

First Four Months of 2026 Code Changes - Cause and Effect on Dosimetry & Treatment Delivery

AAMD 51st Annual Meeting



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Objectives

#1

2025 to 2026
Coding
Comparison

#2

Substantive
Changes in MD
Orders and
Dosimetry Work

#3

Clinical and
Financial Impact



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Delete and Use
Old Codes -
Makes perfect
sense.....what
could go
wrong???

CPT	CY 2025 Long Descriptor	CY 2026 Long Descriptor
77401	Radiation treatment delivery, superficial and/or ortho voltage, per day	Deleted
77402	Radiation treatment delivery, >=1 MeV; simple	Radiation treatment delivery; Level 1 (for example, single electron field, multiple electron fields, or 2D photons), including imaging guidance, when performed
77407	Radiation treatment delivery, >=1 MeV; intermediate	Radiation treatment delivery; Level 2, single isocenter (eg, 3D or IMRT), photons, including imaging guidance, when performed
77412	Radiation treatment delivery, >=1 MeV; complex	Radiation treatment delivery; Level 3, multiple isocenters with photon therapy (for example, 2D, 3D, or IMRT) OR a single isocenter photon therapy (eg, 3D or IMRT) with active motion management, OR total skin electrons, OR mixed electron/photon field(s), including imaging guidance, when performed
77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	Deleted
77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	Deleted
77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	
77014	Computed tomography guidance for placement of radiation therapy fields	Deleted
77417	Therapeutic radiology port imaget(s)	

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NEWS

Radiation Clinic in Greenville, Mississippi, May Close in Latest Blow to Rural Health Care

by Jaylin R. Smith and Kevin Edwards
April 17, 2026

Facebook Twitter LinkedIn YouTube Instagram More



"The Dying Breed of Community Oncology" Needs Defenders

Part of COA Community Oncology Conference
May 5, 2026 7 Min Watch Harsha Vyas, MD, Hematologist/Medical Oncologist



"This Is a Crisis": Reimbursement Cuts Hit Oncology

Part of COA Community Oncology Conference
May 11, 2026 7 Min Watch Casey Chollet-Lipscomb, MD, Chief Medical Officer



< Apr 28 >

Oncology Business

Oncology Group Sounds Alarm Over Clinics Pushed Toward Closure

Radiation oncologists from across the country are in Washington today warning lawmakers that recent Medicare policy changes threaten the viability of community cancer clinics, as new data point to widespread financial strain across the field. Members of the American Society for Radiation Oncology (ASTRO) are urging legislators to support the bipartisan Radiation Oncology Case Rate (ROCR) Act and other policies that will safeguard patient access to lifesaving cancer care.

By David Morse

Bundling Reduces Line Items - Not Workload!

CPT Code Simplification

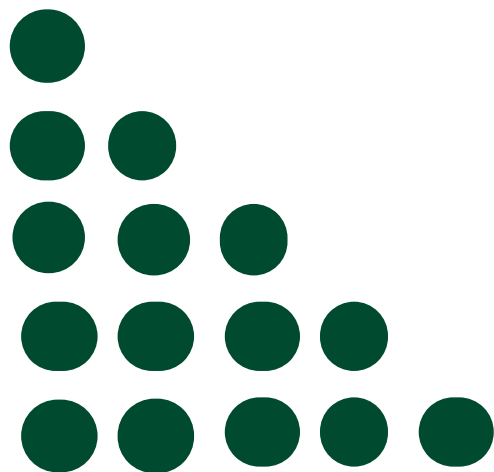


Image Guidance

Professional Charge

77387-26
\$36.41 MPFS

Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed

HCPCS Code	Modifier	Short Description	Mac Locality	Non-Facility Price	Facility Price
77387		Guidance for radj tx dlvr	0000000	\$36.41	\$36.41
77387	26	Guidance for radj tx dlvr	0000000	\$36.41	\$36.41
77387	TC	Guidance for radj tx dlvr	0000000	\$0.00	\$0.00

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2026 MPFS Treatment Codes and Rates

Non-Stereotactic Daily Treatment

77402 Level 1
\$82.17 MPFS
\$104.24 OPFS

Radiation treatment delivery; Level 1 (for example, single electron field, multiple electron fields, or 2D photons), including imaging guidance, when performed

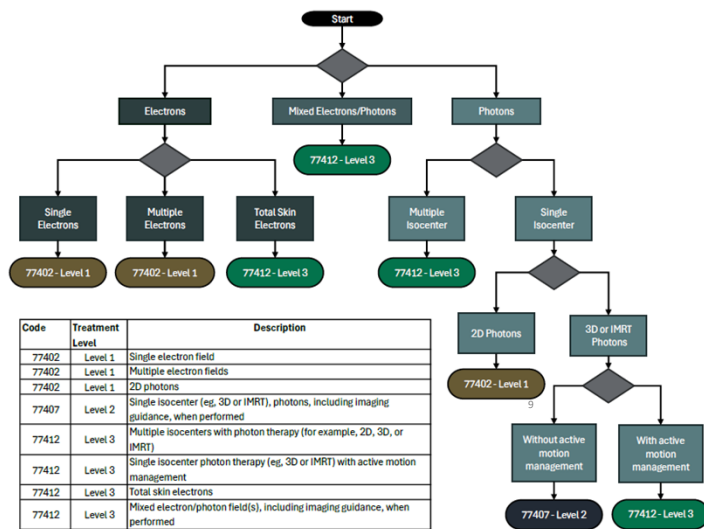
77407 Level 2
\$309.96 MPFS
\$394.05 OPFS

Radiation treatment delivery; Level 2, single isocenter (eg, 3D or IMRT), photons, including imaging guidance, when performed

77412 Level 3
\$443.56 MPFS
\$564.51 OPFS

Radiation treatment delivery; Level 3, **multiple isocenters with photon therapy (for example, 2D, 3D, or IMRT) OR a single isocenter photon therapy (eg, 3D or IMRT) with active motion management, OR total skin electrons, OR mixed electron/photon field(s)**, including imaging guidance, when performed

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Active Motion Management

AMA CPT Definition

Treatment delivery with active motion management (77412) includes intra-fraction localization and tracking of the target(s) or patient motion to optimize beam delivery (eg, intra-fraction motion, surface guidance). Intra-fraction motion management utilizes fiducials or imaging to monitor the target or organs at risk during the breathing cycle (eg, during a deep inspiration breath hold). This method minimizes organ motion and allows more accurate delivery of radiation to mobile targets and active avoidance of OAR.

Surface guidance for active motion management is a technique that allows the linear accelerator to perform gating (eg, optical) during treatment delivery using the body surface contour as a surrogate for internal target motion and OAR avoidance. Surface guidance is one method to effect active motion management, although there are other methods as well.

Note: This is not for patient set-up prior to treatment delivery (eg, not to replace tattoos).

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Active Motion Management

ASTRO Definition

Treatment Delivery with active motion management (CPT code 77412) includes intra-fraction localization and tracking of the target(s) or patient motion to optimize beam delivery (e.g., intrafraction motion, surface guidance). Intrafraction motion management utilizes fiducials or imaging to monitor the target or organs at risk during the breathing cycle (e.g., during a deep inspiration breath hold). This method minimizes organ motion and allows more accurate delivery of radiation to mobile targets and active avoidance of organs at risk.

Surface guidance for active motion management is a technique that allows the linear accelerator to perform gating (e.g., optical) during treatment delivery using the body surface contour as a surrogate for internal target motion and OAR avoidance. Use of surface guidance or abdominal compression for patient set up prior to treatment delivery alone does not qualify as active motion management (e.g., not to replace tattoos).

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Immediate Issues!

77387

Not Recognized or Paid

77387

Professional OR Global?

Coding Indecisiveness

Definitions varied across organizations, consultants, coders, etc.

Authorization Issues

Every benefit management company had their own ideas.

Fee Schedules & Payor Contracting

Old codes.....old payment rates.

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ASTRO Model Policy



ASTRO Active Motion Management Model Policy Public Comment

Individuals making comments must provide their name, institution/affiliation, and email address. The individual's e-mail address will not be posted on the website. We appreciate

DEADLINE JUNE 10, 2026 @ MIDNIGHT



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Documentation Adjustments & Education

Physician Orders

Authorization Check Sheets

Coding/Authorization Staff, Radiation
Oncologist, Radiation Therapist - Training

Accounts receivable review and analysis

Dissection of each commercial payor
contract

Rinse & repeat as payor and specialty
updates occurred.



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Active Motion Management

Documentation Requirements

- Active motion management must be ordered by the physician on each patient it is utilized.
 - Best practice: add a section for active motion management in the physician's clinical treatment planning document.
 - Include a paragraph outlining the medical necessity information that is tailored to each patient.
- Ensure the active motion management documents are added each fraction of treatment.
 - Best practice: the document template needs to include, at a minimum, data showing the patient was monitored throughout treatment delivery.
 - Each treatment document must be signed by the physician prior to next beam on to meet criteria for billing the professional service.

EviCore Guidance

To support an approval for CPT 77412 due to active motion management, we recommend that providers include clear, explicit detail addressing the following elements:

1. Medical necessity for motion management
2. Real-time monitoring or gating system used: Identify the specific system or technology used for intrafraction motion tracking
3. Workflow or parameters used for active motion management: Describe how motion is monitored during treatment, including thresholds, tolerance levels, and patient-specific setup.
4. Description of respiratory monitoring and tracking during treatment: Clarify whether monitoring is continuous, how motion data is acquired, and how the therapist is alerted to deviations.
5. Methodology determining beam on and beam off: State the criteria used to gate delivery, including what triggers beam-off events.

The Reality

3 Centers 3 Outcomes

Center 1

Medicare Heavy with AMM capabilities:

2025 25 Fx = \$15,613.53

2026 25 Fx = \$16,546.17

Center 2

Medicare Heavy with NO AMM Capabilities:

2025 25 Fx = \$15,613.53

2026 25 Fx = \$14,957.17

Center 3

Small Rural Center
5400 Tx a Year

2025 - \$541 per treatment

2026 - \$505 per treatment

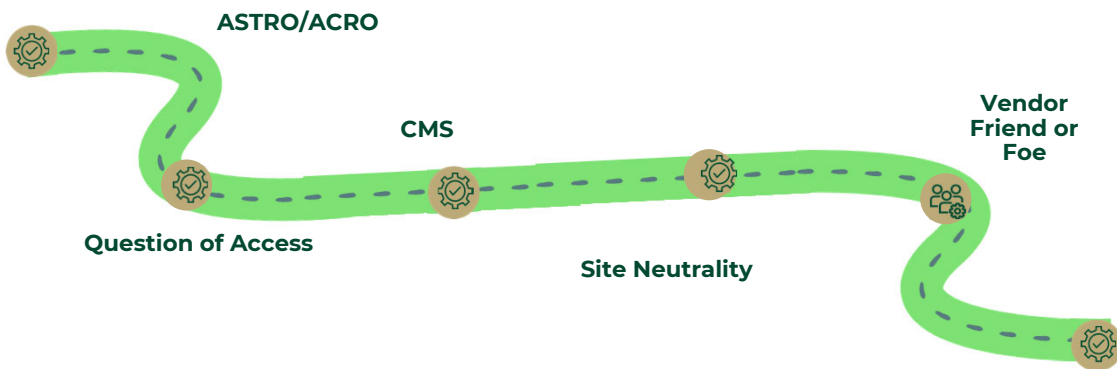


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Navigating the Chaos



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Questions?
Comments?

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