

ASTRO Update on Aetna Image Guidance Decision

Aetna's Oncology Solutions Team has responded to ASTRO's comment letter regarding [CT Image Guidance Related to IMRT Planning and Treatment Delivery](#) and ASTRO's [Coding Guidance](#) on the matter. Aetna stated that per CPT, it is more appropriate to bill 77387-26 instead of 77014. However, when 77387 (Guidance for localization of target volume for delivery of radiation treatment delivery, includes intrafraction tracking, when performed) was created in 2015, it did not receive an assigned reimbursement value in the Medicare Physician Fee Schedule. As a result, 77387 is carrier priced. Therefore, before billing 77387-26 in place of 77014, practices may consider taking the following steps:

1. Contact Aetna to request a 2018 fee schedule for your practice's contracted services.
2. Determine the variance, if any, between Aetna's 2018 fee for 77387 and the practice's average reimbursement for guidance services in 2017. This average reimbursement may be determined by calculating a weighted average of all payments for CPT codes 77387, 77014, G6001, G6002 and G6017 billed during 2017, according to the relative utilization of each guidance service. Other methods may also be used to compare anticipated 2018 revenues against 2017 historical payments.
3. If your practice deems that the variance is significant, contact Aetna's contracting team to open negotiations for corrective pricing of guidance services. Be sure to consult your practice's provider agreement with Aetna and confirm your negotiation rights as allowed by the agreement.

ASTRO will continue to urge Aetna to recognize 77014, G6001, G6002 and G6017. As more information becomes available we will share it with ASTRO members.

Current as of January 16, 2018.