

September 25, 2020



Healthfirst Reimbursement Policy Updates

Effective November 1, 2020 | For All Lines of Business

Healthfirst aims to ensure that our reimbursement policy standards are up to date and are compliant with state and national industry standards. Effective **November 1, 2020**, several changes will be made to our reimbursement policy to maintain compliance with industry-accepted coding and reimbursement practices as well as state and national regulatory requirements.

For more details, [click on the links below](#).

- [✔ Obstetrical Ultrasound Procedures](#)
- [✔ Obstetrical Ultrasound Follow-up Procedures](#)
- [✔ Ultrasound Diagnostic Procedures](#)

Should you have any questions, you may contact your network representative, or call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am–5:30pm.

Obstetrical Ultrasound Procedures

Policy Overview

Effective November 1, 2020, Healthfirst will no longer reimburse CPT 76817 (Ultrasound, pregnant uterus, real time with image documentation, transvaginal) when billed with CPT 76801–76812 (Ultrasound, pregnant uterus, real time with image documentation, transabdominal).

Rationale

A transabdominal ultrasound of the pregnant uterus, real time with image documentation, fetal and maternal evaluation (76801-76812) includes evaluation and documentation of the same structures as a transvaginal ultrasound of the pregnant uterus, real time with image documentation (76817). As described above, redundant services will not be allowed unless there are extenuating circumstances that necessitate both approaches.

Billing Information

This policy applies to the following service codes:

76817: Ultrasound, pregnant uterus, real time with image documentation, transvaginal

76801: Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks, 0 days), transabdominal approach; single or first gestation

76802: Add-on Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks, 0 days), transabdominal approach; each additional gestation

76805: Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (\geq 14 weeks, 0 days), transabdominal approach; single or first gestation

76810: Add-on Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (\geq 14 weeks, 0 days), transabdominal approach; each additional gestation

76811: Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation

76812: Add-on Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; each additional gestation

Obstetrical Ultrasound Follow-up Procedures

Policy Overview

Effective November 1, 2020, according to the AMA CPT Manual, Healthfirst will recode an initial obstetrical ultrasound (76805 or 76810–76812) to a follow-up obstetrical ultrasound (76816) when an initial obstetrical ultrasound has been billed within the previous five months.

Rationale

According to the CPT Manual, code 76816 describes an examination to reassess fetal size, interval growth, or re-evaluate one or more anatomic abnormalities of a fetus previously demonstrated on ultrasound. Therefore, 76816 should be used if an initial study is performed, and another study is performed within the same pregnancy, given the definition of 76816 and the fact that an initial study has already been performed for the same condition.

Billing Information

This policy applies to the following service codes:

- 76805:** Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (≥ 14 weeks, 0 days), transabdominal approach; single or first gestation
- 76810:** Add-on Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (≥ 14 weeks, 0 days), transabdominal approach; each additional gestation
- 76811:** Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation
- 76812:** Add-on Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; each additional gestation
- 76816:** Ultrasound, pregnant uterus, real time with image documentation, follow-up (e.g., re-evaluation of fetal size by measuring standard growth parameters and amniotic fluid volume; re-evaluation of organ system(s) suspected or confirmed to be abnormal on a previous scan), transabdominal approach, per fetus

Ultrasound Diagnostic Procedures

Policy Overview

Effective November 1, 2020, Healthfirst will no longer reimburse CPT 76856 (Ultrasound, pelvic [non-obstetric], real time with image documentation; complete) or CPT 76857 (Ultrasound, pelvic [non-obstetric], real time with image documentation; limited or follow-up) when billed with CPT 76830 (Ultrasound, transvaginal).

Rationale

Pelvic ultrasound (76856 or 76857) and transvaginal ultrasound (76830) evaluate the patient for the same conditions at the same session. Therefore, they represent redundant services, and the pelvic echography should not be paid unless there are extenuating circumstances to validate that both studies had to be performed.

A pelvic ultrasound is defined as a noninvasive diagnostic exam that produces images that are used to assess organs and structures within the female pelvis. A pelvic ultrasound allows quick visualization of the female pelvic organs and structures, including the uterus, cervix, vagina, Fallopian tubes, and ovaries.

A transvaginal ultrasound is defined as a type of pelvic ultrasound used by doctors to examine female reproductive organs. This includes the uterus, Fallopian tubes, ovaries, cervix, and vagina. "Transvaginal" means "through the vagina." This is an internal examination.

Billing Information

This policy applies to the following service codes:

76856: Ultrasound, pelvic [non-obstetric], real time with image documentation; complete

76857: Ultrasound, pelvic [non-obstetric], real time with image documentation; limited or follow-up

76830: Ultrasound, transvaginal