

# Physics - Radiation Oncology Coding Standard

CPT Codes: 77336, 77370, 77790

- Original Date: April 2011
- Last Review Date: November 2020
- Last Revised Date: November 2015
- Implementation Date: January 2021

# Continuing Medical Physics (77336)

Technical Only

**77336** Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy

This is commonly referred to as "weekly physics". It is billed for the quality assurance of dose delivery from the machine or source, as well as review of the charts and documentation of dosimetry plans, calculations and other items such elapsed days, cumulative dose and other entries within the patient's chart. Essentially, the continuing medical physics service assures the physician's prescription and intent is delivered accurately.

Continuing medical physics is billable once per five fraction period. If there are an additional 3 - 4 treatment fractions remaining at the end of treatment beyond the last collection of 5 treatments, an additional CPT<sup>®</sup> code 77336 may be submitted for payment. For example, a patient receiving 27 treatments may have five continuing physics charges and a patient receiving 28 fractions of treatment may have six charges of continuing physics, if each subset has had physics review and documentation somewhere within each five-fraction period. Continuing medical physics chart checks are billable for the last 3-5 fraction period when those checks occur during the 3-5 fraction period. A review of the medical record by the medical physicist occurring well after the treatment has been finalized is not billable. Continuing medical physics is also billable for complete courses of therapy consisting of 1-2 fractions of therapy. This may be the case for SRS and other hypofractionated courses, except single fraction brachytherapy.

# Standards for CPT<sup>®</sup> 77336

CPT<sup>®</sup> 77336 is billable only one time per five fractions of treatment. At least three fractions of therapy must occur at the end of the course for an additional continuing physics charge to be billed. CPT<sup>®</sup> 77336 will be approved at a quantity equal to the number of authorized fractions divided by 5, rounded to the nearest multiple of 5.

• CPT<sup>®</sup> 77336 is billable only one time for courses of therapy consisting of 1-2 fractions. For short courses of therapy (1 to 2 fractions of therapy total), CPT<sup>®</sup> 77336 will be approved as a quantity of one (1).

# Special Physics Consult (77370)

Technical Only

#### 77370 Special medical radiation physics consultation

CPT<sup>®</sup> 77370 is utilized for situations or scenarios where the physician requests a qualified medical physicist's expertise for a specific reason or scenario for a patient undergoing or about to undergo radiotherapy. Utilization with brachytherapy, stereotactic radiosurgery, stereotactic body radiotherapy courses, and fusion of image data sets would only include those instances where treatment planning is 3D and a specific request to evaluate a clinical scenario is needed and the qualified medical physicist is the only one with the expertise to answer and provide all of the necessary work to complete the request. For an IMRT planned course, only when there is a specific clinical scenario outside of the IMRT treatment planning in which the qualified medical physicist is requested to evaluate would 77370 be billable. CPT<sup>®</sup> 77370 is NOT to be utilized for a treatment planning summary or other services, which are defined by an established CPT<sup>®</sup> code and are reimbursed by that code. Dosimetry treatment planning and its summary are reimbursed with its respective planning CPT<sup>®</sup> code. Another example is CPT<sup>®</sup> 77336 in which routine quality assurance and verification of planning techniques is performed.

IMRT QA is a necessary and required function of IMRT planning (CPT<sup>®</sup> 77301) and reimbursement for IMRT QA is included in CPT<sup>®</sup> 77301. Therefore, IMRT QA is NOT separately billable as a special physics consult. There may be instances in which a special physics consultation is medically necessary for a patient receiving IMRT but this should not be a routine occurrence.

In all instances when CPT<sup>®</sup> 77370 is requested, documentation must be provided in the medical record documenting the specific request and rationale from the physician, a report of the work performed and supplied by the medical physicist to the physician and approval of the document by the physician acknowledging the results.

# Standards for CPT<sup>®</sup> 77370

- CPT<sup>®</sup> 77370 is allowed one time per course of therapy. Maximum quantity of special physics consultation (CPT<sup>®</sup> 77370) allowed per course of treatment is one (1).
- A special physics consultation (CPT<sup>®</sup> 77370) is NOT approved for treatment planning summaries, IMRT QA, secondary monitor unit calculations, routine verification of dose distribution, electron cutout measurements, in-vivo dosimetry, deep inspiration breath hold (DIBH), or services defined by another CPT<sup>®</sup> code.
- A special physics consultation (CPT<sup>®</sup> 77370) is approved for complex beam arrangement in the treatment plan of photon and electron ports (does not include breast photon course with electron breast boost), evaluation of special devices such as pacemaker/defibrillator/prosthesis



within close proximity to treatment current fields (including abutting or overlapping) previous radiation fields, evaluation for special shielding or potential doses to fetus of a pregnant patient, issues regarding corrective measures to solve a discrepancy and/or an error, radioimmunotherapy when combined with external beam treatment, and SIRT.

- Special physics consultation (CPT<sup>®</sup> 77370) services must be requested by the provider.
- When a special physics consultation is requested in conjunction will all other forms of radiation therapy, patient specific medical necessity rationale is required. CPT<sup>®</sup> 77370 for the approved scenarios requires ALL of the following criteria are met:
  - The rationale is supplied by the provider
  - CPT<sup>®</sup> 77370 has not been previously authorized within the same course of therapy
  - The rationale explains the need for a medical physicist's expertise, which is NOT related to a treatment-planning summary, IMRT QA or services described by another CPT<sup>®</sup> code.
- Requests not identified as meeting the criteria outlined above will require a peer-to-peer physician review.

# Supervision and Handling (77790)

Professional and Technical

**77790** Supervision, handling and loading of a radiation source.

Supervision and handling represent the handling and loading of the actual radioactive source throughout the procedure. Handling and loading is billable for LDR sources and radiopharmaceutical agents placed by the provider but not for HDR treatments because the after loader handles and loads the sources.

# Standards for CPT<sup>®</sup> 77790

• One (1) CPT<sup>®</sup> 77790 is allowed per LDR or therapeutic radiopharmaceutical application, except for those courses or scenarios where CPT<sup>®</sup> 77790 is considered bundled with the treatment delivery such as CPT<sup>®</sup> 77750, 77761-77763, 77778, 77789, and 79101-79445.

# Sources:

The NIA Coding Standards are created and maintained by NIA based on our understanding of:

- American Medical Association (AMA) HCPCS definitions and intended use as noted within the AMA's published products. CPT<sup>®</sup> five-digit codes, nomenclature and other data are copyright 2022 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values or related listings are included in CPT<sup>®</sup>. AMA does not directly or indirectly practice medicine or dispense medical services. AMA assumes no liability for the data contained herein or not contained herein.
- Local and National Medicare Coverage Determinations (LCDs and NCDs)
- Office of the Inspector General (OIG) compliance standards
- National Correct Coding Initiative (NCCI) edits
- Centers for Medicare and Medicaid Services (CMS) Internet Only Manuals (IOM).



NIA incorporated accepted standards of care in radiation oncology and is based on review of sources such as the American Society of Therapeutic Radiation Oncology (ASTRO) model policies and coding guidelines.

