

September 2006

Provider Bulletin Number 6100

General Providers

Radiology Procedure Codes Coverage

Effective with dates of service on and after October 1, 2006, the following radiology procedure codes billed as base codes or with TC and 26 modifiers will be covered for all benefit plans except MediKan:

- | | | | |
|---------|---------|---------|---------|
| • 70371 | • 76076 | • 78593 | • 78801 |
| • 72285 | • 76936 | • 78601 | • 78803 |
| • 75900 | • 76945 | • 78615 | • 78804 |
| • 75940 | • 76977 | • 78730 | • 78807 |

These procedure codes were previously covered for qualified Medicare beneficiaries (QMB) only.

Information about the Kansas Medical Assistance Program as well as provider manuals and other publications are on the KMAP Web site at <https://www.kmap-state-ks.us>.

If you have any questions, please contact the KMAP Customer Service Center at 1-800-933-6593 (in-state providers) or (785) 274-5990 between 7:30 a.m. and 5:30 p.m., Monday through Friday.