NOTE: The effective date of this policy reflects the date that BCBSRI documented a long-standing reimbursement policy. The information is this policy does not indicate a change in the way that BCBSRI covers/reimburses the services/procedures described in this policy.

OVERVIEW
This Blue Cross & Blue Shield of RI (BCBSRI) policy describes correct billing for radiology services completed in the hospital emergency room.

MEDICAL CRITERIA
Not applicable.

PRIOR AUTHORIZATION
Not applicable.

POLICY STATEMENT
Medicare Advantage Plans and Commercial Products
BCBSRI will only reimburse the first provider who completes and files the comprehensive review and interpretation of radiology service performed in the emergency room.

BCBSRI follows CPT coding guidelines, which states the emergency room physician should not bill a preliminary read (previously known as a wet read) separately as the initial read is included in the E&M service billable by the ER physician. The rendering of comprehensive detailed review and interpretation of the imaging completed in the emergency room, which in most instances should be conducted and billed by a board-certified radiologist.

Emergency room doctors are permitted to bill for this service only when a full written interpretation is included and is a separate record within the patient’s medical record. Billing the review and interpretation for the same patient on the same date of service by two providers will deny as a duplicate service.

COVERAGE
Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage or Subscriber Agreement for applicable radiology benefits/coverage.

CODING
Not applicable

RELATED POLICIES
Not applicable

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