

Coding and Reimbursement Digest

August 2024

Health Policy and Economics

[Coding the future](#)

[The lifesaving cancer treatment I wish more people knew about](#)

[How to address the shortage of interventional radiologists](#)

[Carrier Advocacy Letter Survey](#)

Thank you for taking the time to complete our survey regarding the Carrier Advocacy letters. Your feedback is invaluable in helping us enhance our services and better support our members. If you have any further thoughts or have not received the survey but used a letter, please contact us at Economics@sirweb.org. We appreciate your input and commitment!

Link to survey: <https://www.surveymonkey.com/r/BCTJKS6>

[SIR submits comments to the 2025 MPFS proposed rule](#)

On Sept. 5, the Society of Interventional Radiology (SIR) submitted a comment letter to the proposed **2025 Medicare physician fee schedule** (MPFS) rule. SIR commented on the Centers for Medicare and Medicaid Services (CMS) proposed decrease of 2.93% in the conversion factor (CF) for CY 2025. The CF affects all Relative Value Units (RVUs), including physician work, practice expense, and malpractice RVUs.

In addition, SIR commented on the proposed aggregate reduction of 3% in interventional radiology aggregate allowable charges. If the proposed cuts are finalized, the combined impact would be an approximate 6% decrease in reimbursement for IR services performed in the office/non-facility setting (e.g., office-based labs) and a 3% decrease for IR services performed in the facility setting (e.g., hospital-based practices). At the individual code level, IR will see decreases as high as 3% in reimbursement for procedures treating peripheral arterial disease (PAD), with similar reductions for minimally invasive, image-guided treatments for end-stage renal disease and cancer. [SIR comment letter](#).

[Inpatient Prospective Payment Systems \(IPPS\) final rule FY 2025](#)

On Aug 1, 2024, the final fiscal year (FY) 2025 rule for the inpatient prospective payment systems (IPPS) was released. The final rule will take effect on Oct 1, 2024.

The complete rule can be accessed at the following link: [here](#). CMS is finalizing an increase in payment rates for hospitals that have successfully participated in the Hospital Inpatient Quality Reporting (IQR) Program and are meaningful electronic health record (EHR) users by approximately 2.9%. This is reflected in the projected hospital market basket update of 3.4% and a 0.5% reduction of the productivity adjustment. If hospitals fail to successfully participate in the report to the IQR program and/or are not meaningful EHR users, their payment update will be decreased. SIR's economic steering committee provides a summary below. View SIR summary [here](#)



Health policy actions

- [Comment Letters](#)
- [SIR FY 2025 IPPS FR summary](#)
- [SIR MPFS PR CY 2025 summary](#)
- [SIR MPFS PR CY 2025 impact analysis](#)
- [SIR HOPPS CY 2025 summary](#)
- [SIR HOPPS CY 2025 impact analysis](#)

IR books and resources

- [IR Coding Update book and charge sheets](#)
- [2024 Navigator® Interventional Radiology Procedures](#)
- [2024 Navigator® Evaluation and Management Services for Radiology](#)
- [IR Common Missed Coding Revenue](#)

IR billing and coding courses

- [2023 SIR Revenue Cycle Management course](#)
- [2023 Coding Update On-demand](#)

IR Quarterly

- [Summer 2024 Coding for thoracic duct cannulation](#)
- [Spring 2024 Intra-procedural computed tomography](#)

SIR members, we are here to help

[Submit your coding question to our experts.](#)

[Submit your denied IR procedure.](#)