



Covered Benefit: Radiology Services

CMP Published: Yes No

CMP Links: [Obstetrical Ultrasound](#) [Bone Mineral Density Testing](#)

Definition: Radiology Services involve diagnostic and therapeutic imaging services ranging from x-rays to more advanced technologies.

Benefit Packages: RItE Care, Children with Special Health Care Needs, Substitute Care, Rhody Health Plan (RHP), Rhody Health Options Phase One, and ACA Adult Expansion (RHE).

Coverage Limitations:

Radiology services are covered when ordered by a Health Plan physician/provider.

Neighborhood requires prior authorization on high-end radiology services such as MRI, MRA, CT, PET scans and nuclear medicine. Effective 5/1/10, Med Solutions, a radiology management partner, will provide medical review and authorizations for high end radiology.

Bone Mineral Density Testing (BMD) frequency and criteria for medical necessity is outlined in Neighborhood's clinical medical policy.

Screening mammograms are covered for female members when medically necessary, one per 11 rolling months.

Exclusions:

Extended Family Planning (EFP) members are excluded; EFP members do not have a comprehensive benefit package.

Positron Emission Tomography (PET) scans are not covered as a screening test. Coverage Includes:

- X-rays and Ultrasounds
- Bone Density Studies
- Therapeutic Interventional Radiology
- Nuclear Medicine
- Radiation Oncology
- Screening Mammogram



Episodes of care can occur across multiple settings:

Professional (POS 11)

Urgent Care Centers (POS 20)

Emergency Room (POS 23)

Inpatient (POS 21)

Outpatient (POS 22)

Definition: Interventional Radiology-radiological services with a radiologist present where dyes or other instruments/injectibles are part of the procedure.

Notes:

Amniocentesis and ultrasound guided fetal procedures are covered under the maternity benefit coverage summary.

Most urological procedures are covered under the genitourinary benefit coverage summary.

Covered services have been aligned with standard CPT coding categorized by body systems; therefore many services with radiological guidance may be listed under other benefit coverage summaries. For example, ERCP is listed with digestive procedures.

VERSION HISTORY:

Create Date: 04/12/10

Revision Dates: 05/12/10; 05/18/10; 05/27/10, 05/28/10, 03/07/11, 03/24/11, and 04/06/11

CMC Review Dates: 03/8/11

PEC: 12/22/14