

[Practice Name and Address]

Date

UnitedHealthcare
Claims Reconsideration
9900 Bren Road
East Minnetonka, Minnesota 55343

Re: **Plan ID#**

Claim #:

Dear Sir/Madam:

I am writing to follow up on denied claims **[insert relevant claims numbers]**. These claims include Computed Tomography guidance (CT Image guidance) with the delivery of Intensity Modulated Radiation Therapy (IMRT). Our practice is aware that on November 20, 2017 UnitedHealthcare updated their IMRT policy to state the following:

“Q: When will UnitedHealthcare consider image guidance (CPT 77014) for separate reimbursement after an IMRT plan (77301) has been executed?

A: In alignment with ASTRO, image guidance may be separately reimbursed even after IMRT planning when done in conjunction with image-guided radiation therapy (IGRT), either G6015-G6016 or 77385-77386.

In the freestanding office setting, the physician reports the correct IMRT code, either G6015-G6016 or 77385-77386. If reporting 77385 or 77386, the physician reports only the PC of IGRT by attaching the -26 modifier to one of the following codes: G6001, G6002, 77014, or 77387 depending on the modality used to perform the IGRT services. If reporting G6015 or G6016, then the physician reports the appropriate IGRT code as a global charge.

In the hospital setting, the hospital reports the correct IMRT code, and the physician reports the PC of IGRT. The physician may attach the -26 modifier to one of the following codes: G6001, G6002, 77014 or 77387 depending on the modality used to perform the IGRT services.”

Despite this update, our practice continues to receive denials for CT image guidance with IMRT treatment delivery. Per your updated IMRT policy, we request that UnitedHealthcare remit payment for **this/these** claims.

Thank you for your prompt attention to this matter. Please contact **[staff name]** at **[telephone number]** in our office should you have any questions.

Sincerely,

[Physician Name]

CC: American Society for Radiation Oncology

Enclosed: ***[Claims]***

UnitedHealthcare Intensity Modulated Radiation Therapy Policy