Nuchal Translucency Reimbursement

Nuchal translucency components:

1) Fetal viability Assessment
2) Crown-rump length determination
3) Nuchal Translucency measurement.


76813 is the nuchal translucency for a single or first gestation pregnancy.
  o Can be either transabdominal or transvaginal approach.
  o Total RVUs are 3.43; the professional component RVUs are 1.56.

76814 is the CPT code for each additional gestation.
  o Total RVUs are 2.29; the professional components RVUs are 1.31.

For comparison:
• 76801 - the total RVUs are 3.51; the professional component RVUs are 1.31
• 76802 - the total RVUs are 1.92; the professional component RVUs are 1.11.

A 76801 can be billed with a 76813/14 - if there is an appropriate indication for its use.

Example: Size/dates discrepancy, bleeding.

 Billing examples: 76801 and 76813-59
• Modifier 59 is used to show the 76813 as a distinct and independent service from the 76801. (See modifier in CPT book for clarification.)
• An E&M is not indicated for this testing unless there is a specific consultation requested or if an abnormality is found and the referring physician requests a consultation.
• The Nuchal Translucency ultrasound must be performed by a sonographer and/or physician that has been specifically trained and credentialed to perform the service. Credentialing can be done through the NTQR program (www.ntqr.org)

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