

Carotid Imaging Reports

Coding Specifications

Codes required to document patient has a diagnosis of ischemic stroke or transient ischemic attack (TIA) and a procedure for carotid imaging occurred:

A line item ICD-9-CM diagnosis code for ischemic stroke or TIA and a CPT procedure code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

Ischemic stroke or TIA line item ICD-9-CM diagnosis codes

- 433.01, 433.11, 433.21, 433.31, 433.81, 433.91 (occlusion and stenosis of cerebral arteries),
- 434.01, 434.11, 434.91, (occlusion of cerebral arteries),
- 435.0, 435.1, 435.2, 435.3, 435.8, 435.9, (transient cerebral ischemia),

AND

CPT procedure codes for carotid imaging

- 70498, 70547, 70548, 70549, 75660, 75662, 75665, 75671, 75676, 75680, 93880, 93882

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 3100F:** Carotid image study report includes direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement
- **CPT II 3100F-1P:** Documentation of medical reason(s) for not including direct or indirect reference to measurements of distal internal carotid diameter
- **CPT II 3100F-8P:** Carotid image study report did not include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement, reason not otherwise specified

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