**EKG and Xray Charting and Billing Summary Handout**

**Overview**

* EKG and Xray interpretation are billable services
* Reimbursement depends on the payer’s policy and contract with the provider
* Reimbursement requires appropriate interpretation documented by the physician

**EKGs**

* EKG billing can generate significant revenue for an emergency department
* EKG billing requirements:
  + An order must be placed
  + Documentation must support the need for the EKG
  + A separate signed retrievable report must be written
  + The report must contain an interpretation
* Review without interpretation is not sufficient
* Interpretation must be done in a specific or discrete area within the chart
* Three of the following elements must be included:
  + Comparison to previous EKGs
  + Rate
  + Rhythm
  + Axis
  + Intervals
  + ST segments
* Reimbursement should be for the interpretation that determined treatment
* Hospitals and/or payers may have specific contractual agreements with emergency physicians and cardiologists that determines who bills for the EKG interpretations

**Xrays**

* Ability to bill for x-ray will be highly dependent on individual departmental policy and payer policy
* Utilizes the CPT 26 modifier to indicate a professional service has been rendered rather than a technical service
* Reimbursement requires appropriate interpretation documented by the physician
* Requires a written report “similar to that prepared by a specialist in the field. This includes:
  + Relevant clinical issues
  + Comparative data
  + Study findings
* Reimbursement should be for the interpretation that determined treatment
* Hospitals and/or payers may have specific contractual agreements with emergency physicians and radiologists that determines who bills for the Xray interpretations