

Radiology Services Ground Rules

2020

- 1. In addition to the General Ground Rules, the benefits payable in this section are payable subject to the general principle that:
 - > The procedure is performed or personally supervised by the claiming radiologist
 - > Written report and/ or discussion with the referring doctor
 - Is restricted to the procedures listed in the Schedule of Benefits and carried out in approved hospital facilities for inpatients
- 2. The surgical benefit shown is inclusive of services such as ultrasound and/or radiological guidance. Some of the procedures, by definition, embrace lesser procedures which may be listed in their own right in the Schedule of Benefits. The lesser procedures attract benefit only when performed alone for a specific purpose but not when they form an integral part of another procedure.
- 3. The benefits towards diagnostic radiology procedures are payable in respect of consultant radiologists' services only. Radiological procedures are only payable when the radiological procedure(s) has been requested by the admitting consultant or by a second consultant who is attending the patient at the request of the admitting consultant, in a complex case and where Irish Life Health has agreed to pay a consultant consultation benefit to the second consultant.
- 4. Diagnostic radiology procedures, performed on an out-patient basis, may only be included in an out-patient claim (standard rates applicable) except for a barium enema or CT colonography within 42 days following procedure code 450, 454 or 456 (colonoscopy one side or incomplete colonoscopy). The barium enema or CT colonography in this circumstance will be paid with the hospital claim for the colonoscopy procedure.
- 5. Diagnostic radiology procedures, performed as part of a day case, or side room claim are allowable as these types of claim are considered in-patient hospital claims.
- 6. MRI scans benefit is subject to the following criteria:
 - > Performed at an Irish Life Health approved MRI centre or hospital
 - > Been referred by a consultant physician/surgeon/general practitioner
 - > For MRI Cardiac, these must be referred by a consultant physician or surgeons
 - Consultant radiologist benefit for MRI is payable for diagnosing or out-ruling agreed medical conditions only for those clinical indications listed and for the conditions as coded and this relevant code must be included on the invoice(s) for MRI services
- CT scans (Computerised Axial Tomography) are only payable following Consultant physician or surgeon referral
- 8. PET-CT (Positron Emission Tomography, incorporating Computerised Axial Tomography) scan, benefit is subject to the following criteria:
 - > Prior approval must be sought from Irish Life Health
 - The member is referred for a PET-CT scan by an Irish Life Health registered consultant

- The PET-CT scan is carried out at a PET-CT facility approved by Irish Life Health for the purposes of providing benefit for its members
- > The PET-CT scan is carried out for one of the clinical indications specified and coded
- 9. For hospitals which operate through the Irish Life Health direct settlement of hospital and associated consultant professional fee charges, the claiming of radiology benefit will continue on the basis of a fully completed and collated Irish Life Health claim form as completed by the admitting consultant surgeon/ physician, which will be submitted by the hospital in conjunction with its own invoice for services provided.

However, in exceptional circumstances when unforeseen delays occur in the submission of a claim in excess of three months from the date of test/service due to extenuating circumstances, the consultant radiologist may submit to Irish Life Health, a completed claim form which must include:

- > Side 1 of the form completed and signed by the Irish Life Health member
- Side 2 of the claim form completed in as far as is possible by an attending consultant (including a consultant radiologist involved in the care of the patient), to comprise clinical data including member discharge summary (where available)
- All other invoices related to the admission are attached to the claim i.e. hospital and other secondary consultants invoices.

This exception may not be availed of, for routine bill submission due to routine or ongoing completion delays by either the submitting hospital or the admitting consultant. For a specific consultant (or consultant group) to avail of this facility they must notify the Claims Manager of Irish Life Health in advance of the claim submission to ensure that issues arising from the use of this exemption are maintained at a minimal level.

- 10. Interventional radiologists may only claim the procedure benefit in accordance with the ground rules included in the General Surgery Rules of the Schedule of Benefit for Professional Fees and is inclusive of ultrasound or radiological guidance.
- 11. In all cases, the code of the precise investigation(s) carried out and the date of the test(s) must be reported on the invoice to Irish Life Health.

Consultant Radiologist In-Patient Consultation

An in-patient consultation is payable to a consultant radiologist where the patient is transferred from one hospital to another and admitted to the second hospital for tertiary level care arising from a complicated illness, e. g, oncology, neurosurgery, serious trauma, etc. It involves a complete evaluation of the original radiological results in associating with any additional clinical work-up necessary in the second hospital including the provision of a written report from the consultant radiologist. (Additional radiology procedures performed in the second hospital may be claimed separately).