

PreferredOne

DEPARTMENT: Pricing & Payment	APPROVED DATE: 1/1/2018
POLICY DESCRIPTION: Modifier FY	
EFFECTIVE DATE: 8/13/2018	
PAGE: 1 of 1	REPLACES POLICY DATED:
REFERENCE NUMBER: P#28	RETIRED DATE:

SCOPE: Claims, Coding, Customer Service, Medical Management, Finance, Network Management

PURPOSE: To provide reimbursement guidelines for modifier FY (X-ray taken using computed radiography technology/cassette-based imaging)

POLICY: PreferredOne will require the use of the FY modifier when services are furnished by using computed radiology technology imaging. Computed radiology technology is defined as cassette-based imaging which utilizes an imaging plate to create the image involved. This will result in a payment reduction.

COVERAGE: Coverage is subject to the terms of an enrollee's benefit plan. To the extent there is any inconsistency between this policy and the terms of an enrollee's benefit plan, the terms of the enrollee's benefit plan documents will always control. Enrollees in PreferredOne Community Health Plan (PCHP) and some non-ERISA group health plans that PreferredOne Administrative Services, Inc, (PAS) administers are eligible to receive all benefits mandate by the state of Minnesota. Please call customer service telephone number on the back of the enrollee's insurance card with coverage inquiries.

PROCEDURE:

1. This policy applies to both facility UB04 and professional 837P or CMS-1500 claim forms.
2. When services are furnished by computed radiology technology imaging, provider will use the modifier FY.
3. Modifier FY will result in the payment reduction of the technical (TC) allowed amount.
4. This does not apply to professional interpretation and report when billed with modifier -26.

DEFINITIONS:

REFERENCES: Pricing and Payment Policy #18 Modifier Payment Reductions