

**Quality ID #145: Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy**  
– National Quality Strategy Domain: Patient Safety  
– Meaningful Measure Area: Appropriate Use of Healthcare

**2022 COLLECTION TYPE:**  
**MEDICARE PART B CLAIMS**

**MEASURE TYPE:**  
Process – High Priority

**DESCRIPTION:**  
Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available).

**INSTRUCTIONS:**  
This measure is to be submitted **each time** fluoroscopy is performed in a hospital or outpatient setting during the performance period. There is no diagnosis associated with this measure. It is anticipated that Merit-based Incentive Payment System (MIPS) eligible clinicians providing the services for procedures using fluoroscopy will submit this measure.

**Measure Submission Type:**  
Measure data may be submitted by individual MIPS eligible clinicians using Medicare Part B claims. The listed denominator criteria are used to identify the intended patient population. The numerator quality data codes included in this specification are used to submit the quality actions allowed by the measure on the claim form(s). All measure-specific coding should be submitted on the claim(s) representing the denominator eligible encounter and selected numerator option.

**DENOMINATOR:**  
All final reports for procedures using fluoroscopy

***DENOMINATOR NOTE:*** *The final report of the fluoroscopy procedure or fluoroscopy guided procedure includes the final radiology report, definitive operative report, or other definitive procedure report that is communicated to the referring physician, primary care physician, follow-up care team, and/or maintained in the medical record of the performing physician outside the EHR or other medical record of the facility in which the procedure is performed.*

*\*Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services will not be counted in the denominator population for Medicare Part B claims measures.*

**Denominator Criteria (Eligible Cases):**

**Patient procedure during the performance period (CPT or HCPCS):** 0075T, 0202T, 0234T, 0235T, 0236T, 0237T, 0238T, 0338T, 0339T, 22526\*, 25606, 25651, 26608, 26650, 26676, 26706, 26727, 27235, 27244, 27245, 27509, 27756, 27759, 28406, 28436, 28456, 28476, 33477, 33741, 33745, 33897, 34703, 34704, 34705, 34706, 34718, 34841, 34842, 34843, 34844, 34845, 34846, 34847, 34848, 36100, 36221, 36222, 36223, 36224, 36225, 36226, 36251, 36252, 36253, 36254, 36598, 36901, 36902, 36903, 36904, 36905, 36906, 37182, 37183, 37184, 37187, 37188, 37211, 37212, 37213, 37214, 37215, 37216\*, 37217, 37218, 37220, 37221, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 37236, 37238, 37241, 37242, 37243, 37244, 37246, 37248, 43260, 43261, 43262, 43263, 43264, 43265, 43274, 43275, 43276, 43277, 43278, 43752, 47537, 49440, 49441, 49442, 49446, 49450, 49451, 49452, 49460, 50382, 50384, 50385, 50386, 50387, 50389, 50590, 61623, 61630, 61635, 61640\*, 61645, 61650, 62263, 62264, 62280, 62281, 62282, 62302, 62303, 62304, 62305, 64610, 70010,

70015, 70170, 70332, 70370, 70371, 70390, 72240, 72255, 72265, 72270, 72285, 72295, 73040, 73085, 73115, 73525, 73580, 73615, 74190, 74210, 74220, 74221, 74235, 74240, 74246, 74251, 74270, 74280, 74283, 74290, 74300, 74328, 74329, 74330, 74340, 74355, 74360, 74363, 74425, 74440, 74445, 74450, 74455, 74470, 74485, 74740, 74742, 75600, 75605, 75625, 75630, 75705, 75710, 75716, 75726, 75731, 75733, 75736, 75741, 75743, 75746, 75756, 75801, 75803, 75805, 75807, 75810, 75820, 75822, 75825, 75827, 75831, 75833, 75840, 75842, 75860, 75870, 75872, 75880, 75885, 75887, 75889, 75891, 75893, 75894, 75898, 75901, 75902, 75956, 75957, 75958, 75959, 75970, 76000, 76080, 76496, 77001, 77002, 77003, 92611, 93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93503, 93505, 93580, 93581, 93583, 93593, 93594, 93595, 93596, 93597, G0106, G0120, G0122\*

**WITHOUT**

**Telehealth Modifier:** GQ, GT, 95, POS 02

**NUMERATOR:**

Final reports for procedures using fluoroscopy that include radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)

**Definition:**

**Radiation exposure indices** - For the purposes of this measure, “radiation exposure indices” should, if possible, include at least one of the following:

1. Skin dose mapping
2. Peak skin dose (PSD)
3. Reference air kerma (Ka,r)
4. Kerma-area product (P<sub>Ka</sub>) or Dose area product (DAP)

When reporting indices the report must clearly state what radiation quantity is being submitted, that is only reporting dose in mGy is insufficient. PSD in mGy is very different from Ka,r in mGy. As an example, PSD = 10 mGy or Ka,r = 10 mGy.

If the fluoroscopic equipment does not automatically provide any of the above radiation exposure indices, exposure time and the number of fluorographic images taken during the procedure may be used.

**Numerator Instructions:**

**Documentation:** Information populating the final report may reside in a dedicated field in the electronic health record (EHR) or picture archiving and communication system (PACS), however fluoroscopy exposure dose or time should be included in the final report in order to be readily accessible in all circumstances.

**NUMERATOR NOTE:** *In interventional radiology procedures with runs, dose indices are displayed on the console and in the radiation dose structured report (RDSR). For instruments without dose indicator measurement capability, report the overall fluoroscopic time and the number of runs done where additional exposure (fluoroscopic or x-ray) occurs.*

*“Last image hold” is part of the fluoroscopic exam and would be included in the total fluoroscopic time. No additional radiation is involved, so the image would not be counted.*

*Count images where the patient received or potentially received any exposure, fluorographic or radiographic (x-ray).*

**Numerator Quality Data Coding Options:**

**Radiation Exposure indices, OR Exposure Time and Number of Fluorographic Images (if radiation exposure indices are not available) Documented in Final Procedure Report**

**Performance Met: G9500:**

Radiation exposure indices, OR exposure time and number of fluorographic images in final report for

procedures using fluoroscopy, documented

**OR**

**Radiation Exposure indices, OR Exposure Time and Number of Fluorographic Images (if radiation exposure indices are not available) not Documented in Final Procedure Report, Reason not Given**

***Performance Not Met: G9501:***

Radiation exposure indices, OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given

**RATIONALE:**

Increasing physician awareness of patient exposure to radiation is an important step towards reducing the potentially harmful effects of radiation as a result of imaging studies. One study by Darling et al found a significant correlation between documentation of fluoroscopy time by the radiologist in the dictated radiology report and reduced overall fluoroscopy time. Additional studies demonstrate that providing physicians with feedback regarding their fluoroscopy time leads to a reduction in average fluoroscopy times.

**CLINICAL RECOMMENDATION STATEMENTS:**

All available radiation dose data should be recorded in the patient's medical record. If cumulative air kerma or air kerma-area-product data are not available, the fluoroscopic exposure time and the number of acquired images (radiography, cine, or digital subtraction angiography) should be recorded in the patient's medical record. (ACR, 2013)

For the present, and for the purpose of this guideline, adequate recording of dose metrics is defined as documentation in the patient record of at least one of the following for all interventional procedures requiring fluoroscopy (in descending order of desirability): skin dose mapping, PSD,  $Ka,r$ ,  $P_{KA}$ , and fluoroscopic time/number of fluorographic images. Note, however, that this is adequate recording; this document recommends recording of all available dose metrics. (SIR, 2012)

[ACR] should now encourage practices to record actual fluoroscopy time for all fluoroscopic procedures. The fluoroscopy time for various procedures (e.g., upper gastrointestinal, pediatric voiding cystourethrography, diagnostic angiography) should then be compared with benchmark figures. More complete patient radiation dose data should be recorded for all high-dose interventional procedures, such as embolizations, transjugular intrahepatic portosystemic shunts, and arterial angioplasty or stent placement anywhere in the abdomen and pelvis. (Amis et al., ACR, 2007)

Measure & record patient radiation dose:

- Record fluoroscopy time
- Record available measures - DAP (dose area product), cumulative dose, skin dose (NCI, 2005)

$P_{KA}$ , also known as kerma-area product (KAP) or dose-area product (DAP), is the integral of air kerma (the energy extracted from an x-ray beam per unit mass of air in a small irradiated air volume; for diagnostic x-rays, the dose delivered to that volume of air) across the entire x-ray beam emitted from the x-ray tube. It is a surrogate measure of the amount of energy delivered to the patient, and thus a reasonable indicator of the risk of stochastic effects. The symbol  $P_{KA}$  is the notation recommended by the International Commission on Radiation Units and Measurements (ICRU, 2012).

**COPYRIGHT:**

The Measure is not a clinical guideline, does not establish a standard of medical care, and has not been tested for all potential applications.

The Measure, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measure for commercial gain, or incorporation of the Measure into a product or service that is sold, licensed or distributed for commercial gain.

Commercial uses of the Measure require a license agreement between the user and the American College of Radiology (ACR). Neither ACR nor its members shall be responsible for any use of the Measure.

The PCPI's and AMA's significant past efforts and contributions to the development and updating of the Measures are acknowledged. ACR is solely responsible for the review and enhancement ("Maintenance") of the Measure as of August 1, 2020.

ACR encourages use of the Measure by other health care professionals, where appropriate.

**THE MEASURE AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.**

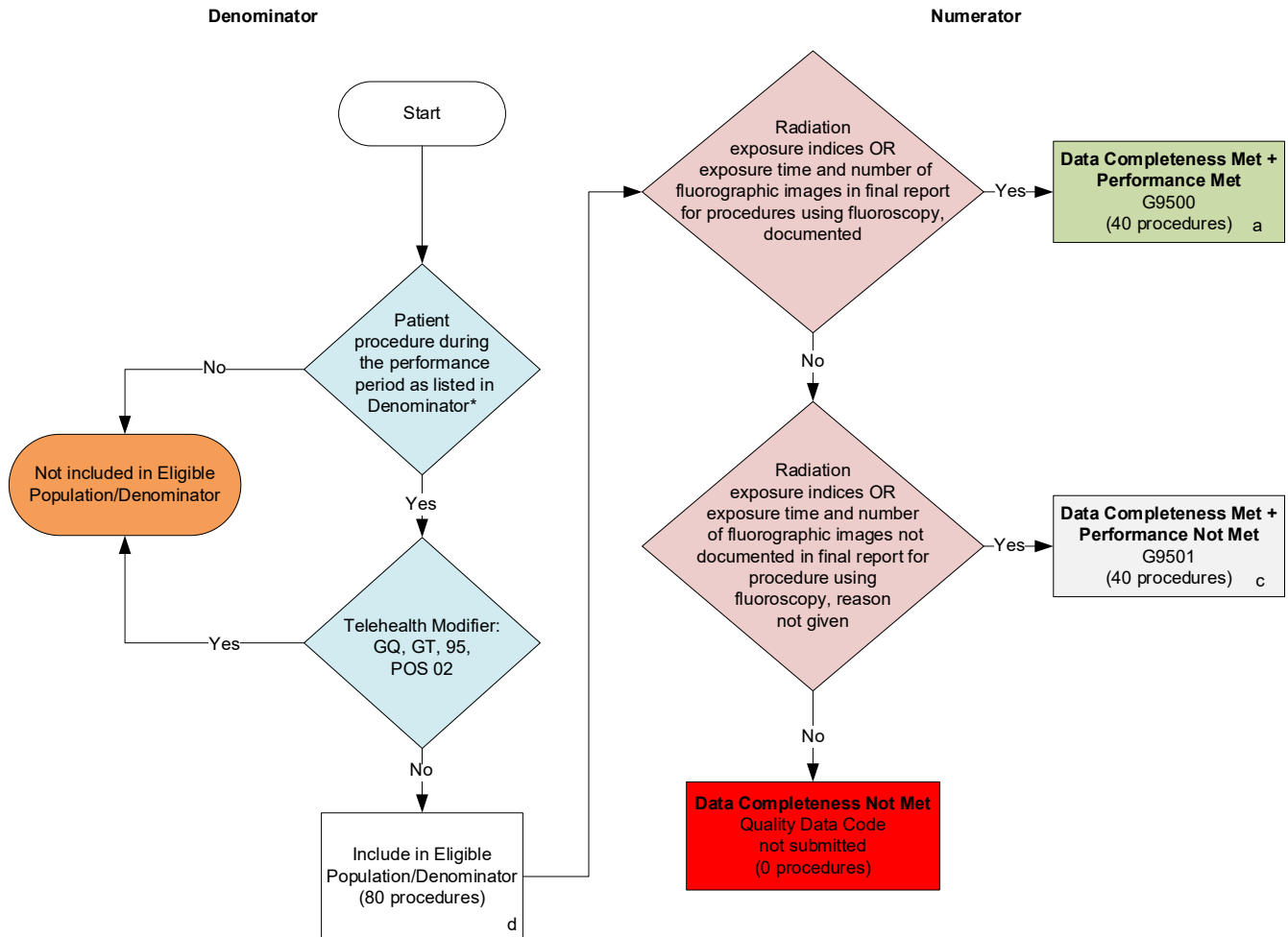
©2021 American College of Radiology. All Rights Reserved. Applicable FARS/DFARS Restrictions Apply to Government Use.

Limited proprietary coding may be contained in the Measure specifications for convenience. A license agreement must be entered prior to a third party's use of Current Procedural Terminology (CPT®) or other proprietary code set contained in the Measures. Any other use of CPT or other coding by the third party is strictly prohibited. ACR and its members disclaim all liability for use or accuracy of any CPT or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2004-2021 American Medical Association. LOINC® copyright 2004-2021 Regenstrief Institute, Inc. SNOMED CLINICAL TERMS (SNOMED CT®) copyright 2004-2021. The International Health Terminology Standards Development Organisation (IHTSDO). ICD-10 is copyright 2021 World Health Organization. All Rights Reserved.

## 2022 Medicare Part B Claims Flow for Quality ID #145: Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*



### SAMPLE CALCULATIONS

**Data Completeness=**

$$\frac{\text{Performance Met (a=40 procedures) + Performance Not Met (c=40 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{80 \text{ procedures}}{80 \text{ procedures}} = 100.00\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=40 procedures)}}{\text{Data Completeness Numerator (80 procedures)}} = \frac{40 \text{ procedures}}{80 \text{ procedures}} = 50.00\%$$

\*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

CPT only copyright 2021 American Medical Association. All rights reserved. The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

v6

**2022 Medicare Part B Claims Flow Narrative for Quality ID #145:  
Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for  
Procedures Using Fluoroscopy**

**Disclaimer:** Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *Patient procedure during the performance period as listed in Denominator\**:
  - a. If *Patient procedure during the performance period as listed in Denominator\** equals No, do not include in Eligible Population/Denominator. Stop processing.
  - b. If *Patient procedure during the performance period as listed in Denominator\** equals Yes, proceed to check *Telehealth Modifier*.
3. Check *Telehealth Modifier*:
  - a. If *Telehealth Modifier* equals Yes, do not include in Eligible Population/Denominator. Stop processing.
  - b. If *Telehealth Modifier* equals No, include in Eligible Population/Denominator.
4. Denominator Population:
  - Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
5. Start Numerator
6. Check *Radiation exposure indices OR exposure time and number of fluorographic images in final report for procedures using fluoroscopy, documented*:
  - a. If *Radiation exposure indices OR exposure time and number of fluorographic images in final report for procedures using fluoroscopy, documented* equals Yes, include in *Data Completeness Met and Performance Met*.
    - *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 procedures in the Sample Calculation.
  - b. If *Radiation exposure indices OR exposure time and number of fluorographic images in final report for procedures using fluoroscopy, documented* equals No, proceed to check *Radiation exposure indices OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given*.
7. Check *Radiation exposure indices OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given*:
  - a. If *Radiation exposure indices OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given* equals Yes, include in *Data Completeness Met and Performance Not Met*.

- *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 40 procedures in the Sample Calculation.
- b. If *Radiation exposure indices OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given* equals No, proceed to check *Data Completeness Not Met*.
8. Check *Data Completeness Not Met*:
- a. If *Data Completeness Not Met*, the Quality Data Code was not submitted. 0 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

### **Sample Calculations**

Data Completeness equals Performance Met (a equals 40 procedures) plus Performance Not Met (c equals 40 procedures) divided by Eligible Population / Denominator (d equals 80 procedures). All equals 80 procedures divided by 80 procedures. All equals 100 percent.

Performance Rate equals Performance Met (a equals 40 procedures) divided by Data Completeness Numerator (80 procedures). All equals 40 procedures divided by 80 procedures. All equals 50 percent.

\*See the posted measure specification for specific coding and instructions to submit this measure. This measure is to be submitted each time fluoroscopy is performed in a hospital or outpatient setting during the performance period (1/1/2020 thru 12/31/2020).

NOTE: Submission Frequency: Procedure

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.