

Subject: Emergency Department EKG and Imaging Interpretation

Policy

CareSource reimburses for emergency department services provided to CareSource enrolled members, including reimbursement for the complete and definitive interpretation of EKGs and imaging studies provided for evaluation and management of the emergency care.

Definitions

"Emergency medical condition," means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in any of the following: placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part. *(From OAC 5101:3-26-01 (W, X))*

"Emergency services," means covered inpatient services, outpatient services, or medical transportation that are provided by a qualified provider and are needed to evaluate, treat, or stabilize an emergency medical condition. As used in this policy, providers of emergency services also include physicians or other health care professionals or health care facilities not under employment or under contractual arrangement with an MCP. *(From OAC 5101:3-26-01 (W, X))*

Provider Reimbursement Guidelines

Prior Authorization

Emergency services (as defined above) do not require prior authorization. Only those services that are medically necessary for the evaluation and management of the patient in the ED setting will be reimbursed.

"Complete and Definitive Interpretation of EKGs and Imaging Studies" refers to the interpretation that is provided by a physician with documented specialized education and training appropriate to the service provided and which is reported separately, documenting all findings typically reported for the particular exam and which is considered final and the report of record for the medical chart and which is separately retrievable. EKG and Imaging interpretations billed by ED physicians and other specialists in the ED setting will not be reimbursed separately if they do not conform with the above definition as they are considered to be an integral part of the evaluation and management services reimbursed to the physician.

Hospital emergency department services billed by the facility are usually accompanied by global charges for any EKG and Imaging services provided. Interpretations for these services are usually considered the complete and definitive interpretations that are provided by specialists contracted on behalf of the hospital and which are reimbursed as part of the global reimbursement paid to the facility. Duplicate charges for interpretation of EKG or imaging services rendered by ED or other specialty physicians will not be reimbursed.

Ultrasound diagnostic procedures provided in the ED will be reimbursed when medically necessary, consistent with CPT definition, if accompanied by a separate report and not billed also by the hospital or a radiologist providing an over-read.

Related Policies & References

OAC 5160-2-21(H), "Policies for outpatient hospital services, Emergency room visit claims."

CareSource - Post Stabilization Care Policy

State Exceptions

NONE

Document Revision History

10/31/2013 – OAC Rule renumbered from "5101:32-21(H)," per Legislative Service Commission Guidelines.