

SECTION 10

PRE-CERTIFICATION FOR RADIOLOGICAL SERVICES

RADIOLOGY BENEFIT MANAGEMENT PROGRAM (RBM)

Effective for dates of services on and after July 19, 2010, the MO HealthNet Division, in conjunction with Xerox and MedSolutions (MSI), implemented a new quality-based Radiology Benefit Management Program (RBM). The RBM is an expansion of the existing precertification process previously used for MRIs and CTs of the brain, head, chest and spine. As of July 19, 2010, certain radiologic procedures require precertification and are processed using clinical guidelines that are available at <http://medsolutions.com/documents/guidelines/guidelines.php>. The guidelines are not intended to supersede or replace sound medical judgment, but instead should facilitate the identification of the most appropriate imaging procedure based upon the participant's clinical condition.

The RBM program is for the following outpatient, diagnostic, non-emergency procedures.

- High-Tech (MRI, MRA, CT, CTA, and PET scans)
- Cardiac Imaging (including Nuclear Cardiac (SPECT), EBCT/Calcium Scoring, Transthoracic ECHO, Cardiac PET and PET/CT, Transesophageal ECHO, diagnostic heart catheterization and Stress ECHO)

Detailed information on the RBM program is found in the MO HealthNet Radiology Bulletin, Volume 33, Number 32, dated February 8, 2011, available at:

http://dss.mo.gov/mhd/providers/pdf/bulletin33-32_2011feb08.pdf

RESOURCES

Links to the following resources are available at:

http://medsolutions.com/implementation/mo_health/

- 2012 CPT Code List
- Quick Reference Guide
- Provider Orientation Presentation
- Grouping Logic

DENIALS

MedSolutions notifies the referring physician and requested facility in writing of a denial and provides a rationale for the determination within one working day of decision. This communication sets forth the appeal options per current MO HealthNet policy.

MedSolutions also offers the ordering physician a consultation with a MedSolutions Medical Director on a peer-to-peer basis. In certain instances, additional information provided during the peer-to-peer consultation is sufficient to satisfy medical necessity criteria. To request a peer-to-peer consultation, the physician must call (800) 392-8030, option 5.

PLEASE NOTE: An approved pre-certification request does not guarantee payment. The provider must verify participant eligibility on the date of service using the Interactive Voice Response (IVR) System at 573-751-2896 or by logging on to the MO HealthNet billing Web portal at <http://emomed.com>.