PURPOSE: To identify the guidelines to be followed by the Customer Contact Center and the Clinical Services Departments for ordering diagnostic radiology tests as approved by the Radiology Advisory Board. This policy is intended to prevent the practice of some testing facilities to routinely apply protocols which require performance of sequential tests. In addition, this policy is intended to clarify the requirements and exceptions for order revisions.

POLICY: Staff at One Call Medical, Inc. (OCM) and testing facilities will follow the established guidelines for ordering diagnostic radiology tests as per the approved guidelines of Section 15021, Ordering Diagnostic Tests, as published by the Centers for Medicare & Medicaid Services under the guidance of OCM’s Radiology Advisory Board.

DEFINITIONS:
1. A “diagnostic test” includes all diagnostic x-ray tests, all diagnostic laboratory tests, and other diagnostic tests furnished to a patient.
2. A “treating physician” is a physician, as defined in §1861(r) of the Social Security Act (the Act), who furnishes a consultation or treats a patient for a specific medical problem, and who uses the results of a diagnostic test in the management of the patient’s specific medical problem.
   NOTE: A radiologist performing a therapeutic interventional procedure is considered a treating physician. A radiologist performing a diagnostic interventional or diagnostic procedure is not considered a treating physician.
3. A “treating practitioner” is a nurse practitioner, clinical nurse specialist, or physician assistant, as defined in §1861(s)(2)(K) of the Act, who furnishes, pursuant to State law, a consultation or treats a patient for a specific medical problem, and who uses the result of a diagnostic test in the management of the patient’s specific medical problem.
4. A “testing facility” is a provider that furnishes diagnostic tests. A testing facility may include a physician or a group of physicians (e.g., radiologist, pathologist), a laboratory, or an independent diagnostic testing facility (IDTF).
5. An “order” is a communication from the treating/referring physician/practitioner requesting that a diagnostic test be performed for a patient. The order may conditionally request an additional diagnostic test for a particular patient if the result of the initial diagnostic test ordered yields to a certain value determined by the treating physician/practitioner (e.g., if test X is negative, then perform test Y). An order may include the following forms of communication:
   a. A written document signed by the treating physician/practitioner, which is hand delivered, mailed, or faxed to the testing facility;
   b. A telephone call by the treating physician/practitioner or his/her office to the testing facility; and
c. An electronic mail from the treating physician/practitioner or his/her office to the testing facility.

**PROCEDURE:**

1) **Treating/Referring physician/practitioner ordering of radiology diagnostic tests.**
   a) The treating/referring physician/practitioner must order all diagnostic tests furnished to a patient.
   b) A testing facility that furnishes a diagnostic test ordered by the treating/referring physician/practitioner may not change the diagnostic test or perform an additional diagnostic test without a new order.

2) **Different Diagnostic Test.**
   a) When an interpreting physician at a testing facility determines that an ordered diagnostic radiology test is clinically inappropriate or suboptimal, and that a different diagnostic test should be performed (e.g., an MRI should be performed instead of a CT scan because of the clinical indication), the interpreting physician/testing facility may not perform the unordered test until a new order from the treating physician/practitioner has been received.
   b) Similarly, if the result of an ordered diagnostic test is normal and the interpreting physician believes that another diagnostic test should be performed (e.g., a renal sonogram was normal and based on the clinical indication, the interpreting physician believes an MRI will reveal the diagnosis), an order from the treating physician must be received prior to performing the unordered diagnostic test.

3) **Additional Diagnostic Test Exceptions.** If the testing facility cannot reach the treating/referring physician/practitioner to change the order or obtain a new order and documents this in the medical record, then the testing facility may furnish the additional diagnostic test if all of the following criteria apply:
   a) The testing center performs the diagnostic test ordered by the treating physician/practitioner;
   b) The interpreting physician at the testing facility determines and documents that, because of the abnormal result of the diagnostic test performed, an additional diagnostic test is medically necessary;
   c) Delaying the performance of the additional diagnostic test would have an adverse effect on the care of the patient;
   d) The result of the test is communicated to and is used by the treating/referring physician/practitioner in the treatment of the patient; and
   e) The interpreting physician at the testing facility documents in his/her report why additional testing was done.

**EXAMPLE:** (a) The last cut of an abdominal CT scan with contrast shows a mass requiring a pelvic CT scan to further delineate the mass; (b) a bone scan reveals a lesion on the femur requiring plain films to make a diagnosis.
4) **Interpreting Physician Exception**.--This exception applies to an interpreting physician of a testing facility who furnishes a diagnostic test to a patient. The interpreting physician must document accordingly in his/her report to the treating/referring physician/practitioner.

   a) **Test Design**.--Unless specified in the order, the interpreting physician may determine, without notifying the treating physician/practitioner, the parameters of the diagnostic test (e.g., number of radiographic views obtained, thickness of tomographic sections acquired, **use or non-use of contrast media**).

   b) **Clear Error**.--The interpreting physician may modify, without notifying the treating/referring physician/practitioner, an order with clear and obvious errors that would be apparent to a reasonable layperson, such as the patient receiving the test (e.g., x-ray of wrong foot ordered).

   c) **Patient Condition**.--The interpreting physician may cancel, without notifying the treating/referring physician/practitioner, an order because the patient’s physical condition at the time of diagnostic testing will not permit performance of the test (e.g., a barium enema cannot be performed because of residual stool in colon on scout KUB; PA/LAT of the chest cannot be performed because the patient is unable to stand). When an ordered diagnostic test is cancelled, any medically necessary preliminary or scout testing performed is payable.

5) **Authorization**.
   a) The testing facility must contact One Call Medical and request authorization for the newly ordered test.
   b) The Customer Contact Center Agent (CCC Agent) must contact the adjuster/Nurse Case Manager (NCM) for authorization on the newly ordered test and document receipt of the authorization in Intrepid Notes.
   c) Upon receipt of authorization from adjuster/NCM, the CCC Agent will fax the “Notification of Appointment” to the testing facility.

6) **Additional Issues/Questions**.
Additional issues/questions should be referred to the Clinical Services Message Center for investigation and resolution by the Clinical Services’ staff under the supervision of the Radiology Advisory Board.

**SOURCES:**