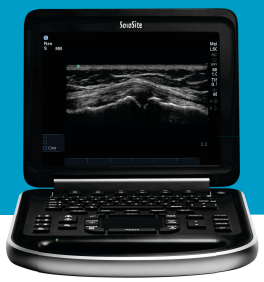

January 2014

Ultrasound Reimbursement Information

Abdominal Aortic Aneurysm (AAA) Screening

This guide provides coverage and payment information regarding diagnostic ultrasound for abdominal aortic aneurysm screening. SonoSite provides this information as a courtesy to assist providers in determining the appropriate coding and other information for reimbursement purposes. It is the provider's responsibility to determine and submit appropriate codes, modifiers and claims for services rendered. SonoSite makes no guarantees concerning reimbursement or coverage. Please feel free to contact the SonoSite reimbursement staff if you have any questions at 1-888-482-9449.

Medicare

Coverage: Eligible beneficiaries for coverage of ultrasound screening examinations for AAA are those who:

1. have not been previously furnished a covered AAA screening ultrasound examination under the Medicare program; and
2. are included in one of the following risk categories:
   - Men and women with a family history of an AAA; or
   - Men age 65 to 75 years who have smoked at least 100 cigarettes in their lifetimes

For 2014 the requirement attached to the beneficiary receiving a referral as part of the Initial Preventative Physical Examination IPPE was removed.

Coding: Physicians submitting claims for payment for AAA screening exams will submit a G0389 - Ultrasound, real time with image documentation; for abdominal aortic aneurysm (AAA) screening.

Private Insurance

Aetna will cover a one-time ultrasound screening for AAA for men 65 years of age or older. Aetna's policy identifies the use of either CPT code 76770 - complete retroperitoneal ultrasound or CPT code 76775 - limited retroperitoneal ultrasound, as appropriate for the reporting of this service. Payment rates are not publicly available and will depend upon the contract each provider has negotiated with Aetna.

Cigna will cover a one-time ultrasound screening for AAA for men age 65 - 75 who have ever smoked, male nonsmokers nearing age 65 with a family history of AAA, and female smokers age 70 or older with a family history of AAA. These coverage criteria only apply for those members who have coverage for preventive health services. Cigna's policy also references the limited and complete retroperitoneal ultrasound codes. Payment rates are proprietary and variable as above.

Several of the Blue Cross Blue Shield companies advise members determined by their physicians to be at risk for AAA to receive screening for AAA, but they note that this service may not be covered under all plans

In all instances, it is advisable for providers to contact the private insurance companies prior to providing the AAA screening to verify coverage for their individual patients.

Payment Information

The following chart provides payment information that is based on the national unadjusted Medicare physician fee schedule for the ultrasound services discussed in this guide Payment will vary by geographic region. Payment rates shown in the attached chart reflect DRA-imposed payment for services that are subject to the cap. Use the column entitled "Global Payment" to estimate reimbursement for services in the physician office setting.

Use the "Professional Payment" column to estimate reimbursement to the physician for services provided in facility settings.

Ambulatory Payment Classification (APC) codes and payments are used by Medicare to reimburse facilities for the technical component under the Hospital Outpatient Prospective Payment System (OPPS). Payment rates are also based on the national unadjusted Hospital OPPS amounts. The actual payment will vary by location.

		Medicare Physician Fee Schedule — National Average*			Hospital Outpatient Prospective Payment System (OPPS)†	
CPT Code	CPT Code Descriptor	Global Payment	Professional Payment	Technical Payment	APC Code	APC Payment
G0389	Ultrasound, real time with image documentation for abdominal aortic aneurysm (AAA) screening.	$66.27	$29.37	$36.90	0266	$134.57

*Federal Register December 10, 2013 †Federal Register December 10, 2013.

Reimbursement rates shown for payment of services under the Physicians Fee Schedule reflect a conversion factor of $35.8228.

SonoSite FUJIFILM