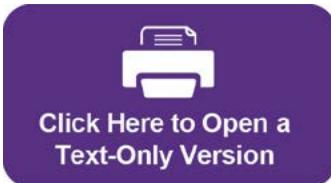




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Provider Compliance Tips for Computed Tomography (CT) Scans

Provider Types Affected: Hospitals, physicians, and other providers billing for Computed Tomography (CT) scans and services.

Background

Per Medicare's National Coverage Determination (NCD), [NCD 220.1](#), CT scans must be medically appropriate considering the patient's symptoms and preliminary diagnosis. Local Coverage Determinations (LCDs) for CT scans further define the circumstances demonstrating medical necessity. Documentation must be available to Medicare upon request. CT scans had an improper payment rate of 13 percent during the 2014 reporting period for the Comprehensive Error Rate Testing (CERT) program.

Insufficient Documentation Causes Most Denials

Insufficient documentation caused more than 94 percent of the CERT review contractor identified improper payments. Insufficient documentation means that something was missing from the medical records. ***Missing orders caused over half of the payment denials.***

To Prevent Denials

- Check the order from the ordering practitioner to make sure it is signed. Retain a copy;
- Document in your medical record that you performed a CT scan;
- Retain a copy of the CT scan report from the radiologist or interpreting physician; and
- If you receive a documentation request from a Medicare review contractor, submit:
 1. **The order** from the ordering practitioner;
 - If you forgot to keep a copy of the order, contact the ordering practitioner and request that they send you a copy of the order.
 - If the ordering practitioner can't find a copy of the order in the patient's medical record, ask them to send you the progress notes, plan of care or any other medical record entry from PRIOR to the day of the CT scan that documents the intent to order the CT scan.

- If the signature on the order does not comply with Medicare's legibility rules, obtain a signature attestation from the ordering practitioner.

2. The ordering practitioner's progress notes or other medical record entries (for example, medical history, physical examination) documenting why the CT scan is needed;

3. The medical record entries made during the CT scan; and

4. The report of the CT scan from the radiologist or interpreting physician.

- LCDs are available at <http://www.cms.gov/Medicare/Coverage/DeterminationProcess/LCDs.html> on the CMS website;
- "Medicare Coverage of Imaging Services" Fact Sheet is at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Radiology_FactSheet_ICN907164.pdf on the CMS website;
- A Signature Attestation Statement Example is on the CERT Provider Website at <https://www.certprovider.com/SignatureAttestationStatement.aspx> on the Internet; and
- Medicare's signature guidelines are available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Signature_Requirements_Fact_Sheet_ICN905364.pdf on the CMS website.

Resources

The following resources are available to assist in complying with Medicare's policy for CT scans:

- The "Medicare National Coverage Determinations Manual," NCD 220.1, which is available at http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/ncd103c1_Part4.pdf on the Centers for Medicare & Medicaid Services (CMS) website;



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