

**Audio Title: Provider Compliance Tips for Computed Tomography (CT) Scans**

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If you are Medicare provider, you will benefit from this podcast! It provides guidance you can use to bill correctly and avoid improper payments for Computed Tomography (CT) scans and services, and is based on the fact sheet titled “Provider Compliance Tips for Computed Tomography (CT Scans).

**Let’s begin with the critical points for you to consider:**

According to 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 16 percent during the most recent reporting period for the Comprehensive Error Rate Testing (CERT) program.

**Now let’s discuss what happens if there is insufficient documentation.**

Insufficient documentation caused more than 99 percent of the CERT review contractor identified improper payments. Insufficient documentation means that something was missing from the medical records.

Missing orders causes **OVER HALF** of the payment denials.

**Now let’s discuss how to prevent denials.**

To prevent a denial, there are four actions you must take.

**First:** Check the order from the ordering practitioner to make sure it is a signed. Be sure to retain a copy.

**Second:** Document in your medical record that you performed a CT scan.

**Third:** Retain a copy of the CT scan report from the radiologist or interpreting physician; and

**Fourth:** If you receive a documentation request from a Medicare review contractor, submit the following four items:



- **One, the order** from the ordering practitioner;  
If you forget to keep a copy of the order, contact the ordering physician and request that they send you a copy of the order.

If the ordering physician cannot 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.

- **Two, the ordering practitioner's progress notes** or other medical record entities (for example, medical history and physical exam) documenting why the CT scan is needed;
- Three, **the medical record** entities made during the CT scan; and
- Four, **the report of the CT scan** from the radiologist or interpreting physician.

**More questions?** To learn more about **Provider Compliance Tips for CT Scans** contact your **Medicare Administrative Contractor** or visit the CMS website at [www.cms.gov](http://www.cms.gov) and search for Medicare Learning Network®. From that page, search for **MLN Multimedia** to view the podcast transcript.

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