

Division of Medicaid State of Mississippi Provider Policy Manual	New: X	Date: 07/01/07
	Revised:	Date:
	Current:	
Section: Radiology	Section: 46.06	
Subject: Teleradiology	Pages:	
	Cross Reference:	

Mississippi Medicaid covers medically necessary teleradiology services for all eligible beneficiaries in accordance with the below policies.

Definitions

Consulting provider means a licensed physician who provides the interpretation of the radiological image (professional component) at the distant site (hub). The consulting provider must be licensed in the state within the United States in which he/she practices.

Hub site means the location of the teleradiology consulting provider, also referred to as the distant site. The hub site provides the professional component of the service.

Modifier 26 identifies "professional component".

Modifier TC identifies "technical component".

Modifier GT identifies "interactive telecommunication".

Referring provider means a licensed physician, physician assistant, or nurse practitioner who orders the radiological service. The referring provider must be licensed in the state within the United States in which he/she practices.

Spoke site means the location where the beneficiary is receiving the teleradiology service, also referred to as the originating site. The spoke site provides the technical component of the service.

Store and forward means telecommunication technology for the transfer of medical data from one site to another through the use of a camera, or similar device that records (stores) an image which is then sent (forwarded) via telecommunication to another site for teleconsultation.

Teleradiology is the electronic transmission of radiological images, such as x-rays, CTs, or MRIs (store-and-forward images), from one location to another for the purposes of interpretation.

Transmission Cost means the cost of the line charge incurred during the time of the transmission of a telehealth service.

Criteria for Reimbursement

Mississippi Medicaid will reimburse for one technical and one professional component for teleradiology services.

Medically necessary teleradiology is covered only when the originating site (spoke) documents that there are no local radiologists to interpret the images.

The provider at the originating site (spoke) must be enrolled as a Mississippi Medicaid provider in order to bill for the technical component of the radiological service. The spoke site provider must bill using the appropriate CPT radiological code with the TC and GT modifier.

Example: 70460 – TC - GT

The provider at the distant site (hub) must be enrolled as a Mississippi Medicaid provider in order to bill for the professional component of the radiological service. The hub site provider must bill using the appropriate CPT radiological code with the 26 and GT modifier.

Example: 70460 – 26 - GT

Hospitals, independent radiological clinics, or physician clinics may not bill Mississippi Medicaid for both the technical and professional component of teleradiology services under their own provider number. Providers may not bill for services performed by other providers. Each provider must qualify for a Mississippi Medicaid provider number and must bill for their own services. This also applies to teleradiology services through a purchase or contract arrangement.

If a hospital chooses to bill for purchased or contractual teleradiology services, the services must be billed on a CMS-1500 claim form under a physician group provider number.

No transmission cost or any other associated cost will be reimbursed.

Quality of Service

The available teleradiology system must provide images of sufficient quality to perform the indicated task. When a teleradiology system is used to render the official interpretation, there must not be a clinically significant loss of data from image acquisition through transmission to final image display. For transmission of images for display use only, the image quality should be sufficient to satisfy the needs to the clinical circumstance.

Equipment used in teleradiology will vary; however, in all cases, the equipment must provide image quality and availability appropriate to the clinical need.

The radiologic examination at the originating site (spoke) must be performed by qualified personnel trained in the performance of the specified radiological service and operating within the licensure and/or certification requirements of the state in which the service is being performed. Technicians must be working under the supervision of a qualified licensed physician.

Documentation

Services delivered via teleradiology are held to the same standard of documentation as non-teleradiology services. All professional and institutional providers participating in the Medicaid program are required to maintain records that disclose the services rendered and billed under the program. Upon request, records should be made available to DOM, the DOM's fiscal agent, the Medicaid Fraud Control Unit, and any other designated representative of the DOM to substantiate any or all claims.

In each instance, the provider file at the spoke location must include at a minimum:

- Documentation of the reason that teleradiology was utilized to deliver the service
- Date(s) of service
- Beneficiary demographic information, i.e., name, Medicaid ID number, age sex, etc.
- Signed consent for treatment, if applicable
- Medical history
- Patient's presenting complaint
- Diagnosis
- Specific name/type of all diagnostic studies and results/findings of the studies

In each instance, the provider file at the hub location must include at a minimum:

- Date(s) of service
- Beneficiary demographic information, i.e., name, Medicaid ID number, age, sex, etc.
- Medical history
- Patient's presenting complaint
- Diagnosis
- Specific name/type of all diagnostic studies and results/findings of the studies
- Radiological images

Refer to Section 7.03 for additional documentation requirements.

Security

Teleradiology systems should provide network and software security protocols to protect the confidentiality of beneficiaries' identification and imaging data. There must be measures to safeguard the data and to ensure data integrity against intentional or unintentional corruption of the data. All providers are responsible for ensuring confidentiality in accordance with HIPAA privacy regulations.