	Venous Thrombosis Imaging	75870	Vein X-Ray Skull	1	CMS Edit
78457	Venous Thrombosis Imaging	75872	Vein X-Ray Skull Epidural	1	CMS Edit
78457	Venous Thrombosis Imaging	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78457	Venous Thrombosis Imaging	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
78457	Venous Thrombosis Imaging	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78457	Venous Thrombosis Imaging	75891	Vein X-Ray Liver	1	CMS Edit
78457	Venous Thrombosis Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78457	Venous Thrombosis Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78457	Venous Thrombosis Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78457	Venous Thrombosis Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78457	Venous Thrombosis Imaging	76998	Us Guide Intraop	1	CMS Edit
78457	Venous Thrombosis Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78457	Venous Thrombosis Imaging	77002	Needle Localization By Xray	1	CMS Edit
78457	Venous Thrombosis Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78457	Venous Thrombosis Imaging	78456	Acute Venous Thrombus Image	1	CMS Edit
78457	Venous Thrombosis Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78457	Venous Thrombosis Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78457	Venous Thrombosis Imaging	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78458	Ven Thrombosis Images Bilat	75822	Vein X-Ray Arms/Legs	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75825	Vein X-Ray Trunk	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75827	Vein X-Ray Chest	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75831	Vein X-Ray Kidney	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78458	Ven Thrombosis Images Bilat	75833	Vein X-Ray Kidneys	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75840	Vein X-Ray Adrenal Gland	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75842	Vein X-Ray Adrenal Glands	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75860	Vein X-Ray Neck	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75870	Vein X-Ray Skull	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75872	Vein X-Ray Skull Epidural	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75885	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75887	Vein X-Ray Liver W/O Hemodyn	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75889	Vein X-Ray Liver W/Hemodynam	1	CMS Edit
78458	Ven Thrombosis Images Bilat	75891	Vein X-Ray Liver	1	CMS Edit
78458	Ven Thrombosis Images Bilat	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78458	Ven Thrombosis Images Bilat	76376	3D Render W/Intrp Postproces	1	CMS Edit
78458	Ven Thrombosis Images Bilat	76377	3D Render W/Intrp Postproces	1	CMS Edit
78458	Ven Thrombosis Images Bilat	76942	Echo Guide For Biopsy	1	CMS Edit
78458	Ven Thrombosis Images Bilat	76998	Us Guide Intraop	1	CMS Edit
78458	Ven Thrombosis Images Bilat	77001	Fluoroguide For Vein Device	1	CMS Edit
78458	Ven Thrombosis Images Bilat	77002	Needle Localization By Xray	1	CMS Edit
78458	Ven Thrombosis Images Bilat	78445	Vascular Flow Imaging	0	CMS Edit
78458	Ven Thrombosis Images Bilat	78456	Acute Venous Thrombus Image	1	CMS Edit
78458	Ven Thrombosis Images Bilat	78457	Venous Thrombosis Imaging	1	CMS Edit
78458	Ven Thrombosis Images Bilat	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78458	Ven Thrombosis Images Bilat	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78458	Ven Thrombosis Images Bilat	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78458	Ven Thrombosis Images Bilat	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78458	Ven Thrombosis Images Bilat	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78459	Myocrd Img Pet Single Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78459	Myocrd Img Pet Single Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78459	Myocrd Img Pet Single Study	78445	Vascular Flow Imaging	0	CMS Edit
78459	Myocrd Img Pet Single Study	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78459	Myocrd Img Pet Single Study	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78459	Myocrd Img Pet Single Study	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78459	Myocrd Img Pet Single Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78459	Myocrd Img Pet Single Study	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	1	CMS Edit
78459	Myocrd Img Pet Single Study	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit
78466	Heart Infarct Image	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78466	Heart Infarct Image	76376	3D Render W/Intrp Postproces	1	CMS Edit
78466	Heart Infarct Image	76377	3D Render W/Intrp Postproces	1	CMS Edit
78466	Heart Infarct Image	76942	Echo Guide For Biopsy	1	CMS Edit
78466	Heart Infarct Image	76998	Us Guide Intraop	1	CMS Edit
78466	Heart Infarct Image	77001	Fluoroguide For Vein Device	1	CMS Edit
78466	Heart Infarct Image	77002	Needle Localization By Xray	1	CMS Edit
78466	Heart Infarct Image	78445	Vascular Flow Imaging	0	CMS Edit
78466	Heart Infarct Image	78468	Heart Infarct Image (Ef)	1	CMS Edit
78466	Heart Infarct Image	78469	Heart Infarct Image (3D)	1	CMS Edit
78466	Heart Infarct Image	78635	Csf Ventriculography	0	CMS Edit
78466	Heart Infarct Image	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78466	Heart Infarct Image	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78466	Heart Infarct Image	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78466	Heart Infarct Image	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78466	Heart Infarct Image	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78468	Heart Infarct Image (Ef)	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78468	Heart Infarct Image (Ef)	76376	3D Render W/Intrp Postproces	1	CMS Edit
78468	Heart Infarct Image (Ef)	76377	3D Render W/Intrp Postproces	1	CMS Edit
78468	Heart Infarct Image (Ef)	76942	Echo Guide For Biopsy	1	CMS Edit
78468	Heart Infarct Image (Ef)	76998	Us Guide Intraop	1	CMS Edit
78468	Heart Infarct Image (Ef)	77001	Fluoroguide For Vein Device	1	CMS Edit
78468	Heart Infarct Image (Ef)	77002	Needle Localization By Xray	1	CMS Edit
78468	Heart Infarct Image (Ef)	78445	Vascular Flow Imaging	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78468	Heart Infarct Image (Ef)	78635	Csf Ventriculography	0	CMS Edit
78468	Heart Infarct Image (Ef)	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78468	Heart Infarct Image (Ef)	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78468	Heart Infarct Image (Ef)	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78468	Heart Infarct Image (Ef)	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78468	Heart Infarct Image (Ef)	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78469	Heart Infarct Image (3D)	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78469	Heart Infarct Image (3D)	76376	3D Render W/Intrp Postproces	1	CMS Edit
78469	Heart Infarct Image (3D)	76377	3D Render W/Intrp Postproces	1	CMS Edit
78469	Heart Infarct Image (3D)	76942	Echo Guide For Biopsy	1	CMS Edit
78469	Heart Infarct Image (3D)	76998	Us Guide Intraop	1	CMS Edit
78469	Heart Infarct Image (3D)	77001	Fluoroguide For Vein Device	1	CMS Edit
78469	Heart Infarct Image (3D)	77002	Needle Localization By Xray	1	CMS Edit
78469	Heart Infarct Image (3D)	78445	Vascular Flow Imaging	0	CMS Edit
78469	Heart Infarct Image (3D)	78468	Heart Infarct Image (Ef)	1	CMS Edit
78469	Heart Infarct Image (3D)	78472	Gated Heart Planar Single	0	EVC Edit
78469	Heart Infarct Image (3D)	78635	Csf Ventriculography	0	CMS Edit
78469	Heart Infarct Image (3D)	78800	Rp Locljz Tum 1 Area 1 D lmg	1	CMS Edit
78469	Heart Infarct Image (3D)	78801	Rp Locljz Tum 2+Area 1+D lmg	1	CMS Edit
78469	Heart Infarct Image (3D)	78802	Rp Locljz Tum Whbdy 1 D lmg	1	CMS Edit
78469	Heart Infarct Image (3D)	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78469	Heart Infarct Image (3D)	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78469	Heart Infarct Image (3D)	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78469	Heart Infarct Image (3D)	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78469	Heart Infarct Image (3D)	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78469	Heart Infarct Image (3D)	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78469	Heart Infarct Image (3D)	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78469	Heart Infarct Image (3D)	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78469	Heart Infarct Image (3D)	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78469	Heart Infarct Image (3D)	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78472	Gated Heart Planar Single	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78472	Gated Heart Planar Single	76376	3D Render W/Intrp Postproces	1	CMS Edit
78472	Gated Heart Planar Single	76377	3D Render W/Intrp Postproces	1	CMS Edit
78472	Gated Heart Planar Single	76942	Echo Guide For Biopsy	1	CMS Edit
78472	Gated Heart Planar Single	76998	Us Guide Intraop	1	CMS Edit
78472	Gated Heart Planar Single	77001	Fluoroguide For Vein Device	1	CMS Edit
78472	Gated Heart Planar Single	77002	Needle Localization By Xray	1	CMS Edit
78472	Gated Heart Planar Single	78445	Vascular Flow Imaging	0	CMS Edit
78472	Gated Heart Planar Single	78481	Heart First Pass Single	0	CMS Edit
78472	Gated Heart Planar Single	78635	Csf Ventriculography	0	CMS Edit
78472	Gated Heart Planar Single	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78472	Gated Heart Planar Single	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78472	Gated Heart Planar Single	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78472	Gated Heart Planar Single	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9505	TI-201 Thallous Chlorid Dx Per Mci	1	CMS Edit
78472	Gated Heart Planar Single	A9512	Tc-99M Pertechnetate Dx Per Mci	1	CMS Edit
78472	Gated Heart Planar Single	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78472	Gated Heart Planar Single	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78472	Gated Heart Planar Single	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78472	Gated Heart Planar Single	A9555	Rubidium Rb-82 Dx Up To 60 Mci	1	CMS Edit
78472	Gated Heart Planar Single	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78472	Gated Heart Planar Single	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9566	Tc-99M Fanolesomab Dx Up To 25 Mci	0	CMS Edit
78472	Gated Heart Planar Single	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78472	Gated Heart Planar Single	A9586	Florbetapr F18 Dx-Stdy Ds To 10 Mci	0	CMS Edit
78473	Gated Heart Multiple	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78473	Gated Heart Multiple	76376	3D Render W/Intrp Postproces	1	CMS Edit
78473	Gated Heart Multiple	76377	3D Render W/Intrp Postproces	1	CMS Edit
78473	Gated Heart Multiple	76942	Echo Guide For Biopsy	1	CMS Edit
78473	Gated Heart Multiple	76998	Us Guide Intraop	1	CMS Edit
78473	Gated Heart Multiple	77001	Fluoroguide For Vein Device	1	CMS Edit
78473	Gated Heart Multiple	77002	Needle Localization By Xray	1	CMS Edit
78473	Gated Heart Multiple	78445	Vascular Flow Imaging	0	CMS Edit
78473	Gated Heart Multiple	78472	Gated Heart Planar Single	0	CMS Edit
78473	Gated Heart Multiple	78481	Heart First Pass Single	0	CMS Edit
78473	Gated Heart Multiple	78483	Heart First Pass Multiple	0	CMS Edit
78473	Gated Heart Multiple	78494	Heart Image Spect	0	CMS Edit
78473	Gated Heart Multiple	78496	Heart First Pass Add-On	0	CMS Edit
78473	Gated Heart Multiple	78635	Csf Ventriculography	0	CMS Edit
78473	Gated Heart Multiple	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78473	Gated Heart Multiple	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78473	Gated Heart Multiple	A9503	Tc-99M Medronate Dx Up To 30 Mci	1	CMS Edit
78473	Gated Heart Multiple	A9505	Tl-201 Thallous Chlorid Dx Per Mci	1	CMS Edit
78473	Gated Heart Multiple	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78473	Gated Heart Multiple	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78473	Gated Heart Multiple	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78473	Gated Heart Multiple	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78473	Gated Heart Multiple	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78473	Gated Heart Multiple	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78473	Gated Heart Multiple	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78481	Heart First Pass Single	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78481	Heart First Pass Single	76376	3D Render W/Intrp Postproces	1	CMS Edit
78481	Heart First Pass Single	76377	3D Render W/Intrp Postproces	1	CMS Edit
78481	Heart First Pass Single	76942	Echo Guide For Biopsy	1	CMS Edit
78481	Heart First Pass Single	76998	Us Guide Intraop	1	CMS Edit
78481	Heart First Pass Single	77001	Fluoroguide For Vein Device	1	CMS Edit
78481	Heart First Pass Single	77002	Needle Localization By Xray	1	CMS Edit
78481	Heart First Pass Single	78445	Vascular Flow Imaging	0	CMS Edit
78481	Heart First Pass Single	78496	Heart First Pass Add-On	0	CMS Edit
78481	Heart First Pass Single	78635	Csf Ventriculography	0	CMS Edit
78481	Heart First Pass Single	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78481	Heart First Pass Single	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78481	Heart First Pass Single	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78481	Heart First Pass Single	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78483	Heart First Pass Multiple	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78483	Heart First Pass Multiple	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78483	Heart First Pass Multiple	76377	3D Render W/Intrp Postproces	1	CMS Edit
78483	Heart First Pass Multiple	76942	Echo Guide For Biopsy	1	CMS Edit
78483	Heart First Pass Multiple	76998	Us Guide Intraop	1	CMS Edit
78483	Heart First Pass Multiple	77001	Fluoroguide For Vein Device	1	CMS Edit
78483	Heart First Pass Multiple	77002	Needle Localization By Xray	1	CMS Edit
78483	Heart First Pass Multiple	78445	Vascular Flow Imaging	0	CMS Edit
78483	Heart First Pass Multiple	78472	Gated Heart Planar Single	0	CMS Edit
78483	Heart First Pass Multiple	78481	Heart First Pass Single	0	CMS Edit
78483	Heart First Pass Multiple	78494	Heart Image Spect	0	CMS Edit
78483	Heart First Pass Multiple	78496	Heart First Pass Add-On	0	CMS Edit
78483	Heart First Pass Multiple	78635	Csf Ventriculography	0	CMS Edit
78483	Heart First Pass Multiple	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78483	Heart First Pass Multiple	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78483	Heart First Pass Multiple	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78483	Heart First Pass Multiple	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78483	Heart First Pass Multiple	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	76376	3D Render W/Intrp Postproces	1	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	76377	3D Render W/Intrp Postproces	1	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	78445	Vascular Flow Imaging	0	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78491	Myocrd Img Pet 1Std Rst/Strs	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	76376	3D Render W/Intrp Postproces	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	76377	3D Render W/Intrp Postproces	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	78429	Myocrd Img Pet 1 Std W/Ct	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	78430	Myocrd Img Pet Rst/Strs W/Ct	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	78445	Vascular Flow Imaging	0	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78492	Myocrd Img Pet Mlt Rst&Strs	78491	Myocrd Img Pet 1Std Rst/Strs	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9505	Tl-201 Thallous Chlorid Dx Per Mci	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78492	Myocrd Img Pet Mlt Rst&Strs	A9567	Tc-99M Pentetate Dx ArosI To 75 Mci	0	CMS Edit
78494	Heart Image Spect	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78494	Heart Image Spect	76376	3D Render W/Intrp Postproces	1	CMS Edit
78494	Heart Image Spect	76377	3D Render W/Intrp Postproces	1	CMS Edit
78494	Heart Image Spect	76942	Echo Guide For Biopsy	1	CMS Edit
78494	Heart Image Spect	76998	Us Guide Intraop	1	CMS Edit
78494	Heart Image Spect	77001	Fluoroguide For Vein Device	1	CMS Edit
78494	Heart Image Spect	77002	Needle Localization By Xray	1	CMS Edit
78494	Heart Image Spect	78445	Vascular Flow Imaging	0	CMS Edit
78494	Heart Image Spect	78472	Gated Heart Planar Single	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78494	Heart Image Spect	78481	Heart First Pass Single	0	CMS Edit
78494	Heart Image Spect	78496	Heart First Pass Add-On	0	CMS Edit
78494	Heart Image Spect	78635	Csf Ventriculography	0	CMS Edit
78494	Heart Image Spect	78800	Rp Locljz Tum 1 Area 1 D Img	1	CMS Edit
78494	Heart Image Spect	78801	Rp Locljz Tum 2+Area 1+D Img	1	CMS Edit
78494	Heart Image Spect	78802	Rp Locljz Tum Whbdy 1 D Img	1	CMS Edit
78494	Heart Image Spect	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78494	Heart Image Spect	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78494	Heart Image Spect	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78494	Heart Image Spect	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78494	Heart Image Spect	A9500	Tc-99M Sestamibi Dx Per Study Dose	1	CMS Edit
78494	Heart Image Spect	A9502	Tc-99M Tetrofosmin Dx - Study Dose	1	CMS Edit
78494	Heart Image Spect	A9512	Tc-99M Per technetate Dx Per Mci	0	CMS Edit
78494	Heart Image Spect	A9538	Tc-99M Pyrophosphate Dx Up To 25 Mci	0	CMS Edit
78494	Heart Image Spect	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78494	Heart Image Spect	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78496	Heart First Pass Add-On	78445	Vascular Flow Imaging	0	CMS Edit
78579	Lung Ventilation Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78579	Lung Ventilation Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78579	Lung Ventilation Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78579	Lung Ventilation Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78579	Lung Ventilation Imaging	76998	Us Guide Intraop	1	CMS Edit
78579	Lung Ventilation Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78579	Lung Ventilation Imaging	77002	Needle Localization By Xray	1	CMS Edit
78579	Lung Ventilation Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78579	Lung Ventilation Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78579	Lung Ventilation Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78579	Lung Ventilation Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78579	Lung Ventilation Imaging	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9532	I-125 Serum Alb Dx Per 5 Microcurie	0	CMS Edit
78579	Lung Ventilation Imaging	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78579	Lung Ventilation Imaging	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78580	Lung Perfusion Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78580	Lung Perfusion Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78580	Lung Perfusion Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78580	Lung Perfusion Imaging	76998	Us Guide Intraop	1	CMS Edit
78580	Lung Perfusion Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78580	Lung Perfusion Imaging	77002	Needle Localization By Xray	1	CMS Edit
78580	Lung Perfusion Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78580	Lung Perfusion Imaging	78579	Lung Ventilation Imaging	0	CMS Edit
78580	Lung Perfusion Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78580	Lung Perfusion Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78580	Lung Perfusion Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78580	Lung Perfusion Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78580	Lung Perfusion Imaging	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78580	Lung Perfusion Imaging	A9532	I-125 Serum Alb Dx Per 5 Microcurie	0	CMS Edit
78580	Lung Perfusion Imaging	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78580	Lung Perfusion Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78580	Lung Perfusion Imaging	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78582	Lung Ventilat&Perfus Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78582	Lung Ventil&Perfus Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	76998	Us Guide Intraop	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	77002	Needle Localization By Xray	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	78579	Lung Ventilation Imaging	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	78580	Lung Perfusion Imaging	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	78598	Lung Perf&Ventilat Diferentl	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9512	Tc-99M Perthechnetate Dx Per Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9531	I-131 Sodim Iodide Dx Up To 100 Uci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9532	I-125 Serum Alb Dx Per 5 Microcurie	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9550	Tc-99M Sodim Gluceptat Dx To 25 Mci	0	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78582	Lung Ventil&Perfus Imaging	A9554	I-125 Sodum Iothalamte Dx To 10 Uci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78582	Lung Ventilat&Perfus Imaging	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78582	Lung Ventilat&Perfus Imaging	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78597	Lung Perfusion Differential	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78597	Lung Perfusion Differential	76376	3D Render W/Intrp Postproces	1	CMS Edit
78597	Lung Perfusion Differential	76377	3D Render W/Intrp Postproces	1	CMS Edit
78597	Lung Perfusion Differential	76942	Echo Guide For Biopsy	1	CMS Edit
78597	Lung Perfusion Differential	76998	Us Guide Intraop	1	CMS Edit
78597	Lung Perfusion Differential	77001	Fluoroguide For Vein Device	1	CMS Edit
78597	Lung Perfusion Differential	77002	Needle Localization By Xray	1	CMS Edit
78597	Lung Perfusion Differential	78445	Vascular Flow Imaging	0	CMS Edit
78597	Lung Perfusion Differential	78579	Lung Ventilation Imaging	1	CMS Edit
78597	Lung Perfusion Differential	78580	Lung Perfusion Imaging	0	CMS Edit
78597	Lung Perfusion Differential	78582	Lung Ventilat&Perfus Imaging	0	CMS Edit
78597	Lung Perfusion Differential	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78597	Lung Perfusion Differential	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78597	Lung Perfusion Differential	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78597	Lung Perfusion Differential	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78597	Lung Perfusion Differential	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78597	Lung Perfusion Differential	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	1	CMS Edit
78597	Lung Perfusion Differential	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9567	Tc-99M Pentetate Dx Arosi To 75 Mci	0	CMS Edit
78597	Lung Perfusion Differential	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	76376	3D Render W/Intrp Postproces	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	76377	3D Render W/Intrp Postproces	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	76942	Echo Guide For Biopsy	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	76998	Us Guide Intraop	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	77001	Fluoroguide For Vein Device	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	77002	Needle Localization By Xray	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	78445	Vascular Flow Imaging	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	78579	Lung Ventilation Imaging	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	78580	Lung Perfusion Imaging	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	78597	Lung Perfusion Differential	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9505	TI-201 Thallous Chlorid Dx Per Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78598	Lung Perf&Ventilat Diferentl	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9556	Gallium Ga-67 Citrate Dx Per Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78598	Lung Perf&Ventilat Diferentl	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78600	Brain Image < 4 Views	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78600	Brain Image < 4 Views	76376	3D Render W/Intrp Postproces	1	CMS Edit
78600	Brain Image < 4 Views	76377	3D Render W/Intrp Postproces	1	CMS Edit
78600	Brain Image < 4 Views	76942	Echo Guide For Biopsy	1	CMS Edit
78600	Brain Image < 4 Views	76998	Us Guide Intraop	1	CMS Edit
78600	Brain Image < 4 Views	77001	Fluoroguide For Vein Device	1	CMS Edit
78600	Brain Image < 4 Views	77002	Needle Localization By Xray	1	CMS Edit
78600	Brain Image < 4 Views	78445	Vascular Flow Imaging	0	CMS Edit
78600	Brain Image < 4 Views	78610	Brain Flow Imaging Only	0	EVC Edit
78601	Brain Image W/Flow < 4 Views	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	76376	3D Render W/Intrp Postproces	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	76377	3D Render W/Intrp Postproces	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	76942	Echo Guide For Biopsy	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78601	Brain Image W/Flow < 4 Views	77001	Fluoroguide For Vein Device	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	77002	Needle Localization By Xray	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	78445	Vascular Flow Imaging	0	CMS Edit
78601	Brain Image W/Flow < 4 Views	78600	Brain Image < 4 Views	1	CMS Edit
78601	Brain Image W/Flow < 4 Views	78610	Brain Flow Imaging Only	1	CMS Edit
78605	Brain Image 4+ Views	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78605	Brain Image 4+ Views	76376	3D Render W/Intrp Postproces	1	CMS Edit
78605	Brain Image 4+ Views	76377	3D Render W/Intrp Postproces	1	CMS Edit
78605	Brain Image 4+ Views	76942	Echo Guide For Biopsy	1	CMS Edit
78605	Brain Image 4+ Views	76998	Us Guide Intraop	1	CMS Edit
78605	Brain Image 4+ Views	77001	Fluoroguide For Vein Device	1	CMS Edit
78605	Brain Image 4+ Views	77002	Needle Localization By Xray	1	CMS Edit
78605	Brain Image 4+ Views	78445	Vascular Flow Imaging	0	CMS Edit
78605	Brain Image 4+ Views	78600	Brain Image < 4 Views	1	CMS Edit
78605	Brain Image 4+ Views	78601	Brain Image W/Flow < 4 Views	0	EVC Edit
78605	Brain Image 4+ Views	78610	Brain Flow Imaging Only	0	EVC Edit
78605	Brain Image 4+ Views	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78605	Brain Image 4+ Views	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78606	Brain Image W/Flow 4 + Views	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	76376	3D Render W/Intrp Postproces	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	76377	3D Render W/Intrp Postproces	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	76942	Echo Guide For Biopsy	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	76998	Us Guide Intraop	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	77001	Fluoroguide For Vein Device	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	77002	Needle Localization By Xray	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	78445	Vascular Flow Imaging	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78606	Brain Image W/Flow 4 + Views	78600	Brain Image < 4 Views	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	78601	Brain Image W/Flow < 4 Views	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	78605	Brain Image 4+ Views	1	CMS Edit
78606	Brain Image W/Flow 4 + Views	78610	Brain Flow Imaging Only	1	CMS Edit
78608	Brain Imaging (Pet)	76376	3D Render W/Intrp Postproces	1	CMS Edit
78608	Brain Imaging (Pet)	76377	3D Render W/Intrp Postproces	1	CMS Edit
78608	Brain Imaging (Pet)	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78608	Brain Imaging (Pet)	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78608	Brain Imaging (Pet)	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78608	Brain Imaging (Pet)	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78608	Brain Imaging (Pet)	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78608	Brain Imaging (Pet)	A9580	Naf F-18 Dx Study Dose To 30 Mci	1	CMS Edit
78609	Brain Imaging (Pet)	76376	3D Render W/Intrp Postproces	0	EVC Edit
78609	Brain Imaging (Pet)	76377	3D Render W/Intrp Postproces	0	EVC Edit
78610	Brain Flow Imaging Only	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78610	Brain Flow Imaging Only	76376	3D Render W/Intrp Postproces	1	CMS Edit
78610	Brain Flow Imaging Only	76377	3D Render W/Intrp Postproces	1	CMS Edit
78610	Brain Flow Imaging Only	76942	Echo Guide For Biopsy	1	CMS Edit
78610	Brain Flow Imaging Only	76998	Us Guide Intraop	1	CMS Edit
78610	Brain Flow Imaging Only	77001	Fluoroguide For Vein Device	1	CMS Edit
78610	Brain Flow Imaging Only	77002	Needle Localization By Xray	1	CMS Edit
78610	Brain Flow Imaging Only	78445	Vascular Flow Imaging	0	CMS Edit
78610	Brain Flow Imaging Only	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78610	Brain Flow Imaging Only	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78630	Cerebrospinal Fluid Scan	76376	3D Render W/Intrp Postproces	1	CMS Edit
78630	Cerebrospinal Fluid Scan	76377	3D Render W/Intrp Postproces	1	CMS Edit
78630	Cerebrospinal Fluid Scan	76800	Us Exam Spinal Canal	1	CMS Edit
78630	Cerebrospinal Fluid Scan	76942	Echo Guide For Biopsy	1	CMS Edit
78630	Cerebrospinal Fluid Scan	76998	Us Guide Intraop	1	CMS Edit
78630	Cerebrospinal Fluid Scan	77001	Fluoroguide For Vein Device	1	CMS Edit
78630	Cerebrospinal Fluid Scan	77002	Needle Localization By Xray	1	CMS Edit
78630	Cerebrospinal Fluid Scan	78445	Vascular Flow Imaging	0	CMS Edit
78630	Cerebrospinal Fluid Scan	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9507	In-111 Capromb Pendetd Dx To 10 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9542	In-111 Ibritumab Tiuxt n Dx To 5 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78630	Cerebrospinal Fluid Scan	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78635	Csf Ventriculography	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78635	Csf Ventriculography	76376	3D Render W/Intrp Postproces	1	CMS Edit
78635	Csf Ventriculography	76377	3D Render W/Intrp Postproces	1	CMS Edit
78635	Csf Ventriculography	76800	Us Exam Spinal Canal	1	CMS Edit
78635	Csf Ventriculography	76942	Echo Guide For Biopsy	1	CMS Edit
78635	Csf Ventriculography	76998	Us Guide Intraop	1	CMS Edit
78635	Csf Ventriculography	77001	Fluoroguide For Vein Device	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78635	Csf Ventriculography	77002	Needle Localization By Xray	1	CMS Edit
78635	Csf Ventriculography	78445	Vascular Flow Imaging	0	CMS Edit
78635	Csf Ventriculography	78630	Cerebrospinal Fluid Scan	1	CMS Edit
78635	Csf Ventriculography	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78645	Csf Shunt Evaluation	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78645	Csf Shunt Evaluation	76376	3D Render W/Intrp Postproces	1	CMS Edit
78645	Csf Shunt Evaluation	76377	3D Render W/Intrp Postproces	1	CMS Edit
78645	Csf Shunt Evaluation	76800	Us Exam Spinal Canal	1	CMS Edit
78645	Csf Shunt Evaluation	76942	Echo Guide For Biopsy	1	CMS Edit
78645	Csf Shunt Evaluation	76998	Us Guide Intraop	1	CMS Edit
78645	Csf Shunt Evaluation	77001	Fluoroguide For Vein Device	1	CMS Edit
78645	Csf Shunt Evaluation	77002	Needle Localization By Xray	1	CMS Edit
78645	Csf Shunt Evaluation	78445	Vascular Flow Imaging	0	CMS Edit
78645	Csf Shunt Evaluation	78630	Cerebrospinal Fluid Scan	1	CMS Edit
78645	Csf Shunt Evaluation	78635	Csf Ventriculography	1	CMS Edit
78645	Csf Shunt Evaluation	78650	Csf Leakage Imaging	0	CMS Edit
78645	Csf Shunt Evaluation	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78645	Csf Shunt Evaluation	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78645	Csf Shunt Evaluation	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9512	Tc-99M Per technetate Dx Per Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78645	Csf Shunt Evaluation	A9570	Indium In-111 Autolg Wbc Dx Dose	0	CMS Edit
78645	Csf Shunt Evaluation	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78650	Csf Leakage Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78650	Csf Leakage Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
78650	Csf Leakage Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78650	Csf Leakage Imaging	76800	Us Exam Spinal Canal	1	CMS Edit
78650	Csf Leakage Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
78650	Csf Leakage Imaging	76998	Us Guide Intraop	1	CMS Edit
78650	Csf Leakage Imaging	77001	Fluoroguide For Vein Device	1	CMS Edit
78650	Csf Leakage Imaging	77002	Needle Localization By Xray	1	CMS Edit
78650	Csf Leakage Imaging	78445	Vascular Flow Imaging	0	CMS Edit
78650	Csf Leakage Imaging	78630	Cerebrospinal Fluid Scan	1	CMS Edit
78650	Csf Leakage Imaging	78635	Csf Ventriculography	1	CMS Edit
78650	Csf Leakage Imaging	78803	Rp Locljz Tum Spect 1 Area	0	CMS Edit
78650	Csf Leakage Imaging	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78650	Csf Leakage Imaging	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78660	Nuclear Exam Of Tear Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	76998	Us Guide Intraop	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	77002	Needle Localization By Xray	1	CMS Edit
78660	Nuclear Exam Of Tear Flow	78445	Vascular Flow Imaging	0	CMS Edit
78660	Nuclear Exam Of Tear Flow	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78700	Kidney Imaging Morphol	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78700	Kidney Imaging Morphol	76376	3D Render W/Intrp Postproces	1	CMS Edit
78700	Kidney Imaging Morphol	76377	3D Render W/Intrp Postproces	1	CMS Edit
78700	Kidney Imaging Morphol	76942	Echo Guide For Biopsy	1	CMS Edit
78700	Kidney Imaging Morphol	76998	Us Guide Intraop	1	CMS Edit
78700	Kidney Imaging Morphol	77001	Fluoroguide For Vein Device	1	CMS Edit
78700	Kidney Imaging Morphol	77002	Needle Localization By Xray	1	CMS Edit
78700	Kidney Imaging Morphol	78445	Vascular Flow Imaging	0	CMS Edit
78700	Kidney Imaging Morphol	78725	Kidney Function Study	0	CMS Edit
78700	Kidney Imaging Morphol	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78700	Kidney Imaging Morphol	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78700	Kidney Imaging Morphol	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78700	Kidney Imaging Morphol	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78700	Kidney Imaging Morphol	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78701	Kidney Imaging With Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78701	Kidney Imaging With Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78701	Kidney Imaging With Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78701	Kidney Imaging With Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78701	Kidney Imaging With Flow	76998	Us Guide Intraop	1	CMS Edit
78701	Kidney Imaging With Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78701	Kidney Imaging With Flow	77002	Needle Localization By Xray	1	CMS Edit
78701	Kidney Imaging With Flow	78445	Vascular Flow Imaging	0	CMS Edit
78701	Kidney Imaging With Flow	78700	Kidney Imaging Morphol	0	CMS Edit
78701	Kidney Imaging With Flow	78725	Kidney Function Study	0	CMS Edit
78701	Kidney Imaging With Flow	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78701	Kidney Imaging With Flow	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78701	Kidney Imaging With Flow	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78701	Kidney Imaging With Flow	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78701	Kidney Imaging With Flow	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78701	Kidney Imaging With Flow	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	76376	3D Render W/Intrp Postproces	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	76377	3D Render W/Intrp Postproces	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	76942	Echo Guide For Biopsy	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	76998	Us Guide Intraop	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	77001	Fluoroguide For Vein Device	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	77002	Needle Localization By Xray	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	78445	Vascular Flow Imaging	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78707	K Flow/Funct Image W/O Drug	78700	Kidney Imaging Morphol	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	78701	Kidney Imaging With Flow	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	78708	K Flow/Funct Image W/Drug	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	78725	Kidney Function Study	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9503	Tc-99M Medronate Dx Up To 30 Mci	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9524	I-131 Iodinatd Serum Alb Dx 5 Uci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9554	I-125 Sodum lothalamte Dx To 10 Uci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9557	Tc-99M Bicisate Dx Up To 25 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78707	K Flow/Funct Image W/O Drug	A9569	Tc-99M Exametazime Autolg Wbc Dx	0	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78708	K Flow/Funct Image W/Drug	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78708	K Flow/Funct Image W/Drug	76376	3D Render W/Intrp Postproces	1	CMS Edit
78708	K Flow/Funct Image W/Drug	76377	3D Render W/Intrp Postproces	1	CMS Edit
78708	K Flow/Funct Image W/Drug	76942	Echo Guide For Biopsy	1	CMS Edit
78708	K Flow/Funct Image W/Drug	76998	Us Guide Intraop	1	CMS Edit
78708	K Flow/Funct Image W/Drug	77001	Fluoroguide For Vein Device	1	CMS Edit
78708	K Flow/Funct Image W/Drug	77002	Needle Localization By Xray	1	CMS Edit
78708	K Flow/Funct Image W/Drug	78445	Vascular Flow Imaging	0	CMS Edit
78708	K Flow/Funct Image W/Drug	78700	Kidney Imaging Morphol	0	CMS Edit
78708	K Flow/Funct Image W/Drug	78701	Kidney Imaging With Flow	0	CMS Edit
78708	K Flow/Funct Image W/Drug	78725	Kidney Function Study	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78708	K Flow/Funct Image W/Drug	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78708	K Flow/Funct Image W/Drug	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78709	K Flow/Funct Image Multiple	76376	3D Render W/Intrp Postproces	1	CMS Edit
78709	K Flow/Funct Image Multiple	76377	3D Render W/Intrp Postproces	1	CMS Edit
78709	K Flow/Funct Image Multiple	76942	Echo Guide For Biopsy	1	CMS Edit
78709	K Flow/Funct Image Multiple	76998	Us Guide Intraop	1	CMS Edit
78709	K Flow/Funct Image Multiple	77001	Fluoroguide For Vein Device	1	CMS Edit
78709	K Flow/Funct Image Multiple	77002	Needle Localization By Xray	1	CMS Edit
78709	K Flow/Funct Image Multiple	78445	Vascular Flow Imaging	0	CMS Edit
78709	K Flow/Funct Image Multiple	78700	Kidney Imaging Morphol	0	CMS Edit
78709	K Flow/Funct Image Multiple	78701	Kidney Imaging With Flow	0	CMS Edit
78709	K Flow/Funct Image Multiple	78707	K Flow/Funct Image W/O Drug	0	CMS Edit
78709	K Flow/Funct Image Multiple	78708	K Flow/Funct Image W/Drug	0	CMS Edit
78709	K Flow/Funct Image Multiple	78725	Kidney Function Study	0	CMS Edit
78709	K Flow/Funct Image Multiple	78803	Rp Loclzj Tum Spect 1 Area	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9536	Tc-99M Depreotide Dx Up To 35 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9542	In-111 Ibritumab TiuxtN Dx To 5 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78709	K Flow/Funct Image Multiple	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78725	Kidney Function Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78725	Kidney Function Study	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78725	Kidney Function Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78725	Kidney Function Study	76942	Echo Guide For Biopsy	1	CMS Edit
78725	Kidney Function Study	76998	Us Guide Intraop	1	CMS Edit
78725	Kidney Function Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78725	Kidney Function Study	77002	Needle Localization By Xray	1	CMS Edit
78725	Kidney Function Study	78445	Vascular Flow Imaging	0	CMS Edit
78725	Kidney Function Study	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78725	Kidney Function Study	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78725	Kidney Function Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78725	Kidney Function Study	A9532	I-125 Serum Alb Dx Per 5 Microcurie	0	CMS Edit
78725	Kidney Function Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78725	Kidney Function Study	A9540	Tc-99M Maa Dx Up To 10 Mci	0	CMS Edit
78725	Kidney Function Study	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78725	Kidney Function Study	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78725	Kidney Function Study	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78730	Urinary Bladder Retention	78445	Vascular Flow Imaging	0	CMS Edit
78740	Ureteral Reflux Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78740	Ureteral Reflux Study	76376	3D Render W/Intrp Postproces	1	CMS Edit
78740	Ureteral Reflux Study	76377	3D Render W/Intrp Postproces	1	CMS Edit
78740	Ureteral Reflux Study	76942	Echo Guide For Biopsy	1	CMS Edit
78740	Ureteral Reflux Study	76998	Us Guide Intraop	1	CMS Edit
78740	Ureteral Reflux Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78740	Ureteral Reflux Study	77002	Needle Localization By Xray	1	CMS Edit
78740	Ureteral Reflux Study	78445	Vascular Flow Imaging	0	CMS Edit
78740	Ureteral Reflux Study	A9501	Tc-99M Teboroxime Dx Per Study Dose	0	CMS Edit
78740	Ureteral Reflux Study	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78740	Ureteral Reflux Study	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78761	Testicular Imaging W/Flow	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78761	Testicular Imaging W/Flow	76376	3D Render W/Intrp Postproces	1	CMS Edit
78761	Testicular Imaging W/Flow	76377	3D Render W/Intrp Postproces	1	CMS Edit
78761	Testicular Imaging W/Flow	76942	Echo Guide For Biopsy	1	CMS Edit
78761	Testicular Imaging W/Flow	76998	Us Guide Intraop	1	CMS Edit
78761	Testicular Imaging W/Flow	77001	Fluoroguide For Vein Device	1	CMS Edit
78761	Testicular Imaging W/Flow	77002	Needle Localization By Xray	1	CMS Edit
78761	Testicular Imaging W/Flow	78445	Vascular Flow Imaging	0	CMS Edit
78761	Testicular Imaging W/Flow	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	76377	3D Render W/Intrp Postproces	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	76942	Echo Guide For Biopsy	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	76998	Us Guide Intraop	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	77001	Fluoroguide For Vein Device	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	77002	Needle Localization By Xray	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	78445	Vascular Flow Imaging	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9551	Tc-99M Succimer Dx Up To 10 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78800	Rp Locljz Tum 1 Area 1 D Img	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78800	Rp Locljz Tum 1 Area 1 D Img	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	76377	3D Render W/Intrp Postproces	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	76942	Echo Guide For Biopsy	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	76998	Us Guide Intraop	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	77001	Fluoroguide For Vein Device	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	77002	Needle Localization By Xray	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	78445	Vascular Flow Imaging	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	78800	Rp Locljz Tum 1 Area 1 D Img	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9548	Indium In-111 Pentetate Dx 0.5 Mci	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78801	Rp Locljz Tum 2+Area 1+D Img	A9570	Indium In-111 Autolg Wbc Dx Dose	1	CMS Edit
78802	Rp Locljz Tum Whbdy 1 D Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78802	Rp Locljz Tum Whbdy 1 D Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
78802	Rp Locljz Tum Whbdy 1 D Img	76377	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78802	Rp Loclzj Tum Whbdy 1 D Img	76942	Echo Guide For Biopsy	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	76998	Us Guide Intraop	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	77001	Fluoroguide For Vein Device	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	77002	Needle Localization By Xray	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	78445	Vascular Flow Imaging	0	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	78800	Rp Loclzj Tum 1 Area 1 D Img	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	78801	Rp Loclzj Tum 2+Area 1+D Img	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9503	Tc-99M Medronate Dx Up To 30 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9510	Tc-99M Disofenin Dx Up To 15 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9512	Tc-99M Pertchnetate Dx Per Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9516	I-123 Sodium Iodide Dx To 999 Uci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9521	Tc-99M Exetazime Dx Up To 25 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9528	I-131 Sodium Iodide Caps Dx Per Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9529	I-131 Sodim Iodide Sol Dx Per Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9531	I-131 Sodim Iodide Dx Up To 100 Uci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9548	Indium In-111 Pentetate Dx 0.5 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9569	Tc-99M Exametazime Autolg Wbc Dx	1	CMS Edit
78802	Rp Loclzj Tum Whbdy 1 D Img	A9571	Indium In-111 Autolg Platelets Dx	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78803	Rp Locljz Tum Spect 1 Area	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76376	3D Render W/Intrp Postproces	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76377	3D Render W/Intrp Postproces	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76380	Cat Scan Follow-Up Study	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76800	Us Exam Spinal Canal	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76942	Echo Guide For Biopsy	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	76998	Us Guide Intraop	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	77001	Fluoroguide For Vein Device	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	77002	Needle Localization By Xray	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78070	Parathyroid Planar Imaging	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78185	Spleen Imaging	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78195	Lymph System Imaging	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78300	Bone Imaging Limited Area	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78305	Bone Imaging Multiple Areas	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78315	Bone Imaging 3 Phase	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78445	Vascular Flow Imaging	0	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78600	Brain Image < 4 Views	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78601	Brain Image W/Flow < 4 Views	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78605	Brain Image 4+ Views	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78606	Brain Image W/Flow 4 + Views	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78700	Kidney Imaging Morphol	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78701	Kidney Imaging With Flow	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78707	K Flow/Funct Image W/O Drug	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78708	K Flow/Funct Image W/Drug	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78725	Kidney Function Study	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78800	Rp Locljz Tum 1 Area 1 D Img	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	78801	Rp Locljz Tum 2+Area 1+D Img	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	A9510	Tc-99M Disofenin Dx Up To 15 Mci	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	A9516	I-123 Sodium Iodide Dx To 999 Uci	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	A9528	I-131 Sodium Iodide Caps Dx Per Mci	1	CMS Edit
78803	Rp Locljz Tum Spect 1 Area	A9529	I-131 Sodim Iodide Sol Dx Per Mci	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78803	Rp Loclzj Tum Spect 1 Area	A9536	Tc-99M Depreotide Dx Up To 35 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9539	Tc-99M Pentetate Dx Up To 25 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9547	In-111 Oxyquinolin Dx 0.5 Millicure	0	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9548	Indium In-111 Pentetate Dx 0.5 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9551	Tc-99M Succimer Dx Up To 10 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	0	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9567	Tc-99M Pentetate Dx Arosi To 75 Mci	0	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9568	Tc-99M Arcitumomab Dx To 45 Mci	0	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9569	Tc-99M Exametazime Autolg Wbc Dx	1	CMS Edit
78803	Rp Loclzj Tum Spect 1 Area	A9571	Indium In-111 Autolg Platelets Dx	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	76376	3D Render W/Intrp Postproces	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	76377	3D Render W/Intrp Postproces	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	76942	Echo Guide For Biopsy	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	76998	Us Guide Intraop	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	77001	Fluoroguide For Vein Device	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	77002	Needle Localization By Xray	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78070	Parathyroid Planar Imaging	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78185	Spleen Imaging	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78195	Lymph System Imaging	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78804	Rp Loclzj Tum Whbdy 2+D Img	78201	Liver Imaging	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78215	Liver And Spleen Imaging	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78445	Vascular Flow Imaging	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78800	Rp Loclzj Tum 1 Area 1 D Img	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78801	Rp Loclzj Tum 2+Area 1+D Img	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78802	Rp Loclzj Tum Whbdy 1 D Img	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78803	Rp Loclzj Tum Spect 1 Area	0	EVC Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9503	Tc-99M Medronate Dx Up To 30 Mci	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9521	Tc-99M Exetazime Dx Up To 25 Mci	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9529	I-131 Sodim Iodide Sol Dx Per Mci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9552	Fdg F-18 Fdg Dx Up To 45 Mci	0	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9571	Indium In-111 Autolg Platelets Dx	1	CMS Edit
78804	Rp Loclzj Tum Whbdy 2+D Img	A9584	Iodine I-123 Ioflupan Dx Up 5 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78808	Iv Inj Ra Drug Dx Study	76942	Echo Guide For Biopsy	1	CMS Edit
78808	Iv Inj Ra Drug Dx Study	76998	Us Guide Intraop	1	CMS Edit
78808	Iv Inj Ra Drug Dx Study	77001	Fluoroguide For Vein Device	1	CMS Edit
78808	Iv Inj Ra Drug Dx Study	77002	Needle Localization By Xray	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78808	Iv Inj Ra Drug Dx Study	78445	Vascular Flow Imaging	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9512	Tc-99M Perchnetate Dx Per Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9521	Tc-99M Exetazime Dx Up To 25 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9538	Tc-99M Pyrophosphate Dx Up To 25 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	0	CMS Edit
78808	Iv Inj Ra Drug Dx Study	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78811	Pet Image Ltd Area	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	70460	Ct Head/Brain W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	71250	Ct Thorax Dx C-	1	CMS Edit
78811	Pet Image Ltd Area	71260	Ct Thorax Dx C+	0	EVC Edit
78811	Pet Image Ltd Area	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78811	Pet Image Ltd Area	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78811	Pet Image Ltd Area	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	72126	Ct Neck Spine W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	72129	Ct Chest Spine W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	72132	Ct Lumbar Spine W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78811	Pet Image Ltd Area	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72192	Ct Pelvis W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	72193	Ct Pelvis W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	74150	Ct Abdomen W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	74150	Ct Abdomen W/O Dye	1	CMS Edit
78811	Pet Image Ltd Area	74160	Ct Abdomen W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78811	Pet Image Ltd Area	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78811	Pet Image Ltd Area	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit
78811	Pet Image Ltd Area	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78811	Pet Image Ltd Area	76376	3D Render W/Intrp Postproces	1	CMS Edit
78811	Pet Image Ltd Area	76377	3D Render W/Intrp Postproces	1	CMS Edit
78811	Pet Image Ltd Area	76380	Cat Scan Follow-Up Study	0	EVC Edit
78811	Pet Image Ltd Area	78445	Vascular Flow Imaging	0	CMS Edit
78811	Pet Image Ltd Area	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78811	Pet Image Ltd Area	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78811	Pet Image Ltd Area	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78811	Pet Image Ltd Area	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78811	Pet Image Ltd Area	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78811	Pet Image Ltd Area	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78811	Pet Image Ltd Area	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	70460	Ct Head/Brain W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78812	Pet Image Skull-Thigh	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	71250	Ct Thorax Dx C-	1	CMS Edit
78812	Pet Image Skull-Thigh	71260	Ct Thorax Dx C+	0	EVC Edit
78812	Pet Image Skull-Thigh	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78812	Pet Image Skull-Thigh	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78812	Pet Image Skull-Thigh	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	72126	Ct Neck Spine W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	72129	Ct Chest Spine W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72192	Ct Pelvis W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	72193	Ct Pelvis W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	74150	Ct Abdomen W/O Dye	1	CMS Edit
78812	Pet Image Skull-Thigh	74160	Ct Abdomen W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78812	Pet Image Skull-Thigh	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78812	Pet Image Skull-Thigh	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78812	Pet Image Skull-Thigh	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78812	Pet Image Skull-Thigh	76376	3D Render W/Intrp Postproces	1	CMS Edit
78812	Pet Image Skull-Thigh	76377	3D Render W/Intrp Postproces	1	CMS Edit
78812	Pet Image Skull-Thigh	76380	Cat Scan Follow-Up Study	0	EVC Edit
78812	Pet Image Skull-Thigh	78445	Vascular Flow Imaging	0	CMS Edit
78812	Pet Image Skull-Thigh	78803	Rp Loclzj Tum Spect 1 Area	1	CMS Edit
78812	Pet Image Skull-Thigh	78811	Pet Image Ltd Area	0	CMS Edit
78812	Pet Image Skull-Thigh	78830	Rp Loclzj Tum Spect W/Ct 1	1	CMS Edit
78812	Pet Image Skull-Thigh	78831	Rp Loclzj Tum Spect 2 Areas	1	CMS Edit
78812	Pet Image Skull-Thigh	78832	Rp Loclzj Tum Spect W/Ct 2	1	CMS Edit
78812	Pet Image Skull-Thigh	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78812	Pet Image Skull-Thigh	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9540	Tc-99M Maa Dx Up To 10 Mci	1	CMS Edit
78812	Pet Image Skull-Thigh	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78812	Pet Image Skull-Thigh	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78812	Pet Image Skull-Thigh	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78813	Pet Image Full Body	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78813	Pet Image Full Body	70460	Ct Head/Brain W/Dye	0	EVC Edit
78813	Pet Image Full Body	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78813	Pet Image Full Body	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
78813	Pet Image Full Body	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78813	Pet Image Full Body	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78813	Pet Image Full Body	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78813	Pet Image Full Body	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78813	Pet Image Full Body	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78813	Pet Image Full Body	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	71250	Ct Thorax Dx C-	1	CMS Edit
78813	Pet Image Full Body	71260	Ct Thorax Dx C+	0	EVC Edit
78813	Pet Image Full Body	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78813	Pet Image Full Body	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78813	Pet Image Full Body	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78813	Pet Image Full Body	72126	Ct Neck Spine W/Dye	0	EVC Edit
78813	Pet Image Full Body	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78813	Pet Image Full Body	72129	Ct Chest Spine W/Dye	0	EVC Edit
78813	Pet Image Full Body	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78813	Pet Image Full Body	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
78813	Pet Image Full Body	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	72192	Ct Pelvis W/O Dye	1	CMS Edit
78813	Pet Image Full Body	72193	Ct Pelvis W/Dye	0	EVC Edit
78813	Pet Image Full Body	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78813	Pet Image Full Body	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78813	Pet Image Full Body	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
78813	Pet Image Full Body	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78813	Pet Image Full Body	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78813	Pet Image Full Body	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78813	Pet Image Full Body	74150	Ct Abdomen W/O Dye	1	CMS Edit
78813	Pet Image Full Body	74160	Ct Abdomen W/Dye	0	EVC Edit
78813	Pet Image Full Body	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78813	Pet Image Full Body	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78813	Pet Image Full Body	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit
78813	Pet Image Full Body	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78813	Pet Image Full Body	76376	3D Render W/Intrp Postproces	1	CMS Edit
78813	Pet Image Full Body	76377	3D Render W/Intrp Postproces	1	CMS Edit
78813	Pet Image Full Body	76380	Cat Scan Follow-Up Study	0	EVC Edit
78813	Pet Image Full Body	78445	Vascular Flow Imaging	0	CMS Edit
78813	Pet Image Full Body	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78813	Pet Image Full Body	78811	Pet Image Ltd Area	0	CMS Edit
78813	Pet Image Full Body	78812	Pet Image Skull-Thigh	0	CMS Edit
78813	Pet Image Full Body	78830	Rp Loclzj Tum Spect W/Ct 1	1	CMS Edit
78813	Pet Image Full Body	78831	Rp Loclzj Tum Spect 2 Areas	1	CMS Edit
78813	Pet Image Full Body	78832	Rp Loclzj Tum Spect W/Ct 2	1	CMS Edit
78813	Pet Image Full Body	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78813	Pet Image Full Body	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78813	Pet Image Full Body	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78813	Pet Image Full Body	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78814	Pet Image W/Ct Lmtd	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	70460	Ct Head/Brain W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	70492	Ct Sft Tsue Nck W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	71250	Ct Thorax Dx C-	1	CMS Edit
78814	Pet Image W/Ct Lmtd	71260	Ct Thorax Dx C+	0	EVC Edit
78814	Pet Image W/Ct Lmtd	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78814	Pet Image W/Ct Lmtd	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78814	Pet Image W/Ct Lmtd	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	72126	Ct Neck Spine W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	72129	Ct Chest Spine W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	72132	Ct Lumbar Spine W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78814	Pet Image W/Ct Lmtd	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72192	Ct Pelvis W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	72193	Ct Pelvis W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	74150	Ct Abdomen W/O Dye	1	CMS Edit
78814	Pet Image W/Ct Lmtd	74160	Ct Abdomen W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78814	Pet Image W/Ct Lmtd	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78814	Pet Image W/Ct Lmtd	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit
78814	Pet Image W/Ct Lmtd	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78814	Pet Image W/Ct Lmtd	76376	3D Render W/Intrp Postproces	1	CMS Edit
78814	Pet Image W/Ct Lmtd	76377	3D Render W/Intrp Postproces	1	CMS Edit
78814	Pet Image W/Ct Lmtd	76380	Cat Scan Follow-Up Study	0	EVC Edit
78814	Pet Image W/Ct Lmtd	78445	Vascular Flow Imaging	0	CMS Edit
78814	Pet Image W/Ct Lmtd	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78814	Pet Image W/Ct Lmtd	78811	Pet Image Ltd Area	0	CMS Edit
78814	Pet Image W/Ct Lmtd	78812	Pet Image Skull-Thigh	0	CMS Edit
78814	Pet Image W/Ct Lmtd	78813	Pet Image Full Body	0	CMS Edit
78814	Pet Image W/Ct Lmtd	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78814	Pet Image W/Ct Lmtd	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78814	Pet Image W/Ct Lmtd	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78814	Pet Image W/Ct Lmtd	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78814	Pet Image W/Ct Lmtd	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78814	Pet Image W/Ct Lmtd	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78814	Pet Image W/Ct Lmtd	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78814	Pet Image W/Ct Lmtd	A9539	Tc-99M Pentetate Dx Up To 25 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78814	Pet Image W/Ct Lmtd	A9540	Tc-99M Maa Dx Up To 10 Mci	1	CMS Edit
78814	Pet Image W/Ct Lmtd	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78814	Pet Image W/Ct Lmtd	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	70460	Ct Head/Brain W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	71250	Ct Thorax Dx C-	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	71260	Ct Thorax Dx C+	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	72126	Ct Neck Spine W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	72129	Ct Chest Spine W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72192	Ct Pelvis W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	72193	Ct Pelvis W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78815	Pet Image W/Ct Skull-Thigh	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	74150	Ct Abdomen W/O Dye	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	74160	Ct Abdomen W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	76376	3D Render W/Intrp Postproces	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	76377	3D Render W/Intrp Postproces	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	76380	Cat Scan Follow-Up Study	0	EVC Edit
78815	Pet Image W/Ct Skull-Thigh	78445	Vascular Flow Imaging	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78811	Pet Image Ltd Area	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78812	Pet Image Skull-Thigh	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78813	Pet Image Full Body	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78814	Pet Image W/Ct Lmtd	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9503	Tc-99M Medronate Dx Up To 30 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9505	Tl-201 Thallous Chlorid Dx Per Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9509	Iodine I-123 Sodim Iodide Dx Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9510	Tc-99M Disofenin Dx Up To 15 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9512	Tc-99M Pertechetate Dx Per Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9516	I-123 Sodium Iodide Dx To 999 Uci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78815	Pet Image W/Ct Skull-Thigh	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9529	I-131 Sodim Iodide Sol Dx Per Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9531	I-131 Sodim Iodide Dx Up To 100 Uci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9538	Tc-99M Pyrophoshate Dx Up To 25 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9539	Tc-99M Pentetate Dx Up To 25 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9540	Tc-99M Maa Dx Up To 10 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9556	Gallium Ga-67 Citrate Dx Per Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9558	Xenon Xe-133 Gas Dx Per 10 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9562	Tc-99M Mertiatide Dx Up To 15 Mci	1	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9567	Tc-99M Pentetate Dx Arosl To 75 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9572	In-111 Pentetreotide Dx To 6 Mci	0	CMS Edit
78815	Pet Image W/Ct Skull-Thigh	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	70450	Ct Head/Brain W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	70460	Ct Head/Brain W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	70470	Ct Head/Brain W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	70480	Ct Orbit/Ear/Fossa W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	70481	Ct Orbit/Ear/Fossa W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	70482	Ct Orbit/Ear/Fossa W/O&W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	70486	Ct Maxillofacial W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	70487	Ct Maxillofacial W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	70488	Ct Maxillofacial W/O & W/Dye	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78816	Pet Image W/Ct Full Body	70490	Ct Soft Tissue Neck W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	70491	Ct Soft Tissue Neck W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	71250	Ct Thorax Dx C-	1	CMS Edit
78816	Pet Image W/Ct Full Body	71260	Ct Thorax Dx C+	0	EVC Edit
78816	Pet Image W/Ct Full Body	71270	Ct Thorax Dx C-/C+	0	EVC Edit
78816	Pet Image W/Ct Full Body	71271	Ct Thorax Lung Cancer Scr C-	1	CMS Edit
78816	Pet Image W/Ct Full Body	72125	Ct Neck Spine W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	72126	Ct Neck Spine W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72127	Ct Neck Spine W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72128	Ct Chest Spine W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	72129	Ct Chest Spine W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72130	Ct Chest Spine W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72131	Ct Lumbar Spine W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	72132	Ct Lumbar Spine W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72133	Ct Lumbar Spine W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72192	Ct Pelvis W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	72193	Ct Pelvis W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	72194	Ct Pelvis W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	73200	Ct Upper Extremity W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	73201	Ct Upper Extremity W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	73202	Ct Uppr Extremity W/O&W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	73700	Ct Lower Extremity W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	73701	Ct Lower Extremity W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	73702	Ct Lwr Extremity W/O&W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	74150	Ct Abdomen W/O Dye	1	CMS Edit
78816	Pet Image W/Ct Full Body	74160	Ct Abdomen W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	74170	Ct Abdomen W/O & W/Dye	0	EVC Edit
78816	Pet Image W/Ct Full Body	74176	Ct Abd & Pelvis W/O Contrast	1	CMS Edit
78816	Pet Image W/Ct Full Body	74177	Ct Abd & Pelv W/Contrast	0	EVC Edit
78816	Pet Image W/Ct Full Body	74178	Ct Abd & Pelv 1/> Regns	0	EVC Edit
78816	Pet Image W/Ct Full Body	76376	3D Render W/Intrp Postproces	1	CMS Edit
78816	Pet Image W/Ct Full Body	76377	3D Render W/Intrp Postproces	1	CMS Edit
78816	Pet Image W/Ct Full Body	76380	Cat Scan Follow-Up Study	0	EVC Edit
78816	Pet Image W/Ct Full Body	78445	Vascular Flow Imaging	0	CMS Edit
78816	Pet Image W/Ct Full Body	78803	Rp Locljz Tum Spect 1 Area	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78816	Pet Image W/Ct Full Body	78811	Pet Image Ltd Area	0	CMS Edit
78816	Pet Image W/Ct Full Body	78812	Pet Image Skull-Thigh	0	CMS Edit
78816	Pet Image W/Ct Full Body	78813	Pet Image Full Body	0	CMS Edit
78816	Pet Image W/Ct Full Body	78814	Pet Image W/Ct Lmtd	0	CMS Edit
78816	Pet Image W/Ct Full Body	78815	Pet Image W/Ct Skull-Thigh	0	CMS Edit
78816	Pet Image W/Ct Full Body	78830	Rp Locljz Tum Spect W/Ct 1	1	CMS Edit
78816	Pet Image W/Ct Full Body	78831	Rp Locljz Tum Spect 2 Areas	1	CMS Edit
78816	Pet Image W/Ct Full Body	78832	Rp Locljz Tum Spect W/Ct 2	1	CMS Edit
78816	Pet Image W/Ct Full Body	A4641	Radiopharmaceutical Diagnostic Noc	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9500	Tc-99M Sestamibi Dx Per Study Dose	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9502	Tc-99M Tetrofosmin Dx - Study Dose	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9503	Tc-99M Medronate Dx Up To 30 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9504	Tc-99M Apcitide Dx Up To 20 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9512	Tc-99M Pertechnetate Dx Per Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9526	Nitro N-13 Ammonia Dx Up To 40 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9528	I-131 Sodium Iodide Caps Dx Per Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9529	I-131 Sodim Iodide Sol Dx Per Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9537	Tc-99M Mebrofenin Dx Up To 15 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9539	Tc-99M Pentetate Dx Up To 25 Mci	1	CMS Edit
78816	Pet Image W/Ct Full Body	A9541	Tc-99M Sulfur Coll Dx Up To 20 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9555	Rubidium Rb-82 Dx Up To 60 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9560	Tc-99M Labeled Rbc Dx Up To 30 Mci	1	CMS Edit
78816	Pet Image W/Ct Full Body	A9561	Tc-99M Oxidronate Dx Up To 30 Mci	0	CMS Edit
78816	Pet Image W/Ct Full Body	A9582	I-123 Iobenguane Dx Dose To 15 Mci	0	CMS Edit
78830	Rp Locljz Tum Spect W/Ct 1	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78830	Rp Locljz Tum Spect W/Ct 1	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78830	Rp Locljz Tum Spect W/Ct 1	76376	3D Render W/Intrp Postproces	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78830	Rp Loclzj Tum Spect W/Ct 1	76377	3D Render W/Intrp Postproces	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	76380	Cat Scan Follow-Up Study	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	76942	Echo Guide For Biopsy	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	76998	Us Guide Intraop	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	77001	Fluoroguide For Vein Device	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	77002	Needle Localization By Xray	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78185	Spleen Imaging	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78195	Lymph System Imaging	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78201	Liver Imaging	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78215	Liver And Spleen Imaging	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78445	Vascular Flow Imaging	0	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78800	Rp Loclzj Tum 1 Area 1 D lmg	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78801	Rp Loclzj Tum 2+Area 1+D lmg	1	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78803	Rp Loclzj Tum Spect 1 Area	0	CMS Edit
78830	Rp Loclzj Tum Spect W/Ct 1	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76376	3D Render W/Intrp Postproces	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76377	3D Render W/Intrp Postproces	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76380	Cat Scan Follow-Up Study	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76942	Echo Guide For Biopsy	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	76998	Us Guide Intraop	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	77001	Fluoroguide For Vein Device	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	77002	Needle Localization By Xray	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78185	Spleen Imaging	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78195	Lymph System Imaging	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78201	Liver Imaging	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78215	Liver And Spleen Imaging	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78445	Vascular Flow Imaging	0	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78800	Rp Loclzj Tum 1 Area 1 D lmg	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78801	Rp Loclzj Tum 2+Area 1+D lmg	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78803	Rp Loclzj Tum Spect 1 Area	0	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78831	Rp Loclzj Tum Spect 2 Areas	78830	Rp Loclzj Tum Spect W/Ct 1	0	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	75571	Ct Hrt W/O Dye W/Ca Test	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
78832	Rp Loclzj Tum Spect W/Ct 2	76376	3D Render W/Intrp Postproces	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	76377	3D Render W/Intrp Postproces	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	76380	Cat Scan Follow-Up Study	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	76942	Echo Guide For Biopsy	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	76998	Us Guide Intraop	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	77001	Fluoroguide For Vein Device	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	77002	Needle Localization By Xray	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78185	Spleen Imaging	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78195	Lymph System Imaging	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78201	Liver Imaging	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78215	Liver And Spleen Imaging	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78445	Vascular Flow Imaging	0	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78800	Rp Loclzj Tum 1 Area 1 D Img	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78801	Rp Loclzj Tum 2+Area 1+D Img	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78803	Rp Loclzj Tum Spect 1 Area	0	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78808	Iv Inj Ra Drug Dx Study	1	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78830	Rp Loclzj Tum Spect W/Ct 1	0	CMS Edit
78832	Rp Loclzj Tum Spect W/Ct 2	78831	Rp Loclzj Tum Spect 2 Areas	0	CMS Edit
93303	Echo Transthoracic	76998	Us Guide Intraop	1	CMS Edit
93303	Echo Transthoracic	93304	Echo Transthoracic	1	CMS Edit
93303	Echo Transthoracic	93307	Tte W/O Doppler Complete	0	CMS Edit
93303	Echo Transthoracic	93308	Tte F-Up Or Lmtd	0	CMS Edit
93303	Echo Transthoracic	C8922	Tte Cong Cardiac Anomal; Limited	1	CMS Edit
93303	Echo Transthoracic	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	0	CMS Edit
93304	Echo Transthoracic	76998	Us Guide Intraop	1	CMS Edit
93304	Echo Transthoracic	93308	Tte F-Up Or Lmtd	1	CMS Edit
93304	Echo Transthoracic	93350	Stress Tte Only	1	CMS Edit
93306	Tte W/Doppler Complete	76604	Us Exam Chest	1	CMS Edit
93306	Tte W/Doppler Complete	76998	Us Guide Intraop	1	CMS Edit
93306	Tte W/Doppler Complete	93303	Echo Transthoracic	0	CMS Edit
93306	Tte W/Doppler Complete	93304	Echo Transthoracic	1	CMS Edit
93306	Tte W/Doppler Complete	93307	Tte W/O Doppler Complete	0	CMS Edit
93306	Tte W/Doppler Complete	93308	Tte F-Up Or Lmtd	1	CMS Edit
93306	Tte W/Doppler Complete	93320	Doppler Echo Exam Heart	0	CMS Edit
93306	Tte W/Doppler Complete	93321	Doppler Echo Exam Heart	1	CMS Edit
93306	Tte W/Doppler Complete	93325	Doppler Color Flow Add-On	1	CMS Edit
93306	Tte W/Doppler Complete	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93306	Tte W/Doppler Complete	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	0	CMS Edit
93307	Tte W/O Doppler Complete	76604	Us Exam Chest	1	CMS Edit
93307	Tte W/O Doppler Complete	76998	Us Guide Intraop	1	CMS Edit
93307	Tte W/O Doppler Complete	93304	Echo Transthoracic	1	CMS Edit
93307	Tte W/O Doppler Complete	93308	Tte F-Up Or Lmtd	1	CMS Edit
93307	Tte W/O Doppler Complete	93320	Doppler Echo Exam Heart	0	CMS Edit
93307	Tte W/O Doppler Complete	93321	Doppler Echo Exam Heart	0	CMS Edit
93307	Tte W/O Doppler Complete	93325	Doppler Color Flow Add-On	0	CMS Edit
93307	Tte W/O Doppler Complete	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	1	CMS Edit
93308	Tte F-Up Or Lmtd	76998	Us Guide Intraop	1	CMS Edit
93308	Tte F-Up Or Lmtd	93320	Doppler Echo Exam Heart	1	CMS Edit
93312	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93312	Echo Transesophageal	93313	Echo Transesophageal	0	CMS Edit
93312	Echo Transesophageal	93314	Echo Transesophageal	0	CMS Edit
93312	Echo Transesophageal	93315	Echo Transesophageal	1	CMS Edit
93312	Echo Transesophageal	93351	Stress Tte Complete	1	CMS Edit
93312	Echo Transesophageal	C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	1	CMS Edit
93313	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93313	Echo Transesophageal	93316	Echo Transesophageal	1	CMS Edit
93314	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93314	Echo Transesophageal	93313	Echo Transesophageal	0	CMS Edit
93314	Echo Transesophageal	93317	Echo Transesophageal	1	CMS Edit
93315	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93315	Echo Transesophageal	93316	Echo Transesophageal	0	CMS Edit
93315	Echo Transesophageal	93317	Echo Transesophageal	1	CMS Edit
93316	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93317	Echo Transesophageal	76998	Us Guide Intraop	1	CMS Edit
93318	Echo Transesophageal Intraop	76998	Us Guide Intraop	1	CMS Edit
93318	Echo Transesophageal Intraop	93303	Echo Transthoracic	0	CMS Edit
93318	Echo Transesophageal Intraop	93304	Echo Transthoracic	0	CMS Edit
93318	Echo Transesophageal Intraop	93306	Tte W/Doppler Complete	0	CMS Edit
93318	Echo Transesophageal Intraop	93307	Tte W/O Doppler Complete	0	CMS Edit
93318	Echo Transesophageal Intraop	93308	Tte F-Up Or Lmtd	0	CMS Edit
93318	Echo Transesophageal Intraop	93312	Echo Transesophageal	0	CMS Edit
93318	Echo Transesophageal Intraop	93313	Echo Transesophageal	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93318	Echo Transesophageal Intraop	93314	Echo Transesophageal	0	CMS Edit
93318	Echo Transesophageal Intraop	93315	Echo Transesophageal	0	CMS Edit
93318	Echo Transesophageal Intraop	93316	Echo Transesophageal	0	CMS Edit
93318	Echo Transesophageal Intraop	93317	Echo Transesophageal	0	CMS Edit
93318	Echo Transesophageal Intraop	93320	Doppler Echo Exam Heart	0	CMS Edit
93318	Echo Transesophageal Intraop	93321	Doppler Echo Exam Heart	0	CMS Edit
93318	Echo Transesophageal Intraop	93325	Doppler Color Flow Add-On	0	CMS Edit
93318	Echo Transesophageal Intraop	C8921	Tte Cong Cardiac Anomal; Complete	0	CMS Edit
93318	Echo Transesophageal Intraop	C8922	Tte Cong Cardiac Anomal; Limited	0	CMS Edit
93318	Echo Transesophageal Intraop	C8923	Tte R-T Doc 2D Incl M- Mode Rec Cmpl	0	CMS Edit
93318	Echo Transesophageal Intraop	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	0	CMS Edit
93318	Echo Transesophageal Intraop	C8925	Tee Real Time 2D; Probe Plcmt I&R	0	CMS Edit
93318	Echo Transesophageal Intraop	C8926	Tee Cong Cardiac Anomal; Probe I&R	0	CMS Edit
93318	Echo Transesophageal Intraop	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	0	CMS Edit
93319	3D Echo Img Cgen Car Anomal	93325	Doppler Color Flow Add-On	0	CMS Edit
93320	Doppler Echo Exam Heart	76998	Us Guide Intraop	1	CMS Edit
93321	Doppler Echo Exam Heart	76998	Us Guide Intraop	1	CMS Edit
93325	Doppler Color Flow Add-On	76998	Us Guide Intraop	1	CMS Edit
93325	Doppler Color Flow Add-On	93319	3D Echo Img Cgen Car Anomal	0	CMS Edit
93350	Stress Tte Only	76998	Us Guide Intraop	1	CMS Edit
93350	Stress Tte Only	93303	Echo Transthoracic	1	CMS Edit
93350	Stress Tte Only	93304	Echo Transthoracic	0	EVC Edit
93350	Stress Tte Only	93306	Tte W/Doppler Complete	1	CMS Edit
93350	Stress Tte Only	93307	Tte W/O Doppler Complete	1	CMS Edit
93350	Stress Tte Only	93308	Tte F-Up Or Lmtd	1	CMS Edit
93350	Stress Tte Only	93312	Echo Transesophageal	1	CMS Edit
93350	Stress Tte Only	93313	Echo Transesophageal	1	CMS Edit
93350	Stress Tte Only	93314	Echo Transesophageal	1	CMS Edit
93350	Stress Tte Only	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	1	CMS Edit
93351	Stress Tte Complete	76998	Us Guide Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93351	Stress Tte Complete	93303	Echo Transthoracic	1	CMS Edit
93351	Stress Tte Complete	93304	Echo Transthoracic	1	CMS Edit
93351	Stress Tte Complete	93306	Tte W/Doppler Complete	1	CMS Edit
93351	Stress Tte Complete	93307	Tte W/O Doppler Complete	1	CMS Edit
93351	Stress Tte Complete	93308	Tte F-Up Or Lmtd	1	CMS Edit
93351	Stress Tte Complete	93313	Echo Transesophageal	1	CMS Edit
93351	Stress Tte Complete	93314	Echo Transesophageal	1	CMS Edit
93351	Stress Tte Complete	93350	Stress Tte Only	0	CMS Edit
93451	Right Hrt Cath	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93451	Right Hrt Cath	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93451	Right Hrt Cath	75741	Artery X-Rays Lung	0	CMS Edit
93451	Right Hrt Cath	75743	Artery X-Rays Lungs	0	CMS Edit
93451	Right Hrt Cath	75746	Artery X-Rays Lung	0	CMS Edit
93451	Right Hrt Cath	75756	Artery X-Rays Chest	0	CMS Edit
93451	Right Hrt Cath	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93451	Right Hrt Cath	78635	Csf Ventriculography	0	CMS Edit
93451	Right Hrt Cath	93318	Echo Transesophageal Intraop	1	CMS Edit
93451	Right Hrt Cath	93462	L Hrt Cath Trnsptl Puncture	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75741	Artery X-Rays Lung	0	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75743	Artery X-Rays Lungs	0	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75746	Artery X-Rays Lung	0	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75756	Artery X-Rays Chest	0	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75774	Artery X-Ray Each Vessel	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	75893	Venous Sampling By Catheter	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	78635	Csf Ventriculography	0	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	93318	Echo Transesophageal Intraop	1	CMS Edit
93452	Left Hrt Cath W/Ventrclgrphy	93451	Right Heart Cath	1	CMS Edit
93453	R&L Hrt Cath W/Ventrclgrphy	75600	Contrast Exam Thoracic Aorta	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93453	R&L Hrt Cath W/Ventriclgrphy	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75741	Artery X-Rays Lung	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75743	Artery X-Rays Lungs	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75746	Artery X-Rays Lung	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75756	Artery X-Rays Chest	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75774	Artery X-Ray Each Vessel	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	75893	Venous Sampling By Catheter	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	78635	Csf Ventriculography	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93318	Echo Transesophageal Intraop	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93451	Right Heart Cath	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93452	Left Hrt Cath W/Ventriclgrphy	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93454	Coronary Artery Angio S&I	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93455	Coronary Art/Grft Angio S&I	0	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93456	R Hrt Coronary Artery Angio	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93453	R&L Hrt Cath W/Ventriclgrphy	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93454	Coronary Artery Angio S&I	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93454	Coronary Artery Angio S&I	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93454	Coronary Artery Angio S&I	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93454	Coronary Artery Angio S&I	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93454	Coronary Artery Angio S&I	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93454	Coronary Artery Angio S&I	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93454	Coronary Artery Angio S&I	75741	Artery X-Rays Lung	0	CMS Edit
93454	Coronary Artery Angio S&I	75743	Artery X-Rays Lungs	0	CMS Edit
93454	Coronary Artery Angio S&I	75746	Artery X-Rays Lung	0	CMS Edit
93454	Coronary Artery Angio S&I	75756	Artery X-Rays Chest	0	CMS Edit
93454	Coronary Artery Angio S&I	75774	Artery X-Ray Each Vessel	1	CMS Edit
93454	Coronary Artery Angio S&I	75893	Venous Sampling By Catheter	1	CMS Edit
93454	Coronary Artery Angio S&I	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93454	Coronary Artery Angio S&I	93318	Echo Transesophageal Intraop	1	CMS Edit
93454	Coronary Artery Angio S&I	93451	Right Heart Cath	0	CMS Edit
93454	Coronary Artery Angio S&I	93452	Left Hrt Cath W/Ventrclgrphy	0	CMS Edit
93454	Coronary Artery Angio S&I	93462	L Hrt Cath Trnsptl Puncture	1	CMS Edit
93454	Coronary Artery Angio S&I	93463	Drug Admin & Hemodynamic Meas	1	CMS Edit
93454	Coronary Artery Angio S&I	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75741	Artery X-Rays Lung	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	75743	Artery X-Rays Lungs	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	75746	Artery X-Rays Lung	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	75756	Artery X-Rays Chest	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	75774	Artery X-Ray Each Vessel	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	75893	Venous Sampling By Catheter	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	93318	Echo Transesophageal Intraop	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	93451	Right Heart Cath	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	93452	Left Hrt Cath W/Ventrclgrphy	0	CMS Edit
93455	Coronary Art/Grft Angio S&I	93454	Coronary Artery Angio S&I	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	93462	L Hrt Cath Trnsptl Puncture	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	93463	Drug Admin & Hemodynamic Meas	1	CMS Edit
93455	Coronary Art/Grft Angio S&I	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	0	CMS Edit
93456	R Hrt Coronary Artery Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93456	R Hrt Coronary Artery Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75741	Artery X-Rays Lung	0	CMS Edit
93456	R Hrt Coronary Artery Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93456	R Hrt Coronary Artery Angio	75746	Artery X-Rays Lung	0	CMS Edit
93456	R Hrt Coronary Artery Angio	75756	Artery X-Rays Chest	0	CMS Edit
93456	R Hrt Coronary Artery Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93456	R Hrt Coronary Artery Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93456	R Hrt Coronary Artery Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93456	R Hrt Coronary Artery Angio	78635	Csf Ventriculography	0	CMS Edit
93456	R Hrt Coronary Artery Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93451	Right Heart Cath	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93452	Left Hrt Cath W/Ventrlcgrphy	0	CMS Edit
93456	R Hrt Coronary Artery Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93462	L Hrt Cath Trnsptl Puncture	1	CMS Edit
93456	R Hrt Coronary Artery Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	0	CMS Edit
93457	R Hrt Art/Grft Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93457	R Hrt Art/Grft Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93457	R Hrt Art/Grft Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93457	R Hrt Art/Grft Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93457	R Hrt Art/Grft Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93457	R Hrt Art/Grft Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93457	R Hrt Art/Grft Angio	75741	Artery X-Rays Lung	0	CMS Edit
93457	R Hrt Art/Grft Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93457	R Hrt Art/Grft Angio	75746	Artery X-Rays Lung	0	CMS Edit
93457	R Hrt Art/Grft Angio	75756	Artery X-Rays Chest	0	CMS Edit
93457	R Hrt Art/Grft Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93457	R Hrt Art/Grft Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93457	R Hrt Art/Grft Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93457	R Hrt Art/Grft Angio	78635	Csf Ventriculography	0	CMS Edit
93457	R Hrt Art/Grft Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93457	R Hrt Art/Grft Angio	93451	Right Heart Cath	1	CMS Edit
93457	R Hrt Art/Grft Angio	93452	Left Hrt Cath W/Ventrlcgrphy	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93457	R Hrt Art/Grft Angio	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
93457	R Hrt Art/Grft Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93457	R Hrt Art/Grft Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93457	R Hrt Art/Grft Angio	93456	R Hrt Coronary Artery Angio	1	CMS Edit
93457	R Hrt Art/Grft Angio	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93457	R Hrt Art/Grft Angio	93459	L Hrt Art/Grft Angio	1	CMS Edit
93457	R Hrt Art/Grft Angio	93462	L Hrt Cath Trnsptl Puncture	1	CMS Edit
93457	R Hrt Art/Grft Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75741	Artery X-Rays Lung	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75746	Artery X-Rays Lung	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75756	Artery X-Rays Chest	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	78635	Csf Ventriculography	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93451	Right Heart Cath	0	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93452	Left Hrt Cath W/Ventriclgrphy	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93458	L Hrt Artery/Ventricle Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93459	L Hrt Art/Grft Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93459	L Hrt Art/Grft Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93459	L Hrt Art/Grft Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93459	L Hrt Art/Grft Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93459	L Hrt Art/Grft Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93459	L Hrt Art/Grft Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93459	L Hrt Art/Grft Angio	75741	Artery X-Rays Lung	0	CMS Edit
93459	L Hrt Art/Grft Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93459	L Hrt Art/Grft Angio	75746	Artery X-Rays Lung	0	CMS Edit
93459	L Hrt Art/Grft Angio	75756	Artery X-Rays Chest	0	CMS Edit
93459	L Hrt Art/Grft Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93459	L Hrt Art/Grft Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93459	L Hrt Art/Grft Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93459	L Hrt Art/Grft Angio	78635	Csf Ventriculography	0	CMS Edit
93459	L Hrt Art/Grft Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93459	L Hrt Art/Grft Angio	93451	Right Heart Cath	0	CMS Edit
93459	L Hrt Art/Grft Angio	93452	Left Hrt Cath W/Ventrlgrphy	1	CMS Edit
93459	L Hrt Art/Grft Angio	93453	R&L Hrt Cath W/Ventrlgrphy	1	CMS Edit
93459	L Hrt Art/Grft Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93459	L Hrt Art/Grft Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93459	L Hrt Art/Grft Angio	93456	R Hrt Coronary Artery Angio	1	CMS Edit
93459	L Hrt Art/Grft Angio	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93459	L Hrt Art/Grft Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75741	Artery X-Rays Lung	0	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75746	Artery X-Rays Lung	0	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75756	Artery X-Rays Chest	0	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	78635	Csf Ventriculography	0	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93451	Right Heart Cath	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93452	Left Hrt Cath W/Ventrlgrphy	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93460	R&L Hrt Art/Ventricle Angio	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93456	R Hrt Coronary Artery Angio	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93457	R Hrt Art/Grft Angio	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93459	L Hrt Art/Grft Angio	1	CMS Edit
93460	R&L Hrt Art/Ventricle Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75741	Artery X-Rays Lung	0	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75743	Artery X-Rays Lungs	0	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75746	Artery X-Rays Lung	0	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75756	Artery X-Rays Chest	0	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75774	Artery X-Ray Each Vessel	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	75893	Venous Sampling By Catheter	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	78635	Csf Ventriculography	0	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93318	Echo Transesophageal Intraop	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93451	Right Heart Cath	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93452	Left Hrt Cath W/Ventriclgrphy	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93454	Coronary Artery Angio S&I	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93455	Coronary Art/Grft Angio S&I	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93456	R Hrt Coronary Artery Angio	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93457	R Hrt Art/Grft Angio	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93459	L Hrt Art/Grft Angio	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
93461	R&L Hrt Art/Ventricle Angio	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75600	Contrast Exam Thoracic Aorta	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93593	R Hrt Cath Chd Nml Nt Cnj	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75741	Artery X-Rays Lung	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75743	Artery X-Rays Lungs	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75746	Artery X-Rays Lung	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75756	Artery X-Rays Chest	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	75893	Venous Sampling By Catheter	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	76937	Us Guide Vascular Access	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	78635	Csf Ventriculography	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93318	Echo Transesophageal Intraop	1	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93451	Right Heart Cath	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93452	Left Hrt Cath W/Ventrcigrphy	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93453	R&L Hrt Cath W/Ventriclgrphy	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93454	Coronary Artery Angio S&I	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93455	Coronary Art/Grft Angio S&I	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93456	R Hrt Coronary Artery Angio	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93457	R Hrt Art/Grft Angio	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93458	L Hrt Artery/Ventricle Angio	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93459	L Hrt Art/Grft Angio	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93460	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93593	R Hrt Cath Chd Nml Nt Cnj	93461	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75741	Artery X-Rays Lung	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75743	Artery X-Rays Lungs	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75746	Artery X-Rays Lung	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75756	Artery X-Rays Chest	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	75893	Venous Sampling By Catheter	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	76937	Us Guide Vascular Access	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	78635	Csf Ventriculography	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93318	Echo Transesophageal Intraop	1	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93451	Right Heart Cath	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93452	Left Hrt Cath W/Ventrcigrphy	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93594	R Hrt Cath Chd Abnl Nt Cnj	93453	R&L Hrt Cath W/Ventriclgrphy	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93454	Coronary Artery Angio S&I	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93455	Coronary Art/Grft Angio S&I	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93456	R Hrt Coronary Artery Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93457	R Hrt Art/Grft Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93458	L Hrt Artery/Ventricle Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93459	L Hrt Art/Grft Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93460	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93594	R Hrt Cath Chd Abnl Nt Cnj	93461	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75741	Artery X-Rays Lung	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75743	Artery X-Rays Lungs	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75746	Artery X-Rays Lung	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75756	Artery X-Rays Chest	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75774	Artery X-Ray Each Vessel	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	75893	Venous Sampling By Catheter	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	76937	Us Guide Vascular Access	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	78635	Csf Ventriculography	0	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	93318	Echo Transesophageal Intraop	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	93451	Right Heart Cath	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	93452	Left Hrt Cath W/Ventrclgrphy	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93595	L Hrt Cath Chd Nm/Abn Nt Cnj	93594	R Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75625	Contrast Exam Abdominl Aorta	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75741	Artery X-Rays Lung	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75743	Artery X-Rays Lungs	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75746	Artery X-Rays Lung	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75756	Artery X-Rays Chest	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75774	Artery X-Ray Each Vessel	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	75893	Venous Sampling By Catheter	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	76937	Us Guide Vascular Access	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	78635	Csf Ventriculography	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93318	Echo Transesophageal Intraop	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93451	Right Heart Cath	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93452	Left Hrt Cath W/Ventrlcgrphy	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93454	Coronary Artery Angio S&I	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93455	Coronary Art/Grft Angio S&I	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93456	R Hrt Coronary Artery Angio	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93457	R Hrt Art/Grft Angio	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93459	L Hrt Art/Grft Angio	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93460	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93461	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93594	R Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93596	R&L Hrt Cath Chd Nml Nt Cnj	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75600	Contrast Exam Thoracic Aorta	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75605	Contrast Exam Thoracic Aorta	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75625	Contrast Exam Abdominl Aorta	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75630	X-Ray Aorta Leg Arteries	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75710	Artery X-Rays Arm/Leg	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75716	Artery X-Rays Arms/Legs	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75741	Artery X-Rays Lung	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75743	Artery X-Rays Lungs	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75746	Artery X-Rays Lung	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75756	Artery X-Rays Chest	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75774	Artery X-Ray Each Vessel	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	75893	Venous Sampling By Catheter	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	76937	Us Guide Vascular Access	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	78635	Csf Ventriculography	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93318	Echo Transesophageal Intraop	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93451	Right Heart Cath	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93452	Left Hrt Cath W/Ventrlclgrphy	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93453	R&L Hrt Cath W/Ventriclgrphy	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93454	Coronary Artery Angio S&I	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93455	Coronary Art/Grft Angio S&I	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93456	R Hrt Coronary Artery Angio	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93457	R Hrt Art/Grft Angio	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93459	L Hrt Art/Grft Angio	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93460	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93461	R&L Hrt Art/Ventricle Angio	0	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93594	R Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93597	R&L Hrt Cath Chd Abnl Nt Cnj	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93653	Compre Ep Eval Tx Svt	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93653	Compre Ep Eval Tx Svt	93594	R Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93653	Compre Ep Eval Tx Svt	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
93653	Compre Ep Eval Tx Svt	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93653	Compre Ep Eval Tx Svt	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93654	Compre Ep Eval Tx Vt	93593	R Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93654	Compre Ep Eval Tx Vt	93594	R Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93654	Compre Ep Eval Tx Vt	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93654	Compre Ep Eval Tx Vt	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
93654	Compre Ep Eval Tx Vt	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
93880	Extracranial Bilat Study	76536	Us Exam Of Head And Neck	0	EVC Edit
93880	Extracranial Bilat Study	76536	Us Exam Of Head And Neck	0	EVC Edit
93880	Extracranial Bilat Study	76998	Us Guide Intraop	1	CMS Edit
93880	Extracranial Bilat Study	93882	Extracranial Uni/Ltd Study	0	CMS Edit
93882	Extracranial Uni/Ltd Study	76536	Us Exam Of Head And Neck	0	EVC Edit
93882	Extracranial Uni/Ltd Study	76998	Us Guide Intraop	1	CMS Edit
93886	Intracranial Complete Study	76998	Us Guide Intraop	1	CMS Edit
93888	Intracranial Limited Study	76998	Us Guide Intraop	1	CMS Edit
93890	Tcd Vasoreactivity Study	93888	Intracranial Limited Study	1	CMS Edit
93892	Tcd Emboli Detect W/O Inj	93888	Intracranial Limited Study	1	CMS Edit
93893	Tcd Emboli Detect W/Inj	93888	Intracranial Limited Study	1	CMS Edit
93893	Tcd Emboli Detect W/Inj	93892	Tcd Emboli Detect W/O Inj	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	76376	3D Render W/Intrp Postproces	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	76377	3D Render W/Intrp Postproces	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	76998	Us Guide Intraop	1	CMS Edit
93922	Upr/L Xtremity Art 2 Levels	93990	Doppler Flow Testing	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	76376	3D Render W/Intrp Postproces	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	76377	3D Render W/Intrp Postproces	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	76998	Us Guide Intraop	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	93922	Upr/L Xtremity Art 2 Levels	1	CMS Edit
93923	Upr/Lxtr Art Stdy 3+ Lvls	93990	Doppler Flow Testing	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	76376	3D Render W/Intrp Postproces	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	76377	3D Render W/Intrp Postproces	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	76882	Us Lmtd Jt/Fcl Evi Nvasc Xtr	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	93922	Upr/L Xtremity Art 2 Levels	1	CMS Edit
93924	Lwr Xtr Vasc Stdy Bilat	93923	Upr/Lxtr Art Stdy 3+ Lvls	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93925	Lower Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93925	Lower Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93925	Lower Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93925	Lower Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93925	Lower Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93925	Lower Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93925	Lower Extremity Study	93926	Lower Extremity Study	1	CMS Edit
93925	Lower Extremity Study	93926	Lower Extremity Study	1	CMS Edit
93925	Lower Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93925	Lower Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93926	Lower Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93926	Lower Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93926	Lower Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93926	Lower Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93926	Lower Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93926	Lower Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93930	Upper Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93930	Upper Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93930	Upper Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93930	Upper Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93930	Upper Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93930	Upper Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93930	Upper Extremity Study	93931	Upper Extremity Study	1	CMS Edit
93930	Upper Extremity Study	93931	Upper Extremity Study	1	CMS Edit
93930	Upper Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93930	Upper Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93931	Upper Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93931	Upper Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93931	Upper Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93931	Upper Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93931	Upper Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93931	Upper Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93970	Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93970	Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93970	Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93970	Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93970	Extremity Study	76937	Us Guide Vascular Access	1	CMS Edit
93970	Extremity Study	76937	Us Guide Vascular Access	1	CMS Edit
93970	Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93970	Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93970	Extremity Study	93971	Extremity Study	1	CMS Edit
93970	Extremity Study	93971	Extremity Study	1	CMS Edit
93970	Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93970	Extremity Study	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
93971	Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93971	Extremity Study	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93971	Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93971	Extremity Study	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93971	Extremity Study	76937	Us Guide Vascular Access	1	CMS Edit
93971	Extremity Study	76937	Us Guide Vascular Access	1	CMS Edit
93971	Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93971	Extremity Study	76998	Us Guide Intraop	1	CMS Edit
93975	Vascular Study	76700	Us Exam Abdom Complete	1	CMS Edit
93975	Vascular Study	76705	Echo Exam Of Abdomen	1	CMS Edit
93975	Vascular Study	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
93975	Vascular Study	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
93975	Vascular Study	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
93975	Vascular Study	76776	Us Exam K Transpl W/Doppler	0	CMS Edit
93975	Vascular Study	76856	Us Exam Pelvic Complete	1	CMS Edit
93975	Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93975	Vascular Study	93976	Vascular Study	1	CMS Edit
93975	Vascular Study	93978	Vascular Study	0	CMS Edit
93975	Vascular Study	93979	Vascular Study	0	CMS Edit
93976	Vascular Study	76700	Us Exam Abdom Complete	1	CMS Edit
93976	Vascular Study	76705	Echo Exam Of Abdomen	1	CMS Edit
93976	Vascular Study	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
93976	Vascular Study	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
93976	Vascular Study	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
93976	Vascular Study	76776	Us Exam K Transpl W/Doppler	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93976	Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93976	Vascular Study	93978	Vascular Study	0	CMS Edit
93976	Vascular Study	93979	Vascular Study	1	CMS Edit
93978	Vascular Study	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
93978	Vascular Study	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
93978	Vascular Study	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
93978	Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93978	Vascular Study	93979	Vascular Study	1	CMS Edit
93979	Vascular Study	76706	Us Abdl Aorta Screen Aaa	1	CMS Edit
93979	Vascular Study	76770	Us Exam Abdo Back Wall Comp	1	CMS Edit
93979	Vascular Study	76775	Us Exam Abdo Back Wall Lim	1	CMS Edit
93979	Vascular Study	76856	Us Exam Pelvic Complete	1	CMS Edit
93979	Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93980	Penile Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93980	Penile Vascular Study	93981	Penile Vascular Study	1	CMS Edit
93981	Penile Vascular Study	76856	Us Exam Pelvic Complete	1	CMS Edit
93981	Penile Vascular Study	76998	Us Guide Intraop	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76937	Us Guide Vascular Access	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76937	Us Guide Vascular Access	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76998	Us Guide Intraop	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	76998	Us Guide Intraop	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93922	Upr/L Xtremity Art 2 Levels	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93923	Upr/Lxtr Art Stdy 3+ Lvls	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93924	Lwr Xtr Vasc Stdy Bilat	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93925	Lower Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93925	Lower Extremity Study	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93985	Dup-Scan Hemo Compl Bi Std	93926	Lower Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93926	Lower Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93930	Upper Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93930	Upper Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93931	Upper Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93931	Upper Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93970	Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93970	Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93971	Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93971	Extremity Study	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93986	Dup-Scan Hemo Compl Uni Std	0	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93986	Dup-Scan Hemo Compl Uni Std	0	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93990	Doppler Flow Testing	1	CMS Edit
93985	Dup-Scan Hemo Compl Bi Std	93990	Doppler Flow Testing	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76881	Us Compl Joint R-T W/Img	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76882	Us Lmtd Jt/Fcl Evl Nvasc Xtr	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76937	Us Guide Vascular Access	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76937	Us Guide Vascular Access	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76998	Us Guide Intraop	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	76998	Us Guide Intraop	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93922	Upr/L Xtremity Art 2 Levels	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93923	Upr/Lxtr Art Stdy 3+ Lvls	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
93986	Dup-Scan Hemo Compl Uni Std	93924	Lwr Xtr Vasc Stdy Bilat	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93926	Lower Extremity Study	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93926	Lower Extremity Study	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93931	Upper Extremity Study	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93931	Upper Extremity Study	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93971	Extremity Study	1	CMS Edit
93986	Dup-Scan Hemo Compl Uni Std	93971	Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	76998	Us Guide Intraop	1	CMS Edit
93990	Doppler Flow Testing	93925	Lower Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93926	Lower Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93930	Upper Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93931	Upper Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93970	Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93971	Extremity Study	1	CMS Edit
93990	Doppler Flow Testing	93986	Dup-Scan Hemo Compl Uni Std	1	CMS Edit
0042T	Ct Perfusion W/Contrast Cbf	70460	Ct Head/Brain W/Dye	1	CMS Edit
0042T	Ct Perfusion W/Contrast Cbf	70470	Ct Head/Brain W/O & W/Dye	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33206	Insert Heart Pm Atrial	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33207	Insert Heart Pm Ventricular	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33208	Insrt Heart Pm Atrial & Vent	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33214	Upgrade Of Pacemaker System	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33224	Insert Pacing Lead & Connect	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33225	L Ventric Pacing Lead Add-On	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33227	Remove&Replace Pm Gen Singl	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33228	Remv&Replc Pm Gen Dual Lead	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33229	Remv&Replc Pm Gen Mult Leads	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33230	Insrt Pulse Gen W/Dual Leads	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0515T	Insj Wcs Lv Compl Sys	33231	Insrt Pulse Gen W/Mult Leads	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33240	Insrt Pulse Gen W/Singl Lead	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33249	Insj/Rplcmt Defib W/Lead(S)	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33262	Rmvl& Replc Pulse Gen 1 Lead	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33263	Rmvl & Rplcmt Dfb Gen 2 Lead	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33270	Ins/Rep Subq Defibrillator	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33274	Tcat Insj/Rpl Perm Ldls Pm	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	33275	Tcat Rmvl Perm Ldls Pm W/Img	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	76380	Cat Scan Follow-Up Study	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	76937	Us Guide Vascular Access	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	76942	Echo Guide For Biopsy	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	76998	Us Guide Intraop	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	77012	Ct Scan For Needle Biopsy	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93303	Echo Transthoracic	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93304	Echo Transthoracic	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93306	Tte W/Doppler Complete	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93307	Tte W/O Doppler Complete	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93308	Tte F-Up Or Lmtd	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93312	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93313	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93314	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93315	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93316	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93317	Echo Transesophageal	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93318	Echo Transesophageal Intraop	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93320	Doppler Echo Exam Heart	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93321	Doppler Echo Exam Heart	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93325	Doppler Color Flow Add-On	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93350	Stress Tte Only	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93351	Stress Tte Complete	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93352	Admin Ecg Contrast Agent	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93452	Left Hrt Cath W/Ventrlcgrphy	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0515T	Insj Wcs Lv Compl Sys	93459	L Hrt Art/Grft Angio	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0516T	Insj Wcs Lv Eltrd Only	0	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0517T	Insj Wcs Lv Pg Compnt	0	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0519T	Rmvl & Rplcmt Pg Compnt Wcs	0	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
0515T	Insj Wcs Lv Compl Sys	0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33206	Insert Heart Pm Atrial	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33207	Insert Heart Pm Ventricular	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33214	Upgrade Of Pacemaker System	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33224	Insert Pacing Lead & Connect	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33225	L Ventric Pacing Lead Add- On	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33227	Remove&Replace Pm Gen Singl	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33228	Remv&Replc Pm Gen Dual Lead	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33229	Remv&Replc Pm Gen Mult Leads	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33230	Insrt Pulse Gen W/Dual Leads	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33231	Insrt Pulse Gen W/Mult Leads	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33240	Insrt Pulse Gen W/Singl Lead	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33249	Insj/Rplcmt Defib W/Lead(S)	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33270	Ins/Rep Subq Defibrillator	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	33275	Tcat Rmvl Perm Ldls Pm W/Img	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0516T	Insj Wcs Lv Eltrd Only	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	76380	Cat Scan Follow-Up Study	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	76937	Us Guide Vascular Access	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	76942	Echo Guide For Biopsy	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	76998	Us Guide Intraop	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	77001	Fluoroguide For Vein Device	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	77002	Needle Localization By Xray	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	77012	Ct Scan For Needle Biopsy	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93303	Echo Transthoracic	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93304	Echo Transthoracic	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93306	Tte W/Doppler Complete	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93307	Tte W/O Doppler Complete	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93308	Tte F-Up Or Lmtd	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93312	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93313	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93314	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93315	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93316	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93317	Echo Transesophageal	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93318	Echo Transesophageal Intraop	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93320	Doppler Echo Exam Heart	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93321	Doppler Echo Exam Heart	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93325	Doppler Color Flow Add-On	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93350	Stress Tte Only	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93351	Stress Tte Complete	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93352	Admin Ecg Contrast Agent	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93452	Left Hrt Cath W/Ventriclgrphy	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93459	L Hrt Art/Grft Angio	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	0517T	Insj Wcs Lv Pg Compnt	0	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	0519T	Rmvl & Rplcmt Pg Compnt Wcs	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0516T	Insj Wcs Lv Eltrd Only	0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	0571T	Insj/Rplcmt Icds Ss Eltrd	1	CMS Edit
0516T	Insj Wcs Lv Eltrd Only	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33206	Insert Heart Pm Atrial	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33207	Insert Heart Pm Ventricular	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33208	Insrt Heart Pm Atrial & Vent	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33212	Insert Pulse Gen Sngl Lead	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33213	Insert Pulse Gen Dual Leads	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33214	Upgrade Of Pacemaker System	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33221	Insert Pulse Gen Mult Leads	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33224	Insert Pacing Lead & Connect	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33225	L Ventric Pacing Lead Add-On	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33227	Remove&Replace Pm Gen Singl	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33228	Remv&Replc Pm Gen Dual Lead	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33229	Remv&Replc Pm Gen Mult Leads	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33230	Insrt Pulse Gen W/Dual Leads	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33231	Insrt Pulse Gen W/Mult Leads	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33240	Insrt Pulse Gen W/Sngl Lead	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33249	Insj/Rplcmt Defib W/Lead(S)	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33270	Ins/Rep Subq Defibrillator	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33274	Tcat Insj/Rpl Perm Ldls Pm	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	33275	Tcat Rmvl Perm Ldls Pm W/Img	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	76380	Cat Scan Follow-Up Study	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	76937	Us Guide Vascular Access	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	76942	Echo Guide For Biopsy	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	76998	Us Guide Intraop	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	77012	Ct Scan For Needle Biopsy	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93303	Echo Transthoracic	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93304	Echo Transthoracic	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93306	Tte W/Doppler Complete	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93307	Tte W/O Doppler Complete	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93308	Tte F-Up Or Lmtd	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0517T	Insj Wcs Lv Pg Compnt	93312	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93313	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93314	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93315	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93316	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93317	Echo Transesophageal	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93318	Echo Transesophageal Intraop	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93320	Doppler Echo Exam Heart	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93321	Doppler Echo Exam Heart	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93325	Doppler Color Flow Add-On	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93350	Stress Tte Only	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93351	Stress Tte Complete	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93352	Admin Ecg Contrast Agent	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	0519T	Rmvl & Rplcmt Pg Compnt Wcs	0	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	0571T	Insj/Rplcmt Iclds Ss Eltrd	1	CMS Edit
0517T	Insj Wcs Lv Pg Compnt	0572T	Insertion Ss Dfb Electrode	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	76380	Cat Scan Follow-Up Study	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	76937	Us Guide Vascular Access	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	76942	Echo Guide For Biopsy	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	76998	Us Guide Intraop	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	77012	Ct Scan For Needle Biopsy	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93303	Echo Transthoracic	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93304	Echo Transthoracic	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93306	Tte W/Doppler Complete	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93307	Tte W/O Doppler Complete	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93308	Tte F-Up Or Lmtd	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93312	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93313	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93314	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93315	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93316	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93317	Echo Transesophageal	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93318	Echo Transesophageal Intraop	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93320	Doppler Echo Exam Heart	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93321	Doppler Echo Exam Heart	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93325	Doppler Color Flow Add-On	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93350	Stress Tte Only	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93351	Stress Tte Complete	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93352	Admin Ecg Contrast Agent	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
0519T	Rmvl & Rplcmt Pg Compnt Wcs	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33224	Insert Pacing Lead & Connect	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33225	L Ventric Pacing Lead Add-On	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33262	Rmvl& Replc Pulse Gen 1 Lead	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33263	Rmvl & Rplcmt Dfb Gen 2 Lead	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	33264	Rmvl & Rplcmt Dfb Gen Mlt Ld	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	76380	Cat Scan Follow-Up Study	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	76937	Us Guide Vascular Access	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	76942	Echo Guide For Biopsy	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	76998	Us Guide Intraop	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	77012	Ct Scan For Needle Biopsy	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93303	Echo Transthoracic	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93304	Echo Transthoracic	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93306	Tte W/Doppler Complete	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93307	Tte W/O Doppler Complete	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93308	Tte F-Up Or Lmtd	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93312	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93313	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93314	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93315	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93316	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93317	Echo Transesophageal	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93318	Echo Transesophageal Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93320	Doppler Echo Exam Heart	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93321	Doppler Echo Exam Heart	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93325	Doppler Color Flow Add-On	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93350	Stress Tte Only	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93351	Stress Tte Complete	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93352	Admin Ecg Contrast Agent	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93452	Left Hrt Cath W/Ventriclgrphy	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93453	R&L Hrt Cath W/Ventriclgrphy	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93458	L Hrt Artery/Ventricle Angio	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93459	L Hrt Art/Grft Angio	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93460	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93461	R&L Hrt Art/Ventricle Angio	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93595	L Hrt Cath Chd Nm/Abn Nt Cnj	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93596	R&L Hrt Cath Chd Nml Nt Cnj	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	93597	R&L Hrt Cath Chd Abnl Nt Cnj	1	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0519T	Rmvl & Rplcmt Pg Compnt Wcs	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0571T	Insj/Rplcmt Iclds Ss Eltrd	0	CMS Edit
0520T	Rmvl&Rplcmt Pg Wcs New Eltrd	0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	0	CMS Edit
0571T	Insj/Rplcmt Iclds Ss Eltrd	76998	Us Guide Intraop	1	CMS Edit
0571T	Insj/Rplcmt Iclds Ss Eltrd	93318	Echo Transesophageal Intraop	1	CMS Edit
0571T	Insj/Rplcmt Iclds Ss Eltrd	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
0572T	Insertion Ss Dfb Electrode	76998	Us Guide Intraop	1	CMS Edit
0572T	Insertion Ss Dfb Electrode	93318	Echo Transesophageal Intraop	1	CMS Edit
0609T	Mrs Disc Pain Acquisj Data	76390	Mr Spectroscopy	1	CMS Edit
0610T	Mrs Disc Pain Transmis Data	76390	Mr Spectroscopy	1	CMS Edit
0611T	Mrs Disc Pain Alg Alys Data	76390	Mr Spectroscopy	1	CMS Edit
0612T	Mrs Discogenic Pain I&R	76390	Mr Spectroscopy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33216	Insert 1 Electrode Pm-Defib	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33217	Insert 2 Electrode Pm-Defib	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33230	Insrt Pulse Gen W/Dual Leads	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33231	Insrt Pulse Gen W/Mult Leads	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33240	Insrt Pulse Gen W/Singl Lead	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33262	Rmvl& Replc Pulse Gen 1 Lead	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33270	Ins/Rep Subq Defibrillator	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	33270	Ins/Rep Subq Defibrillator	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	76942	Echo Guide For Biopsy	1	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	76998	Us Guide Intraop	1	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	93318	Echo Transesophageal Intraop	1	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	0213T	Njx Paravert W/Us Cer/Thor	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	0216T	Njx Paravert W/Us Lumb/Sac	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	0571T	Insj/Rplcmt Icds Ss Eltrd	0	CMS Edit
0614T	Rmvl&Rplcmt Ss Impl Dfb Pg	0572T	Insertion Ss Dfb Electrode	0	CMS Edit
0623T	Auto Quantification C Plaque	76376	3D Render W/Intrp Postproces	1	CMS Edit
0623T	Auto Quantification C Plaque	76377	3D Render W/Intrp Postproces	1	CMS Edit
0623T	Auto Quantification C Plaque	0624T	Auto Quan C Plaq Data Prep	0	CMS Edit
0623T	Auto Quantification C Plaque	0625T	Auto Quan C Plaq Cptr Alys	0	CMS Edit
0623T	Auto Quantification C Plaque	0626T	Auto Quan C Plaq I&R	0	CMS Edit
0623T	Auto Quantification C Plaque	0711T	N-Nvs Artl Plaq Alys Dat Prp	0	CMS Edit
0624T	Auto Quan C Plaq Data Prep	76376	3D Render W/Intrp Postproces	1	CMS Edit
0624T	Auto Quan C Plaq Data Prep	76377	3D Render W/Intrp Postproces	1	CMS Edit
0625T	Auto Quan C Plaq Cptr Alys	76376	3D Render W/Intrp Postproces	1	CMS Edit
0625T	Auto Quan C Plaq Cptr Alys	76377	3D Render W/Intrp Postproces	1	CMS Edit
0626T	Auto Quan C Plaq I&R	76376	3D Render W/Intrp Postproces	1	CMS Edit
0626T	Auto Quan C Plaq I&R	76377	3D Render W/Intrp Postproces	1	CMS Edit
0633T	Ct Breast W/3D Uni C-	71250	Ct Thorax Dx C-	0	CMS Edit
0633T	Ct Breast W/3D Uni C-	71260	Ct Thorax Dx C+	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0633T	Ct Breast W/3D Uni C-	71270	Ct Thorax Dx C-/C+	0	CMS Edit
0633T	Ct Breast W/3D Uni C-	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0633T	Ct Breast W/3D Uni C-	76376	3D Render W/Intrp Postproces	1	CMS Edit
0633T	Ct Breast W/3D Uni C-	76377	3D Render W/Intrp Postproces	1	CMS Edit
0633T	Ct Breast W/3D Uni C-	76380	Cat Scan Follow-Up Study	1	CMS Edit
0634T	Ct Breast W/3D Uni C+	71250	Ct Thorax Dx C-	0	CMS Edit
0634T	Ct Breast W/3D Uni C+	71260	Ct Thorax Dx C+	0	CMS Edit
0634T	Ct Breast W/3D Uni C+	71270	Ct Thorax Dx C-/C+	0	CMS Edit
0634T	Ct Breast W/3D Uni C+	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0634T	Ct Breast W/3D Uni C+	76376	3D Render W/Intrp Postproces	1	CMS Edit
0634T	Ct Breast W/3D Uni C+	76377	3D Render W/Intrp Postproces	1	CMS Edit
0634T	Ct Breast W/3D Uni C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
0634T	Ct Breast W/3D Uni C+	0633T	Ct Breast W/3D Uni C-	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	71250	Ct Thorax Dx C-	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	71260	Ct Thorax Dx C+	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	71270	Ct Thorax Dx C-/C+	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	76376	3D Render W/Intrp Postproces	1	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	76377	3D Render W/Intrp Postproces	1	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	0633T	Ct Breast W/3D Uni C-	0	CMS Edit
0635T	Ct Breast W/3D Uni C-/C+	0634T	Ct Breast W/3D Uni C+	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	71250	Ct Thorax Dx C-	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	71260	Ct Thorax Dx C+	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	71270	Ct Thorax Dx C-/C+	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	76376	3D Render W/Intrp Postproces	1	CMS Edit
0636T	Ct Breast W/3D Bi C-	76377	3D Render W/Intrp Postproces	1	CMS Edit
0636T	Ct Breast W/3D Bi C-	76380	Cat Scan Follow-Up Study	1	CMS Edit
0636T	Ct Breast W/3D Bi C-	0633T	Ct Breast W/3D Uni C-	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	0634T	Ct Breast W/3D Uni C+	0	CMS Edit
0636T	Ct Breast W/3D Bi C-	0635T	Ct Breast W/3D Uni C-/C+	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	71250	Ct Thorax Dx C-	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	71260	Ct Thorax Dx C+	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	71270	Ct Thorax Dx C-/C+	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0637T	Ct Breast W/3D Bi C+	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	76376	3D Render W/Intrp Postproces	1	CMS Edit
0637T	Ct Breast W/3D Bi C+	76377	3D Render W/Intrp Postproces	1	CMS Edit
0637T	Ct Breast W/3D Bi C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
0637T	Ct Breast W/3D Bi C+	0633T	Ct Breast W/3D Uni C-	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	0634T	Ct Breast W/3D Uni C+	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	0635T	Ct Breast W/3D Uni C-/C+	0	CMS Edit
0637T	Ct Breast W/3D Bi C+	0636T	Ct Breast W/3D Bi C-	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	71250	Ct Thorax Dx C-	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	71260	Ct Thorax Dx C+	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	71270	Ct Thorax Dx C-/C+	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	71271	Ct Thorax Lung Cancer Scr C-	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	76376	3D Render W/Intrp Postproces	1	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	76377	3D Render W/Intrp Postproces	1	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	76380	Cat Scan Follow-Up Study	1	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	0633T	Ct Breast W/3D Uni C-	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	0634T	Ct Breast W/3D Uni C+	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	0635T	Ct Breast W/3D Uni C-/C+	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	0636T	Ct Breast W/3D Bi C-	0	CMS Edit
0638T	Ct Breast W/3D Bi C-/C+	0637T	Ct Breast W/3D Bi C+	0	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70540	Mri Orbit/Face/Neck W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70542	Mri Orbit/Face/Neck W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70543	Mri Orbit/Fac/Nck W/O &W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70551	Mri Brain Stem W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70552	Mri Brain Stem W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	70553	Mri Brain Stem W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	71550	Mri Chest W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	71551	Mri Chest W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	71552	Mri Chest W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72141	Mri Neck Spine W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72142	Mri Neck Spine W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72146	Mri Chest Spine W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72147	Mri Chest Spine W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72148	Mri Lumbar Spine W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72149	Mri Lumbar Spine W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72156	Mri Neck Spine W/O & W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0648T	Quan Mr Tis Wo Mri 1Orgn	72157	Mri Chest Spine W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72158	Mri Lumbar Spine W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72195	Mri Pelvis W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72196	Mri Pelvis W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	72197	Mri Pelvis W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73219	Mri Upper Extremity W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73220	Mri Uppr Extremity W/O&W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73223	Mri Joint Upr Extr W/O&W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73718	Mri Lower Extremity W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73719	Mri Lower Extremity W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73720	Mri Lwr Extremity W/O&W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73721	Mri Jnt Of Lwr Extre W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73722	Mri Joint Of Lwr Extr W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	73723	Mri Joint Lwr Extr W/O&W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	74181	Mri Abdomen W/O Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	74182	Mri Abdomen W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	74183	Mri Abdomen W/O & W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	75557	Cardiac Mri For Morph	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	75559	Cardiac Mri W/Stress Img	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	75561	Cardiac Mri For Morph W/Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	75563	Card Mri W/Stress Img & Dye	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	76390	Mr Spectroscopy	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	76498	Unlisted Mr Procedure	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	77046	Mri Breast C- Unilateral	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	77047	Mri Breast C- Bilateral	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	77048	Mri Breast C-+ W/Cad Uni	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	77049	Mri Breast C-+ W/Cad Bi	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	0649T	Quan Mr Tiss W/Mri 1Orgn	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	0697T	Quan Mr Tis Wo Mri Mlt Orgn	1	CMS Edit
0648T	Quan Mr Tis Wo Mri 1Orgn	0698T	Quan Mr Tiss W/Mri Mlt Orgn	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0648T	Quan Mr Tis Wo Mri 1Orgn	C9762	Cmri Mrphol&Fnc Q Seg Dysf;Str Imag	1	CMS Edit
0697T	Quan Mr Tis Wo Mri Mlt Orgn	76390	Mr Spectroscopy	1	CMS Edit
0697T	Quan Mr Tis Wo Mri Mlt Orgn	0649T	Quan Mr Tiss W/Mri 1Orgn	1	CMS Edit
0697T	Quan Mr Tis Wo Mri Mlt Orgn	0698T	Quan Mr Tiss W/Mri Mlt Orgn	1	CMS Edit
0698T	Quan Mr Tiss W/Mri Mlt Orgn	0649T	Quan Mr Tiss W/Mri 1Orgn	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	76376	3D Render W/Intrp Postproces	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	76377	3D Render W/Intrp Postproces	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	76942	Echo Guide For Biopsy	1	CMS Edit
0710T	N-Invas Artl Plaq Alys	76998	Us Guide Intraop	1	CMS Edit
0710T	N-Invas Artl Plaq Alys	93318	Echo Transesophageal Intraop	1	CMS Edit
0710T	N-Invas Artl Plaq Alys	93978	Vascular Study	1	CMS Edit
0710T	N-Invas Artl Plaq Alys	93979	Vascular Study	1	CMS Edit
0710T	N-Invas Artl Plaq Alys	0623T	Auto Quantification C Plaque	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0624T	Auto Quan C Plaq Data Prep	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0625T	Auto Quan C Plaq Cptr Alys	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0626T	Auto Quan C Plaq I&R	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0711T	N-Nvs Artl Plaq Alys Dat Prp	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0712T	N-Nvs Artl Plaq Alys Quan	0	CMS Edit
0710T	N-Invas Artl Plaq Alys	0713T	N-Nvs Artl Plaq Alys Rvw I&R	0	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	76376	3D Render W/Intrp Postproces	0	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	76377	3D Render W/Intrp Postproces	0	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	76942	Echo Guide For Biopsy	1	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	76998	Us Guide Intraop	1	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	93318	Echo Transesophageal Intraop	1	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	93978	Vascular Study	1	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	93979	Vascular Study	1	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	0624T	Auto Quan C Plaq Data Prep	0	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	0625T	Auto Quan C Plaq Cptr Alys	0	CMS Edit
0711T	N-Nvs Artl Plaq Alys Dat Prp	0626T	Auto Quan C Plaq I&R	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	76376	3D Render W/Intrp Postproces	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	76377	3D Render W/Intrp Postproces	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	76942	Echo Guide For Biopsy	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
0712T	N-Nvs Artl Plaq Alys Quan	76998	Us Guide Intraop	1	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	93318	Echo Transesophageal Intraop	1	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	93978	Vascular Study	1	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	93979	Vascular Study	1	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	0623T	Auto Quantification C Plaque	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	0624T	Auto Quan C Plaq Data Prep	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	0625T	Auto Quan C Plaq Cptr Alys	0	CMS Edit
0712T	N-Nvs Artl Plaq Alys Quan	0626T	Auto Quan C Plaq I&R	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	76376	3D Render W/Intrp Postproces	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	76377	3D Render W/Intrp Postproces	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	76942	Echo Guide For Biopsy	1	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	76998	Us Guide Intraop	1	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	93318	Echo Transesophageal Intraop	1	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	93978	Vascular Study	1	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	93979	Vascular Study	1	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	0623T	Auto Quantification C Plaque	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	0624T	Auto Quan C Plaq Data Prep	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	0625T	Auto Quan C Plaq Cptr Alys	0	CMS Edit
0713T	N-Nvs Artl Plaq Alys Rvw I&R	0626T	Auto Quan C Plaq I&R	0	CMS Edit
70336	Magnetic Image Jaw Joint	70332	X-Ray Exam Of Jaw Joint	0	EVC Edit
C8900	Mr Angiography W/Contrast Abdomen	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	76942	Echo Guide For Biopsy	1	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	76998	Us Guide Intraop	1	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	77001	Fluoroguide For Vein Device	1	CMS Edit
C8900	Mr Angiography W/Contrast Abdomen	77002	Needle Localization By Xray	1	CMS Edit
C8901	Mr Angiography Without Contrst Abd	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8901	Mr Angiography Without Contrst Abd	76376	3D Render W/Intrp Postproces	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8901	Mr Angiography Without Contrst Abd	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8901	Mr Angiography Without Contrst Abd	76942	Echo Guide For Biopsy	1	CMS Edit
C8901	Mr Angiography Without Contrst Abd	76998	Us Guide Intraop	1	CMS Edit
C8901	Mr Angiography Without Contrst Abd	77001	Fluoroguide For Vein Device	1	CMS Edit
C8901	Mr Angiography Without Contrst Abd	77002	Needle Localization By Xray	1	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	76942	Echo Guide For Biopsy	1	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	76998	Us Guide Intraop	1	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	77001	Fluoroguide For Vein Device	1	CMS Edit
C8902	Mr Angio W/O Contrst W/Contrst Abd	77002	Needle Localization By Xray	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	76942	Echo Guide For Biopsy	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	76998	Us Guide Intraop	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77001	Fluoroguide For Vein Device	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77002	Needle Localization By Xray	1	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77046	Mri Breast C- Unilateral	0	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77047	Mri Breast C- Bilateral	0	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77048	Mri Breast C-+ W/Cad Uni	0	CMS Edit
C8903	Mr Imaging W/Contrast Breast; Uni	77049	Mri Breast C-+ W/Cad Bi	0	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	76942	Echo Guide For Biopsy	1	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	76998	Us Guide Intraop	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
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PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77001	Fluoroguide For Vein Device	1	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77002	Needle Localization By Xray	1	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77046	Mri Breast C- Unilateral	0	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77047	Mri Breast C- Bilateral	0	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77048	Mri Breast C-+ W/Cad Uni	0	CMS Edit
C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	77049	Mri Breast C-+ W/Cad Bi	0	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	76942	Echo Guide For Biopsy	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	76998	Us Guide Intraop	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77001	Fluoroguide For Vein Device	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77002	Needle Localization By Xray	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77046	Mri Breast C- Unilateral	0	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77047	Mri Breast C- Bilateral	0	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77048	Mri Breast C-+ W/Cad Uni	0	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	77049	Mri Breast C-+ W/Cad Bi	0	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	C8903	Mr Imaging W/Contrast Breast; Uni	1	CMS Edit
C8906	Mr Imaging W/Contrst Breast; Bil	C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	76942	Echo Guide For Biopsy	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	76998	Us Guide Intraop	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77001	Fluoroguide For Vein Device	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77002	Needle Localization By Xray	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77046	Mri Breast C- Unilateral	0	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77047	Mri Breast C- Bilateral	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77048	Mri Breast C-+ W/Cad Uni	0	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	77049	Mri Breast C-+ W/Cad Bi	0	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	C8903	Mr Imaging W/Contrast Breast; Uni	1	CMS Edit
C8908	Mr No Contrst Flw Cntrst Brst; Bil	C8905	Mr No Contrst Flw W/Cntrst Brst;Uni	1	CMS Edit
C8909	Mr Angiography With Contrast Chest	71551	Mri Chest W/Dye	0	CMS Edit*
C8909	Mr Angiography With Contrast Chest	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8909	Mr Angiography With Contrast Chest	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8909	Mr Angiography With Contrast Chest	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8909	Mr Angiography With Contrast Chest	76942	Echo Guide For Biopsy	1	CMS Edit
C8909	Mr Angiography With Contrast Chest	76998	Us Guide Intraop	1	CMS Edit
C8909	Mr Angiography With Contrast Chest	77001	Fluoroguide For Vein Device	1	CMS Edit
C8909	Mr Angiography With Contrast Chest	77002	Needle Localization By Xray	1	CMS Edit
C8910	Mr Angio Without Contrst Chest	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8910	Mr Angio Without Contrst Chest	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8910	Mr Angio Without Contrst Chest	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8910	Mr Angio Without Contrst Chest	76942	Echo Guide For Biopsy	1	CMS Edit
C8910	Mr Angio Without Contrst Chest	76998	Us Guide Intraop	1	CMS Edit
C8910	Mr Angio Without Contrst Chest	77001	Fluoroguide For Vein Device	1	CMS Edit
C8910	Mr Angio Without Contrst Chest	77002	Needle Localization By Xray	1	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	76942	Echo Guide For Biopsy	1	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8911	Mr Angio No Contrst Flw Cntrst Chst	77001	Fluoroguide For Vein Device	1	CMS Edit
C8911	Mr Angio No Contrst Flw Cntrst Chst	77002	Needle Localization By Xray	1	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	76942	Echo Guide For Biopsy	1	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	76998	Us Guide Intraop	1	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	77001	Fluoroguide For Vein Device	1	CMS Edit
C8912	Mr Angio W/Contrst Lower Extremity	77002	Needle Localization By Xray	1	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	76942	Echo Guide For Biopsy	1	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	76998	Us Guide Intraop	1	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	77001	Fluoroguide For Vein Device	1	CMS Edit
C8913	Mr Angio Without Contrst Low Extrem	77002	Needle Localization By Xray	1	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	76942	Echo Guide For Biopsy	1	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	76998	Us Guide Intraop	1	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	77001	Fluoroguide For Vein Device	1	CMS Edit
C8914	Mr Angio No Cntrst Flw Con Lw Extrm	77002	Needle Localization By Xray	1	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8918	Mr Angiography With Contrast Pelvis	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	76942	Echo Guide For Biopsy	1	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	76998	Us Guide Intraop	1	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	77001	Fluoroguide For Vein Device	1	CMS Edit
C8918	Mr Angiography With Contrast Pelvis	77002	Needle Localization By Xray	1	CMS Edit
C8919	Mra Without Contrast Pelvis	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8919	Mra Without Contrast Pelvis	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8919	Mra Without Contrast Pelvis	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8919	Mra Without Contrast Pelvis	76942	Echo Guide For Biopsy	1	CMS Edit
C8919	Mra Without Contrast Pelvis	76998	Us Guide Intraop	1	CMS Edit
C8919	Mra Without Contrast Pelvis	77001	Fluoroguide For Vein Device	1	CMS Edit
C8919	Mra Without Contrast Pelvis	77002	Needle Localization By Xray	1	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	76942	Echo Guide For Biopsy	1	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	76998	Us Guide Intraop	1	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	77001	Fluoroguide For Vein Device	1	CMS Edit
C8920	Mra No Contrst Flwed W/Contrst Pelv	77002	Needle Localization By Xray	1	CMS Edit
C8921	Tte Cong Cardiac Anomal; Complete	76998	Us Guide Intraop	1	CMS Edit
C8921	Tte Cong Cardiac Anomal; Complete	93303	Echo Transthoracic	0	CMS Edit
C8921	Tte Cong Cardiac Anomal; Complete	93304	Echo Transthoracic	1	CMS Edit
C8921	Tte Cong Cardiac Anomal; Complete	C8922	Tte Cong Cardiac Anomal; Limited	1	CMS Edit
C8922	Tte Cong Cardiac Anomal; Limited	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8922	Tte Cong Cardiac Anomal; Limited	93304	Echo Transthoracic	1	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	76998	Us Guide Intraop	1	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93306	Tte W/Doppler Complete	0	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93307	Tte W/O Doppler Complete	0	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93308	Tte F-Up Or Lmtd	1	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93320	Doppler Echo Exam Heart	0	EVC Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93321	Doppler Echo Exam Heart	0	EVC Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	93325	Doppler Color Flow Add-On	0	EVC Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	1	CMS Edit
C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	0	CMS Edit
C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	76998	Us Guide Intraop	1	CMS Edit
C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	93308	Tte F-Up Or Lmtd	1	CMS Edit
C8925	Tee Real Time 2D; Probe Plcmt I&R	76998	Us Guide Intraop	1	CMS Edit
C8925	Tee Real Time 2D; Probe Plcmt I&R	93312	Echo Transesophageal	0	CMS Edit
C8925	Tee Real Time 2D; Probe Plcmt I&R	93313	Echo Transesophageal	0	CMS Edit
C8925	Tee Real Time 2D; Probe Plcmt I&R	93314	Echo Transesophageal	0	CMS Edit
C8926	Tee Cong Cardiac Anomal; Probe I&R	76998	Us Guide Intraop	1	CMS Edit
C8926	Tee Cong Cardiac Anomal; Probe I&R	93315	Echo Transesophageal	0	CMS Edit
C8926	Tee Cong Cardiac Anomal; Probe I&R	93316	Echo Transesophageal	0	CMS Edit
C8926	Tee Cong Cardiac Anomal; Probe I&R	93317	Echo Transesophageal	0	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	76998	Us Guide Intraop	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93016	Cardiovascular Stress Test	0	EVC Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93017	Cardiovascular Stress Test	0	EVC Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93018	Cardiovascular Stress Test	0	EVC Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93306	Tte W/Doppler Complete	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93307	Tte W/O Doppler Complete	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93308	Tte F-Up Or Lmtd	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93312	Echo Transesophageal	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93313	Echo Transesophageal	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93314	Echo Transesophageal	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93318	Echo Transesophageal Intraop	0	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93350	Stress Tte Only	0	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	93351	Stress Tte Complete	0	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	C8923	Tte R-T Doc 2D Incl M-Mode Rec Cmpl	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	C8925	Tee Real Time 2D; Probe Plcmt I&R	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	1	CMS Edit
C8928	Tte M-Mode Rec Rest & Cv St W/I&R	C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	0	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	76604	Us Exam Chest	1	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	76998	Us Guide Intraop	1	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93304	Echo Transthoracic	1	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93307	Tte W/O Doppler Complete	0	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93308	Tte F-Up Or Lmtd	1	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93320	Doppler Echo Exam Heart	0	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93321	Doppler Echo Exam Heart	0	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	93325	Doppler Color Flow Add-On	0	CMS Edit
C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	C8924	Tte R-T 2D Incl M-Mode Rec Fu/Ltd	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93303	Echo Transthoracic	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93304	Echo Transthoracic	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93306	Tte W/Doppler Complete	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93308	Tte F-Up Or Lmtd	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93313	Echo Transesophageal	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93314	Echo Transesophageal	1	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93350	Stress Tte Only	0	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	93351	Stress Tte Complete	0	CMS Edit
C8930	Tte Cmpl Dur Rest&Cvst I&R Phys Sup	C8929	Tte Cmpl Spc & Colr Flow Dpplr Echo	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72141	Mri Neck Spine W/O Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72142	Mri Neck Spine W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72146	Mri Chest Spine W/O Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72147	Mri Chest Spine W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72148	Mri Lumbar Spine W/O Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72149	Mri Lumbar Spine W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72156	Mri Neck Spine W/O & W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72157	Mri Chest Spine W/O & W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72158	Mri Lumbar Spine W/O & W/Dye	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	72159	Mr Angio Spine W/O&W/Dye	0	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	76942	Echo Guide For Biopsy	1	CMS Edit
C8931	Mra W/Contrst Spinal Canal Contents	76998	Us Guide Intraop	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8931	Mra W/Contrst Spinal Canal Contents	C8932	Mra W/O Contrst Sp Canal Contents	0	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72141	Mri Neck Spine W/O Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72142	Mri Neck Spine W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72146	Mri Chest Spine W/O Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72147	Mri Chest Spine W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72148	Mri Lumbar Spine W/O Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72149	Mri Lumbar Spine W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72156	Mri Neck Spine W/O & W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72157	Mri Chest Spine W/O & W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72158	Mri Lumbar Spine W/O & W/Dye	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	72159	Mr Angio Spine W/O&W/Dye	0	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	76942	Echo Guide For Biopsy	1	CMS Edit
C8932	Mra W/O Contrst Sp Canal Contents	76998	Us Guide Intraop	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72141	Mri Neck Spine W/O Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72142	Mri Neck Spine W/Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72146	Mri Chest Spine W/O Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72147	Mri Chest Spine W/Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72148	Mri Lumbar Spine W/O Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72149	Mri Lumbar Spine W/Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72156	Mri Neck Spine W/O & W/Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72157	Mri Chest Spine W/O & W/Dye	1	CMS Edit





## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)



(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8933	Mra No Contrst Contrst Sp Canal Cnt	72158	Mri Lumbar Spine W/O & W/Dye	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	72159	Mr Angio Spine W/O&W/Dye	0	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	76942	Echo Guide For Biopsy	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	76998	Us Guide Intraop	1	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	C8931	Mra W/Contrst Spinal Canal Contents	0	CMS Edit
C8933	Mra No Contrst Contrst Sp Canal Cnt	C8932	Mra W/O Contrst Sp Canal Contents	0	CMS Edit
C8934	Mra With Contrast Upper Extremity	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73219	Mri Upper Extremity W/Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73220	Mri Uppr Extremity W/O&W/Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73223	Mri Joint Upr Extr W/O&W/Dye	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	73225	Mr Angio Upr Extr W/O&W/Dye	0	CMS Edit
C8934	Mra With Contrast Upper Extremity	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8934	Mra With Contrast Upper Extremity	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8934	Mra With Contrast Upper Extremity	76942	Echo Guide For Biopsy	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	76998	Us Guide Intraop	1	CMS Edit
C8934	Mra With Contrast Upper Extremity	C8935	Mra Without Contrst Upper Extremity	0	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73219	Mri Upper Extremity W/Dye	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C8935	Mra Without Contrst Upper Extremity	73220	Mri Uppr Extremity W/O&W/Dye	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73223	Mri Joint Upr Extr W/O&W/Dye	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	73225	Mr Angio Upr Extr W/O&W/Dye	0	CMS Edit
C8935	Mra Without Contrst Upper Extremity	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8935	Mra Without Contrst Upper Extremity	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8935	Mra Without Contrst Upper Extremity	76942	Echo Guide For Biopsy	1	CMS Edit
C8935	Mra Without Contrst Upper Extremity	76998	Us Guide Intraop	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73218	Mri Upper Extremity W/O Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73219	Mri Upper Extremity W/Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73220	Mri Uppr Extremity W/O&W/Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73221	Mri Joint Upr Extrem W/O Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73222	Mri Joint Upr Extrem W/Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73223	Mri Joint Upr Extr W/O&W/Dye	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	73225	Mr Angio Upr Extr W/O&W/Dye	0	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	76376	3D Render W/Intrp Postproces	0	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	76377	3D Render W/Intrp Postproces	0	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	76942	Echo Guide For Biopsy	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	76998	Us Guide Intraop	1	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	C8934	Mra With Contrast Upper Extremity	0	CMS Edit
C8936	Mra No Contrst Flw W/Contrst Up Ext	C8935	Mra Without Contrst Upper Extremity	0	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH (Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
C9791	Mri With Inh Hpx Contrast Agt Chest	71551	Mri Chest W/Dye	0	CMS Edit*
C9744	Abd us w/contrast	76942	Echo guide for biopsy	0	EVC Edit
C9744	Abd us w/contrast	76998	Us guide intraop	0	EVC Edit
G0279	Dx Digtl Brst Tomosynthesis Uni/Bil	77061	Breast Tomosynthesis Uni	0	EVC Edit
G0279	Dx Digtl Brst Tomosynthesis Uni/Bil	77062	Breast Tomosynthesis Bi	0	EVC Edit
* New 2024 Addition					
Note: EVC Edits are not applicable for Medicare Line of Business					
Code	Description	Code	Description	"Modifier	
0= not					
allowed; 1= allowed"	Rule Source				
33016	Pericardiocentesis W/Imaging	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76376	3D Render W/Intrp Postproces	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76377	3D Render W/Intrp Postproces	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76380	Cat Scan Follow-Up Study	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76942	Echo Guide For Biopsy	1	CMS Edit
33016	Pericardiocentesis W/Imaging	76998	Us Guide Intraop	1	CMS Edit
33016	Pericardiocentesis W/Imaging	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33016	Pericardiocentesis W/Imaging	77021	Mri Guidance Ndl Plmt Rs&I	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93303	Echo Transthoracic	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93304	Echo Transthoracic	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93306	Tte W/Doppler Complete	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93307	Tte W/O Doppler Complete	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93308	Tte F-Up Or Lmtd	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93312	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93313	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93314	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93315	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93316	Echo Transesophageal	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93317	Echo Transesophageal	1	CMS Edit

## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

**EviCore**  
By EVERNORTH

(Administered by EviCore by EVERNORTH)

PAY			NO PAY		
Code	Description	Code	Description	Modifier 0= not allowed 1= allowed	Rule Source
33016	Pericardiocentesis W/Imaging	93318	Echo Transesophageal Intraop	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93320	Doppler Echo Exam Heart	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93321	Doppler Echo Exam Heart	1	CMS Edit
33016	Pericardiocentesis W/Imaging	93325	Doppler Color Flow Add-On	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	75989	Abscess Drainage Under X-Ray	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76376	3D Render W/Intrp Postproces	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76377	3D Render W/Intrp Postproces	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76380	Cat Scan Follow-Up Study	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76942	Echo Guide For Biopsy	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	76998	Us Guide Intraop	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93303	Echo Transthoracic	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93304	Echo Transthoracic	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93306	Tte W/Doppler Complete	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93307	Tte W/O Doppler Complete	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93308	Tte F-Up Or Lmtd	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93312	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93313	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93314	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93315	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93316	Echo Transesophageal	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93317	Echo Transesophageal	1	CMS Edit



## Reimbursement Policy:

### General Radiology-Cardiology-Ultrasound CRID Correct Coding Rules (Commercial & Medicaid)

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33017	Prcrd Drg 6Yr+ W/O Cgen Car	93318	Echo Transesophageal Intraop	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93320	Doppler Echo Exam Heart	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93321	Doppler Echo Exam Heart	1	CMS Edit
33017	Prcrd Drg 6Yr+ W/O Cgen Car	93325	Doppler Color Flow Add-On	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	33017	Prcrd Drg 6Yr+ W/O Cgen Car	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	75989	Abscess Drainage Under X-Ray	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76000	Fluoroscopy <1 Hr Phys/Qhp	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76376	3D Render W/Intrp Postprocs	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76377	3D Render W/Intrp Postprocs	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76380	Cat Scan Follow-Up Study	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76942	Echo Guide For Biopsy	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	76998	Us Guide Intraop	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	77012	Ct Scan For Needle Biopsy	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	77021	Mri Guidance Ndl Plmt Rs&l	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93303	Echo Transthoracic	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93304	Echo Transthoracic	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93306	Tte W/Doppler Complete	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93307	Tte W/O Doppler Complete	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93308	Tte F-Up Or Lmted	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93312	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93313	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93314	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93315	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93316	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93317	Echo Transesophageal	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93318	Echo Transesophageal Intraop	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93320	Doppler Echo Exam Heart	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93321	Doppler Echo Exam Heart	1	CMS Edit
33018	Prcrd Drg 0-5Yr Or W/Anomly	93325	Doppler Color Flow Add-On	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33016	Pericardiocentesis W/Imaging	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33017	Prcrd Drg 6Yr+ W/O Cgen Car	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	33018	Prcrd Drg 0-5Yr Or W/Anomly	1	CMS Edit



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33019	Perq Prcrd Drg Insj Cath Ct	76998	Us Guide Intraop	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	77012	Ct Scan For Needle Biopsy	1	CMS Edit
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33019	Perq Prcrd Drg Insj Cath Ct	93307	Tte W/O Doppler Complete	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93308	Tte F-Up Or Lmted	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93312	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93313	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93314	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93315	Echo Transesophageal	1	CMS Edit
33019	Perq Prcrd Drg Insj Cath Ct	93316	Echo Transesophageal	1	CMS Edit

## Revision history

DATE	REVISION
11/2024	<ul style="list-style-type: none"> <li>Reformatted and reorganized policy, transferred content to new template with new Reimbursement Policy Number</li> </ul>