

DIAGNOSTIC RADIOLOGY

Code		F
<u>HEAD AND NECK</u>		
Skull		
X001	- four views	32.20
X009	- five or more views	40.11
X003	Sella turcica (when skull not examined)	16.05
Facial bones		
X004	-three views	23.37
Nose		
X005	- two views	16.05
Mandible		
X006	- three views (unilateral or bilateral)	23.37
X012	- four or more views	32.20
X007	Temporomandibular joints – four views including open and closed mouth views	23.37
Sinuses		
X008	- three views	23.37
Mastoids		
X010	- bilateral – six views	30.85
X011	Internal auditory meati (when skull not examined)	23.37
Note: Dental x-rays of the teeth are not an insured benefit.		
X016	Eye, for foreign body	15.99
X017	Eye, for localization, additional	16.48
X018	Optic foramina	18.15
X019	Salivary gland region	14.81
Neck for soft tissues		
X020	- two views	14.81
<u>SPINE AND PELVIS</u>		
Cervical spine		
X025	- two or three views	27.89
X202	- four or five views	35.97
X203	- six or more views	43.45
Thoracic spine		
X027	- two views	25.47
X204	- three or more	32.20

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<u>SPINE AND PELVIS (continued)</u>		
Lumbar or lumbosacral spine		
X028	- two or three views	27.89
X205	- four or five views	35.97
X206	- six or more views	43.45
Entire spine (scoliosis series)		
X032	- four views - orthoroentgenogram (3 foot film)	57.67
X033	- single view	23.37
X031	- two or more views	31.98
Sacrum and/or coccyx		
X034	- two views	25.79
X207	- three or more views	33.44
Sacro-iliac joints		
X035	- three or more views	23.37
X208	- four or more views	31.18
Pelvis and/or hip(s)		
X036	- one view	16.05
X037	- two views (e.g. AP and frog view, both hips, or AP both hips plus lateral one hip)	29.88
X038	- three or more views (e.g. pelvis and sacro-iliac joints, or AP both hips plus lateral each hip)	34.35
<u>UPPER EXTREMITIES</u>		
Clavicle		
X045	- two views	16.05
X209	- three or more views	24.66
Acromioclavicular joints (bilateral) with or without weighted distraction		
X046	- two views	23.37
X210	- three or more views	31.88
Sternoclavicular joints (bilateral)		
X047	- two or three views	19.33
X211	- four or more views	27.57
Shoulder		
X048	- two views	19.33
X212	- three or more views	27.57
Scapula		
X049	- two views	19.33
X213	- three or more views	27.78

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<u>UPPER EXTREMITIES (continued)</u>		
Humerus including one joint		
X050	- two views	16.05
X214	- three or more views	24.50
Elbow		
X051	- two views	16.05
X215	- three or four views	24.66
X216	- five or more views	33.22
Forearm including one joint		
X052	- two views	16.05
X217	- three or more views	24.66
Wrist		
X053	- two or three views	16.05
X218	- four or more views	24.66
Hand		
X054	- two or three views	16.05
X219	- four or more views	24.66
Wrist and hand		
X055	- two or three views	23.37
X220	- four or more views	29.78
Finger or thumb		
X056	- two views	12.38
X221	- three or more views	16.05
<u>LOWER EXTREMITIES</u>		
Hip (unilateral)		
X060	- two or more views	25.58
Femur including one joint		
X063	- two views	16.05
X223	- three or more views	23.91
Knee including patella		
X065	- two views	16.05
X224	- three or four views	24.66
X225	- five or more views	33.22
Tibia and fibula including one joint		
X066	- two views	16.05
X226	- three or more views	24.66

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<u>LOWER EXTREMITIES (continued)</u>		
Ankle		
X067	- two or three views	16.05
X227	- four or more views	24.66
Calcaneus		
X068	- two views	16.05
X228	- three or more views	24.66
Foot		
X069	- two or three views	16.05
X229	- four or more views	24.66
Toe		
X072	- two views	12.38
X230	- three or more views	16.05
X064	Leg length studies (orthoroentgenogram)	23.37
<u>SKELETAL SURVEYS</u>		
Skeletal survey for bone age		
X057	- single film	16.05
X058	- two or more films or views	23.37
Other survey studies – e.g. rheumatoid, metabolic or metastatic		
X080	- single view	8.02
X081	- each additional film or view	8.02
<u>CHEST AND ABDOMEN</u>		
Chest		
X090	- single view	16.05
X091	- two views	23.58
X092	- three or more views	30.31
Note: Miniature chest film for survey purposes only is not an insured benefit.		
Ribs		
X039	- two or more view	19.33
Sternum		
X040	- two or more view	19.33
Thoracic inlet		
X096	- two or more view	16.05

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Code		F
<u>CHEST AND ABDOMEN (continued)</u>		
Abdomen		
X100	- single view	16.05
X101	- two or more views	24.55
<u>GASTROINTESTINAL TRACT</u>		
Palatopharyngeal analysis		
X105	- cine or videotape	31.77
Pharynx and oesophagus		
X106	- cine or videotape	31.77
X107	Oesophagus when X103, X104, X108 or X109 not claimed	28.75
Oesophagus, stomach and duodenum		
X108	- including survey film, if taken	49.86
X104	- double contrast, including survey film, if taken	52.23
X103	- double contrast, including survey film, if taken, and small bowel	65.64
X110	Hypotonic duodenogram	42.38
X109	Oesophagus, stomach and small bowel	63.64
Small bowel only		
X111	- when only examination performed during patient's visit	28.43
Colon		
X112	- barium enema including survey film, if taken	52.12
X113	- air contrast, primary or secondary, including survey films, if taken	66.01
Gallbladder		
X114	- one or multiple day examinations	32.25
X120	- one or multiple day examinations with preliminary plain film	42.86
X116	T-tube cholangiogram	23.37
X123	Operative pancreatogram or ERCP	23.37
<u>GENITOURINARY TRACT</u>		
X129	Retrograde pyelogram, unilateral or bilateral	23.37
X130	Intravenous pyelogram including preliminary film	53.47
X137	Cystogram (catheter)	25.68
X135	Cystourethrogram, stress or voiding (catheter)	29.61
X131	Cystourethrogram (non-catheter)	6.19
X191	Intestinal conduit examination or nephrostogram	23.37
X138	Percutaneous antegrade pyelogram	23.37
X139	Percutaneous nephrostogram	23.37

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<u>GENITOURINARY TRACT (continued)</u>		
X134	Retrograde urethrogram	19.33
X136	Vasogram	19.33
X141	Cavernosography	22.24
<u>OBSTETRICS AND GYNAECOLOGY</u>		
X147	Hysterosalpingogram	32.09
<u>FLUOROSCOPY – BY PHYSICIAN WITH OR WITHOUT SPOT FILMS</u>		
X195	Chest	9.96
X196	Skeleton	9.96
X197	Abdomen	9.96
X189	Fluoroscopic control of clinical procedures done by another physician per ¼ hour	7.86
<u>SPECIAL EXAMINATIONS</u>		
Abdominal, thoracic, cervical or cranial angiogram by catheterization		
	Using single films	
X179	- non-selective	31.88
X180	- selective (per vessel, to a maximum of 4)	41.94
	Using film changer, cine or multiformat camera	
X181	- non-selective	64.24
X182	- selective (per vessel, to a maximum of 4)	85.40
X140	- selective (5 or more vessels)	341.75
Carotid angiogram by direct puncture		
X160	- unilateral	52.66
X161	- bilateral	84.64
Peripheral angiogram		
X174	- unilateral	32.09
X175	- bilateral	42.38
X198	Splenoportogram	63.64
X199	Translumbar aortogram	63.64
Vertebral angiogram – direct puncture or retrograde brachial injection		
X132	- unilateral	52.66
X133	- bilateral	86.04
X156	Arthrogram, tenogram or bursogram	28.27
X200	- with fluoroscopy and complete positioning throughout by physician	39.52

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SPECIAL EXAMINATIONS (continued)		
Bronchogram		
X158	- unilateral	31.18
X159	- bilateral	41.35
X122	Cholangiogram, percutaneous trans-hepatic	31.77
BONE MINERAL DENSITY (BMD) MEASUREMENT		
Dual-energy X-Ray Absorptiometry (DXA) – by axial technique only		
Definition:		
For the purpose of second and subsequent testing,		
<p>“high risk patient” means a patient;</p> <ol style="list-style-type: none"> 1. at risk for accelerated bone loss (in the absence of other risk factors, patient age is deemed not to place a patient at high risk for accelerated bone loss); 2. with osteopenia or osteoporosis on any previous BMD testing; <p style="text-align: center;">or</p> <ol style="list-style-type: none"> 3. with bone loss in excess of 1% per year as demonstrated by previous BMD testing. 		
<p>“low risk patient” means a patient who is not a high risk patient</p>		
Definition/Required Elements of Service:		
BMD measurement by DXA is an insured service only when all the following conditions have been met:		
<ol style="list-style-type: none"> 1. the service is rendered for the prevention and management of osteoporosis or osteopenia; 2. when more than one site is measured, the sites include both hip and spine and where measurement of both hip and spine is not technically feasible the site measured consists of either hip or spine. 		
[Commentary:		
Measurement of hip and spine would be considered not technically feasible due to prosthesis or deformity.]		
Baseline Test		
X145	- one site	46.14
X146	- two or more sites	59.44
Second test - low risk patient		
X152	- one site	46.14
X153	- two or more sites	59.44
Subsequent test - low risk patient		
X142	- one site	46.14
X148	- two or more sites	59.44

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Code		F
BONE MINERAL DENSITY (BMD) MEASUREMENT (continued)		
Subsequent test - high risk patient		
X149	- one site	46.14
X155	- two or more sites	59.44
<p>Payment rules:</p> <ol style="list-style-type: none"> 1. Patients are limited to one baseline test (X145 or X146) in their lifetime. 2. Second test – low risk patient (X152/X153) is limited to a maximum of one test rendered not earlier than 36 months following the baseline test (X145/X146). 3. Subsequent test – low risk patient (X142/X148) is <i>not eligible for payment</i> when rendered earlier than 60 months following the second or any subsequent test. 4. Any combination of services described by X152 or X153 that were rendered to a patient between July 1, 2007, and April 1, 2008, for which claims were submitted and paid as insured services under the <i>Health Insurance Act</i> constitutes, a “second test – low risk patient” for the purpose of determining service maximums for a second or subsequent test – low risk patient, and is deemed to have been rendered on July 1, 2010. 5. Any service described by X152 or X153 rendered between April 1, 2008, and July 1, 2010, for which a claim was submitted and paid as an insured service under the <i>Health Insurance Act</i> constitutes a subsequent test – low risk patient for the purpose of determining service maximums for second or subsequent test – low risk patient and is deemed to have been rendered on July 1, 2010. 6. Subsequent test - high risk patients (X149/X155) is limited to a maximum of one test every 12 months unless the ordering physician obtains written prior authorization from a <i>medical consultant</i>. <p>[Commentary: Authorization will be dependent on the ordering physician demonstrating that the test is generally accepted as necessary for the patient under the circumstances.]</p> <p>[Commentary:</p> <ol style="list-style-type: none"> 1. Baseline, second test and subsequent tests should be ordered only in accordance with current practice guidelines. In those situations where testing is ordered on a particular patient for reasons that vary from the guidelines, the ordering physician should ensure that the patient’s medical record sufficiently explains the justification for the test in this particular case. 2. In the event a patient with a previous normal baseline test (X145/X146) or second test (X152/X153) or normal subsequent test – low risk patient (X142/X148) meets any of the criteria listed for high risk patients as stated above, the patient would be eligible for subsequent test – high risk patient services (X149/X155) subject to the restriction stated in payment rule #6. 3. The 2002 Clinical Practice Guidelines for the Diagnosis and Management of Osteoporosis in Canada (reviewed in 2006) can be found at http://www.cmaj.ca/cgi/reprint/167/10_suppl/s1.pdf. 4. Individuals under age 65 without one major or two minor risk factors typically do not benefit from BMD measurement.] 		

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Code		F
MISCELLANEOUS EXAMINATIONS		
X163	Dacrocystogram	31.88
Discogram(s)		
X164	- one or more levels	31.18
X167	Fistula or sinus	23.15
X169	Laminogram, planigram, tomogram	42.97
X170	Laryngogram	31.18
X171	Lymphangiogram	52.77
X192	Mammary ductography	26.98
Mammogram – Signs or Symptoms		
[Commentary: For individuals with identified signs or symptoms or follow-up of established disease.]		
Dedicated equipment		
X184	- unilateral	30.21
X185	- bilateral	40.01
Mammogram – No Signs or Symptoms		
[Commentary: Where the sole reason for the request for a mammogram is for an individual with identified risk factors in accordance with clinical practice guidelines]		
Dedicated equipment		
X172	- unilateral	30.21
X178	- bilateral	40.01
X194	Additional coned views with or without magnification (limit of two per breast) per film	6.41
X201	Breast biopsy specimen x-ray, per specimen	6.41
X150	Mechanical evaluation of knee	27.41
X193	Microradiology of the hands	15.61
X173	Myelogram – spine and/or posterior fossa	37.64
X190	Pantomography	19.11
X154	Penis	17.18
X176	Sialogram	32.09
X177	Skin thickness measurement	16.80
X166	Examination using portable machine “in home” add to first examination only	69.74
<p>Note: X166 does not apply to the use of a portable machine in a hospital. Can only be claimed once per day regardless of the number of people x-rayed in the same “home” including “nursing home”.</p>		