



## TELEMETRY PAYMENT POLICY

**1. Effective June 1, 2007, the “Guidelines for the Use of Telemetry” under Diagnostic Radiology are deleted and replaced with the following:**

Definition

Diagnostic Radiology Telemetry: the electronic transmission of radiological images from one site to another for interpretation.

For diagnostic radiology telemetry services to be considered as benefits under the Medical Services Plan:

- the transmitting and receiving sites must be located within Medical Services Commission approved and Diagnostic Accreditation Program accredited diagnostic facilities;
- the services are rendered to out-patients
- the services are billed in accordance with the Telemetry Billing Guidelines

**2. Effective June 1, 2007, the “Guidelines for the Use of Telemetry” under Nuclear Medicine are deleted and replaced with the following:**

Definition

Nuclear Medicine Telemetry: the electronic transmission of nuclear medicine images from one site to another for interpretation.

For nuclear medicine telemetry services to be considered as benefits under the Medical Services Plan:

- the transmitting and receiving sites must be located within Medical Services Commission approved and Diagnostic Accreditation Program accredited diagnostic facilities;
- the services are rendered to out-patients
- the services are billed in accordance with the telemetry billing guidelines

**3. Effective June 1, 2007, the “Guidelines for the Use of Telemetry” under Diagnostic Ultrasound are deleted and replaced with the following:**

Definition

Diagnostic Ultrasound Telemetry: the electronic transmission of diagnostic ultrasound images from one site to another for interpretation.

For diagnostic ultrasound telemetry services to be considered as benefits under the Medical Services Plan:

- the transmitting and receiving sites must be located within Medical Services Commission approved and Diagnostic Accreditation Program accredited diagnostic facilities;
- the services are rendered to out-patients
- the services are billed in accordance with the telemetry billing guidelines

Real time ultrasound fees may only be claimed for studies performed by telemetry when

- the facility currently holds a remote site designation from the Medical Services Commission. (Facilities should recognize that once the volume of services justifies full-time radiologist's coverage remote site designation may be removed.); and,
- the use of telemetry will not negatively affect the existing on-site visit schedules of the radiologists; and,
- the majority of scans will continue to be scheduled when the visiting radiologist is on-site for the purpose of ultrasound supervision.

### **TELEMETRY BILLING GUIDELINES**

- a) Services must be billed by the facility where the image was taken using the practitioner number of the physician who did the interpretation\*
- b) Facility number field – the facility number of the diagnostic facility where the image was taken
- c) Sub-Facility field - the facility number of the diagnostic facility where the image was interpreted  
- zeros if interpreted at the same site where the image was taken
- d) Service charges (fee items 01200 – 01202) are only billable when a physician is required to travel from home to hospital in order to perform a telemetry service for an outpatient and when the *MSC Payment Schedule* criteria are met.
- e) The original site should ensure that only one interpretation is billed to MSP.
- f) In those rare cases when a second radiological opinion is requested by the referring physician, a radiologist may bill for the service using fee item 08628, provided written radiological report is sent to the referring physician