

Regarding: Ultrasound guidance for vascular access-76937 added to the NCCI policy manual

On Dec. 1, 2023, the Centers for Medicare and Medicaid Services (CMS) posted updates to the National Correct Coding Initiative (NCCI) policy manual used by Medicare Administrative Contractors (MACs) as a general reference tool that explains the rationale for NCCI edits. In Chapter IX, H, 12, for radiology service CPT® codes 70000–79999, a general policy statement regarding radiological, supervision and interpretation guidance was updated to include code 76937, which covers ultrasound guidance for vascular access. This update added 76937 to the list of codes that cannot be reported separately with primary procedure codes that have radiological supervision and interpretation included in them. The update is effective Jan. 1, 2024.

SIR advocated on behalf of our membership to dispute this update. The following information is the feedback SIR received from CMS and the NCCI program:

- **CMS evaluated SIR’s comments and the information provided to them and decided to remove 76937 from the listed examples in Chapter IX.** CMS considers all feedback received and updates the NCCI Policy Manual once per year. While the reversion will not be in print until the 2025 NCCI Policy Manual, it has been acknowledged and should not affect policy or coding decisions going forward.
- **There are no new or proposed new NCCI edits with 76937.** 76937 is a Type 2 add-on code with primary codes determined by MACs. Questions regarding specific claims or contractor-defined primary codes should be addressed to your claims processing contractor (e.g., your Part A or B MAC or state Medicaid Agency).
- The NCCI program provides general information to the public regarding the NCCI program and edits. However, it does not provide specific billing or coding advice to providers/suppliers. If the issue you are having applies to other government and private insurers who voluntarily choose to implement NCCI edits, CMS does not have control over how they apply NCCI edits. Questions regarding specific claims (e.g., specific scenarios) should be addressed to your payor or your claims processing contractor (e.g., your Part A or B MAC or state Medicaid Agency).

CPT® Code reference

76937—Ultrasound guidance for vascular access requiring ultrasound evaluation of potential access sites, documentation of selected vessel patency, concurrent realtime ultrasound visualization of vascular needle entry, with permanent recording and reporting (List separately in addition to code for primary procedure)

Medicare NCCI Policy Manual: <https://www.cms.gov/files/document/medicare-ncci-policy-manual-2024-chapter-9.pdf>