

PreferredOne

DEPARTMENT: Pricing & Payment	APPROVED DATE: 09/30/2016
POLICY DESCRIPTION: Brain CT billed same date of service as Sinus CT	
EFFECTIVE DATE: 1/1/2017	
PAGE: 1 of 1	REPLACES POLICY DATED:
REFERENCE NUMBER: P#22	RETIRED DATE:

SCOPE: Claims, Coding, Customer Service, Medical Management, Finance, Network Management

PURPOSE: To provide reimbursement guidelines for billing Brain CT and Sinus CT on the same date of service

POLICY: PreferredOne will not separately reimburse a sinus CT when billed on the same date of service as a Brain CT by the same provider for the same member. When neuroimaging is required, there are no indications for simultaneous sinus CT when a brain CT is performed.

COVERAGE: Coverage is subject to the terms of an enrollee's benefit plan. To the extent there is any inconsistency between this policy and the terms of an enrollee's benefit plan, the terms of the enrollee's benefit plan documents will always control. Enrollees in PreferredOne Community Health Plan (PCHP) and some non-ERISA group health plans that PreferredOne Administrative Services, Inc, (PAS) administers are eligible to receive all benefits mandate by the state of Minnesota. Please call customer service telephone number on the back of the enrollee's insurance card with coverage inquiries.

PROCEDURE:

1. This policy applies to both facility UB04 and professional HCFA 1500 claims.
2. Brain CT CPT include 70450, 70460, 70470
3. Sinus CT CPT include 70486, 70487, 70488
4. Providers that bill for both a brain CT and Sinus CT on the same date of service for the same member will only be reimbursed the brain CT.
5. Exclusions: Claims with primary or secondary diagnosis codes related to trauma, tumor, orbital cellulitis or intracranial abscess

DEFINITIONS:

REFERENCES: