

PORTABLE X-RAY EQUIPMENT TRANSPORTATION

Scope			
This policy applies to:			
☑ Kaiser PermanenteHealth Plan ofWashington		ton	
□ Commercial	⊠ Medicare	☐ Medicaid	
Policy	Origi	Original Effective Date: 07/01/2023	

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not reimburse the transportation of portable x-ray equipment when billed for more than one person, (identified by HCPCS code R0075) unless it is billed with one of the required modifiers (UN, UP, UQ, UR, US).

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines.

Modifier	Description	Payment Calculation
UN	Two patients served	Divided by 2
UP	Three patients served	Divided by 3
UQ	Four patients served	Divided by 4
UR	Five patients served	Divided by 5
US	Six or more patients served	Divided by 6

Policy Definitions

Not applicable

Prerequisite(s)

Not applicable

References

<u>Medicare Claims Processing Manual</u> Chapter 13 – Radiology Services and Other Diagnostic Procedures Section 90.3 Transportation Component (HCPCS Codes R0070 – R0076)

Frequently Asked Questions

Q1: Provider submits a claim with R0075 without a modifier. Will the claim be paid?

A1: No. According to CMS guidelines, R0075 must be billed with appropriate modifier.

Q2: Transportation of portable x-ray services are only being provided for one patient, can R0075 be used?

A2: No. Transportation of portable x-ray services for one patient should be billed using R0070 HCPCS code.

Revision History

02/08/2023 – New policy

Note: This information is intended to serve only as a <u>general</u> reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.