

Radiological Services

Asuris reimburses for hospital-based, institutional, non-institutional (office and freestanding imaging centers) radiology services. These services are reimbursed one time for each diagnostic or therapeutic encounter.

Radiology Guidelines

Asuris' Radiology Quality Initiative (RQI) is designed to promote the use of advanced diagnostic imaging services based on widely accepted clinical judgment. We have partnered with American Imaging Management (AIM[®]) to administer the program.

Order numbers must be obtained by ordering or referring non-radiological physicians or other health care professionals.

Order numbers must be obtained for the following advanced diagnostic imaging services:

- Nuclear cardiology
- Magnetic resonance imaging (MRI)
- Magnetic resonance angiography (MRA)
- Positron emission tomography (PET) studies
- Computerized tomography angiography (CTA)
- Outpatient elective computerized tomography (CT)

Additional information about [RQI](#) is available in the Care Management section of our *Provider Web Site*, www.asuris.com/provider.

Radiological services are composed of a technical component and a professional component:

Technical component (-TC)

Reimburses for personnel, equipment, supplies and, in some cases, the contrast material. When technical services are provided in an institutional setting, such as outpatient hospitals, reimbursement for the technical component of the radiology code is made to the facility.

Inpatient radiology technical services are included in the reimbursement to the hospital.

Professional component (-26)

Reimburses the provider's professional interpretation and/or supervision services. We will reimburse for one professional component per radiology code regardless of the number of claims submitted.

Professional services provided in the institutional setting (inpatient or outpatient) are reimbursed for the professional component of the radiology codes.

Global / Non-Institutional

Services provided in a physician's office or a freestanding center owned by the radiologist are reimbursed to the global allowable, which includes both the technical and professional components.

Second Opinions Member Request

If a member is requesting a second opinion, we will allow reimbursement for one second opinion professional component of the radiology code.

Additional opinions may be subject to review.

- There must be documentation in the member's record that they have requested a second reading of the radiology documents and films.
- There must be a written report of the second opinion.
- The second opinion must be by a different provider group of radiologists. We define "same provider" as same specialty and same tax identification (ID) number.

Provider Request

We will reimburse for one second opinion professional component of a radiology code if the provider feels a second opinion is medically necessary. Additional opinions may be subject to review:

- The second opinion must be by a different provider group of radiologists. We define "same provider" as: same specialty, same tax ID number.
- There must be documentation in the patient's chart that the provider requested a second reading of the radiology documents and films and the rationale for the request. There must also be a written report of the second opinion.

Referred Cases

Asuris members receive the highest level of benefits when they receive services from participating providers. Please use the [Provider Directories](#) feature on our website when referring your patient to another provider.

Additional information about submitting claims is available in the [Claims & Billing](#) section of our website.