



## **Subsequent Revision Delay for the Radiology Multiple Imaging Reduction and Multiple Procedure Policies**

### **Radiology Multiple Imaging Reduction Policy:**

To further align with Centers for Medicare and Medicaid Service (CMS), UnitedHealthcare Community Plan announced in a previous notification that an enhancement to the Radiology Multiple Imaging Reduction (RMIR) Policy to apply additional Multiple Procedure Payment Reductions (MPPR) to the professional component (PC) of Diagnostic Imaging procedures, and the technical component (TC) of Diagnostic Cardiovascular and Diagnostic Ophthalmology procedures would be implemented on or after May 1, 2015.

It was also previously communicated that the existing Radiology Multiple Imaging Reduction Policy name will be changed to the Multiple Procedure Payment Reduction for Diagnostic Imaging and that the MPPR reductions for the TC of Diagnostic Cardiovascular and Ophthalmology Procedures will be addressed within a new policy named Multiple Procedure Payment Reduction for Diagnostic Cardiovascular and Ophthalmology Procedures.

- Implementation for the Multiple Procedure Payment Reduction for Diagnostic Imaging Policy and the Multiple Procedure Payment Reduction for Diagnostic Cardiovascular and Ophthalmology Procedures Policy has been delayed until the third quarter of 2015.

### **Multiple Procedure Policy**

To further align with CMS, UnitedHealthcare Community Plan announced in a previous notification that an enhancement to the Multiple Procedure Policy to apply the CMS special multiple endoscopic rules instead of our standard 50 percent reduction when related endoscopic procedures within the same family are performed on the same day would be implemented on or after July 1, 2015.

Implementation for the Multiple Procedure Policy has been delayed until the fourth quarter of 2015.

### **Note Regarding Reimbursement Policies**

***As with all UnitedHealthcare Community Plan policies, other factors affecting reimbursement may supplement, modify or in some cases supersede this policy. These factors include but are not limited to federal and/or state regulatory requirements, physician or other provider contracts, and/or the member's benefit coverage documents.***

Unless otherwise noted as follows, these reimbursement policies apply to services reported using the CMS-1500 or its electronic equivalent, or its successor form.

UnitedHealthcare Community Plan reimbursement policies do not address all issues related to reimbursement for services rendered to our members, such as the member's benefit plan documents; our medical policies; and the UnitedHealthcare Community Plan Physician, Health Care Professional, Facility and Ancillary Provider Administrative Guide. Meeting the terms of a particular reimbursement policy is not a guarantee of payment. Likewise, retirement of a reimbursement policy affects only those system edits associated with the specific policy being retired. Retirement of a reimbursement policy is not a guarantee of payment. Other applicable reimbursement and medical policies and claims edits will continue to apply.

Once implemented, the policies may be viewed at [UHCCCommunityPlan.com](http://UHCCCommunityPlan.com) > For Health Care Professionals (click on the appropriate state) > Reimbursement Policies.

In the event of an inconsistency or conflict between the information in this Provider Notification and the posted policy, the provisions of the posted reimbursement policy prevail. If you have any questions, please contact your Health Plan Representative or call the number on your Provider Remittance Advice/Explanation of Benefits.