

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202002 JANUARY 7, 2020

IHCP revises policy for radiology services

Effective February 7, 2020, the Indiana Health Coverage Programs (IHCP) is revising its coverage policy regarding radiology services to align with changes made to the *Indiana Administrative Code* (IAC).

The following changes were made:

- 405 IAC 5-27-2(4) was added to include that radiologic procedures must be limited to the minimum number of views or films to appropriately diagnose or assess a patient's condition. Procedures must also be limited to the most appropriate body part or area to provide or rule out a diagnosis for the suspected condition.
- 405 IAC 5-27-2(5) was amended to remove situations generally not needing radiologic services, which include but are not limited to:
 - Pregnancy
 - Research studies
 - Screening
 - Routine physical examinations or checkups
 - Premarital examinations
 - Fluoroscopy without films
- 405 IAC 5-27-3(a)(2) was amended to include that a computerized tomography (CT) scan must be found to be medically necessary considering the patient's symptoms and preliminary diagnosis.
- 405 IAC 5-27-6(a)(1)(I) was amended to include suspected uterine and pelvic abnormality as a condition that warrants a sonography exam during pregnancy.
- 405 IAC 5-27-6(a)(1)(J) was amended to include determination of fetal position as a condition that warrants a sonography exam during pregnancy.
- 405 IAC 5-27-6(a)(1)(K) was amended to include evaluation of cervix for risk of preterm loss or birth position as a condition that warrants a sonography exam during pregnancy.
- 405 IAC 5-27-6(a)(2) was added to include Venous Doppler exams for blood flow as a covered sonography procedure.
- 405 IAC 5-27-6(a)(3) was added to include diagnostic exams of soft tissues or organs as a covered sonography procedure.
- 405 IAC 5-27-6(a)(4) was added to include echocardiograms as a covered sonography procedure.
- 405 IAC 5-27-6(a)(5) was added to include other sonography exams as determined by the office as a covered sonography procedure.



- 405 IAC 5-27-7 was amended to include that prior authorization (PA) shall be required for all positron emission tomography (PET) scans. Medicaid reimbursement may be available for PET scans performed for medically necessary conditions as determined by the office.

The following billing guidelines apply for PET scans:

- Providers must use the procedure codes for PET scans as described in *Radiology Services Codes*, accessible from the [Code Sets](#) page at in.gov/medicaid/providers.
- Due to the PA requirement, the diagnosis codes supporting medical necessity for PET scans will be obsolete for dates of service on or after February 7, 2020. These diagnosis codes will be removed from the *Radiology Services Codes*.

- 405 IAC 5-27-8 was amended to add that Medicaid reimbursement may be available for interventional radiology procedures as determined medically necessary by the office. PA shall be required for interventional radiologic procedures as determined by the office.
- 405 IAC 5-27-9 was amended to add that Medicaid reimbursement shall be available for medically necessary magnetic resonance imaging and magnetic resonance angiography exams.



Reimbursement, PA, and billing information applies to services delivered under the fee-for-service (FFS) delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, PA, and billing criteria within the managed care delivery system. Questions about managed care billing and PA should be directed to the MCE with which the member is enrolled.

QUESTIONS?

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