

Carotid Imaging Reports

*This measure is to be reported **each time** a carotid imaging study is performed in a hospital or outpatient setting for patients with ischemic stroke or TIA during the reporting period.*

Measure description

Percentage of final reports for carotid imaging studies (neck MR angiography [MRA], neck CT angiography [CTA], neck duplex ultrasound, carotid angiogram) performed for patients aged 18 years and older with the diagnosis of ischemic stroke or TIA that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement¹

What will you need to report for each patient undergoing a carotid imaging study for this measure?

If you select this measure for reporting, you will report:

- Whether or not the final report for carotid imaging study includes direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement

What if this process or outcome of care is not appropriate for your patient?

There may be times when it is not appropriate to reference measurements of distal internal carotid diameter as the denominator for stenosis measurement, due to:

- Medical reasons (eg, not indicated, contraindicated, other medical reason)

In these cases, you will need to indicate that the medical reason applies, specify the reason on the worksheet and in the medical chart. The office/billing staff will then report a code with a modifier that represents these valid reasons (also called exclusions).

¹“Direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement” includes direct angiographic stenosis calculations based on the distal lumen as the denominator for stenosis measurement OR an equivalent validated method referenced to the above method (eg, for duplex ultrasound studies, velocity parameters that correlate the *residual* internal carotid lumen with methods based on the *distal* internal carotid lumen).

Stroke and Stroke Rehabilitation

Carotid Imaging Reports

PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	<input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information

Billing Information

Step 1 Is patient eligible for this measure?			
	Yes	No	Code Required on Claim Form
Patient is aged 18 years and older.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of ischemic stroke or TIA.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is a CPT Procedure Code for carotid imaging.	<input type="checkbox"/>	<input type="checkbox"/>	
If No is checked for any of the above, STOP. Do not report a CPT category II code.			
Step 2 Does patient meet or have an acceptable reason for not meeting the measure?			
Direct or Indirect Reference to Measurements of Distal Internal Carotid Diameter as Denominator for Stenosis Measurement			Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
	Yes	No	
Included ¹	<input type="checkbox"/>	<input type="checkbox"/>	3100F
Not included for the following reason:			
<ul style="list-style-type: none"> Medical (eg, not indicated, contraindicated, other medical reason) 	<input type="checkbox"/>	<input type="checkbox"/>	3100F-1P
Document reason here and in medical chart.			If No is checked for all of the above, report 3100F-8P (Carotid image study did not include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement, reason not otherwise specified.)
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Coding Specifications

Codes required to document patient has a diagnosis of ischemic stroke or TIA and a procedure for patient undergoing carotid imaging occurred:

An ICD-9 diagnosis code for ischemic stroke or TIA and a CPT procedure code are required to identify patients to be included in this measure.

Ischemic stroke or TIA ICD-9 diagnosis codes

- 433.01, 433.11, 433.21, 433.31, 433.81, 433.91 (occlusion and stenosis of cerebral arteries),
- 434.01, 434.11, 434.91, (occlusion of cerebral arteries),
- 435.0, 435.1, 435.2, 435.3, 435.8, 435.9, (transient cerebral ischemia),

AND

CPT procedure codes for carotid imaging

- 70498, 70547, 70548, 70549, 75660, 75662, 75665, 75671, 75676, 75680, 93880, 93882

Quality codes for this measure (one of the following for every eligible patient):

CPT II Code descriptors

(Data Collection sheet should be used to determine appropriate combination of codes.)

- **CPT II 3100F:** Carotid image study report includes direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement
- **CPT II 3100F-1P:** Documentation of medical reason(s) for not including direct or indirect reference to measurements of distal internal carotid diameter
- **CPT II 3100F-8P:** Carotid image study report did not include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement, reason not otherwise specified

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