

## Reimbursement policy update: Multiple diagnostic imaging facility (Facility)\*

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We will apply multiple imaging reimbursement rules to the technical component of diagnostic imaging procedures effective for claims with dates of service on or after February 1, 2021. These rules are not limited to contiguous body areas. Multiple imaging reimbursement rules are applied to the maximum allowance for the technical component (TC) of the following diagnostic imaging procedures rendered on the same date of service and eligible for reimbursement: ultrasound, computed tomography (CT), computed tomographic angiography (CTA), magnetic resonance imaging (MRI), and magnetic resonance angiography (MRA).

When two or more imaging procedures are performed in the same facility on the same patient using the same modality during the same imaging session and reported as technical component (TC) only, reimbursement is:

- 100% of the highest facility allowance for the first imaging procedure for the date of service.
- 50% of the facility allowance for each subsequent imaging procedure for that date of service.

Please review the policy in its entirety for more detailed information.

For more information about this policy, visit the Reimbursement Policies webpage for your state: [Indiana](#), [Ohio](#)

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