Vertebral Fracture Screen Gets Medicare Approval

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Medicare has agreed to reimburse for vertebral fracture assessment by dual-energy x-ray absorptiometry using the newly approved CPT code 76077, according to the International Society for Clinical Densitometry.

"Vertebral fractures are a powerful barometer in predicting future bone fragility in a patient," said E. Michael Lewiecki, M.D., osteoporosis director of the New Mexico Clinical Research & Osteoporosis Center in Albuquerque, and president of the ISCD. "The new code gives physicians the opportunity to accurately evaluate a patient's future fracture risk and therefore improve the accuracy of the diagnosis."

Previous vertebral fracture is a major risk factor for future fragility fractures. "Vertebral fractures are present in about one-third of women over age 65 and are highly related to increased fracture risk at the spine and hip independent of a patient's bone density," according to Hologic Inc., one of two manufacturers of the dual-energy x-ray absorptiometry (DXA) systems covered under the new code. Women with such fractures also have less ability to perform daily activities and a significantly higher morbidity, the company added.

Vertebral fracture assessment (VFA) also is a more sensitive measure of identifying osteoporosis than is bone mineral density analysis.

"Based upon BMD alone and the central site measured, 11%-18% of women with vertebral fractures would have been classified as normal," according to Vance J. Bray, M.D., of the Denver Arthritis Clinic, in a report in the ISCD newsletter, Osteoflash. Such vertebral deformities occur in approximately 11 per 100 women aged 50-59 years and in 54 per 100 women aged 80 years and older, according to Dr. Bray.

The CPT is a continually updated listing of descriptive terms and identifying codes developed and maintained by the American Medical Association. Physicians use CPT codes to refer to (and to report providing) medical services and procedures.

The CPT is the most widely accepted nomenclature used for service claims under private and public health insurance programs. Implementation of a new code is recognition of the importance of a new procedure and a vehicle for its inclusion in insurance claims for reimbursement.

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The ISCD testified to the AMA about the value of this technique to facilitate approval of the new code.

The Health Insurance Portability and Accountability Act of 1996 requires that the most current code be used in all covered health care transactions and the new code must be used for dates of service starting Jan. 1, 2005.

The Centers for Medicare and Medicaid Services reimbursement for VFA is set for a national average of about $40, according to Dr. Bray.

Reimbursement for this new imaging technique recognizes its importance, according to the ISCD. "Health care providers will be able to use VFA to select those patients who are at the highest risk for fractures and structure treatment plans to be most beneficial and cost effective," the organization said.

ISCD is developing educational programs to teach physicians high-quality acquisition and interpretation of vertebral fracture assessment using DXA technology.

In February 2005, the ISCD annual meeting in New Orleans will offer an updated bone densitometry class that will incorporate one-hour VFA introductory lectures for clinicians and technologists. Criteria for the performance of VFA are being developed by an ISCD task force and will be discussed at the 2005 ISCD Position Development Conference in Vancouver, B.C., in July, according to Dr. Bray.

DXA has been called the "gold standard" of analysis for measurement of bone mineral density and will continue to be covered by CPT code 76075 for that purpose. ■