

February 19, 2014
MB# 14-003

MEDICAID BULLETIN

ALL

TO: Providers Indicated

SUBJECT: High Tech Radiology Services

Effective March 1, 2014, the South Carolina Department of Health and Human Services (SCDHHS) will no longer require prior authorization on High Tech Radiology services. All other Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes requiring prior authorization or support documentation can be found in the Physicians, Laboratories and Other Medical Professional manual located at: www.scdhhs.gov.

SCDHHS will continue to cover and reimburse for all medically necessary high tech radiology procedures. Providers are required to document the beneficiary's health record indicating the medical necessity for the procedure being requested, including all related prior radiology procedures, laboratory results, medications, physical therapy, and duration, to include dates of service. SCDHHS will apply American College of Radiology (ACR) standards of best practice when evaluating medical necessity. The Division of Program Integrity will continue to monitor utilization.

This policy directly affects Medicaid fee-for-service members. Questions regarding specific authorization and coverage of these services for beneficiaries enrolled in a Medicaid Managed Care Organization (MCO) should be directed to the beneficiaries MCO.

Please refer any questions or concerns regarding this bulletin to the Provider Service Center at 888-289-0709. Thank you for your continued support of the South Carolina Healthy Connections Medicaid Program.

/s/
Anthony E. Keck
Director