

Billing Made Easy with vRad

Billing for final interpretations

The billing rules for outsourced final interpretations may appear complex, but vRad's proven process and experienced team make it easy. vRad's experience and depth of knowledge in this area ensures ease of integration, implementation and ongoing administration. vRad has helped more than 300 clients successfully implement their final interpretation billing programs.

With vRad, you have two billing options for final interpretations:

1. Payer Direct
2. Fee for Service

1. Payer Direct — *vRad bills third-party payers directly as payment for interpretations performed**

When you choose the Payer Direct option, you authorize vRad to bill payers directly and collect reimbursement as payment for interpretations performed.* Payer Direct saves you time and administration and reduces your reimbursement risk. The process starts with an evaluation of your payer and modality mix to evaluate your eligibility for the Payer Direct program.

vRad works with you to establish an electronic integration (often HL7) between your systems and vRad's radiology technology platform, in order to efficiently receive patient demographic information required for billing.

The Payer Direct billing option requires approximately 90 days to complete; from initiation to integration. This time also is used to contract and enroll vRad-affiliated radiologists with your third-party payers. Your vRad representative will walk you through every step.

2. Fee for Service — *You pay vRad a fee for all interpretations performed; you bill commercial third party payers directly and vRad bills Medicare and redirects reimbursement to you.*

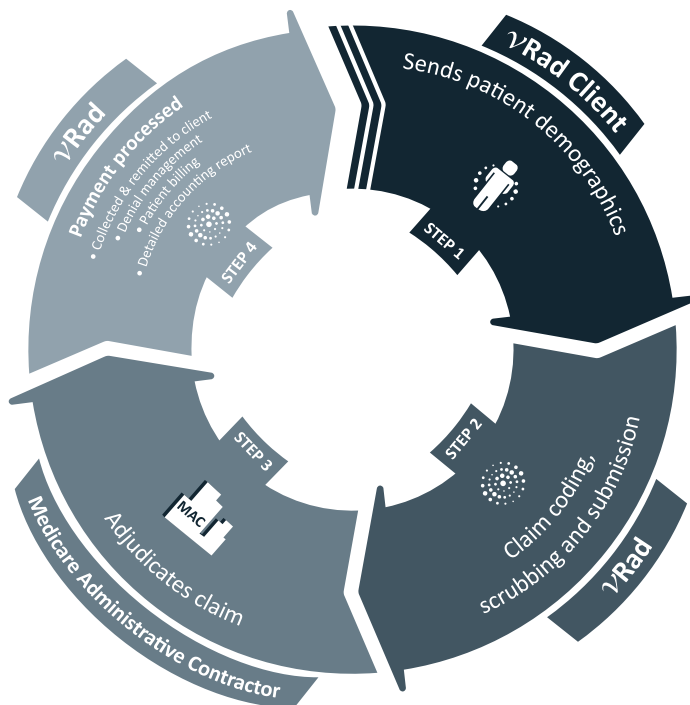
vRad's experienced team walk you through the set-up of the time-tested and proven process. After implementation, vRad provides detailed accounting reports, denial management, and patient billing for Medicare patients.



- **Private Commercial Insurance**—vRad radiologists can be added to your existing contracts for most payers; you bill payers directly. vRad completes any necessary enrollment documents so you continue to process teleradiology-delivered final interpretation claims like any other claims.
- **Medicaid**—vRad assists with enrolling our radiologists into your Medicaid program; you bill Medicaid directly. Most states allow out-of-state providers.
- **Medicare**—vRad secures Medicare payments and redirects payment directly to you. Centers for Medicare & Medicaid Services (CMS) policy requires the professional component for any teleradiology-delivered final interpretation to be submitted directly to the Medicare Area Contractor (MAC) covering the area in which the radiologist performing the interpretation is located. The location of the interpreting radiologist is designated as the place of service (POS) rather than the location in which the patient was scanned.

This policy presents reimbursement challenges to final interpretation clients, since they do not typically have relationships established with MACs outside their local area. To secure reimbursement according to CMS guidelines, you can either establish your own group practices (which can take anywhere from 90 to 180 days) or have vRad obtain reimbursement from Medicare under its affiliated practice’s billing procedures and release the payment to the client less a transactional fee.

vRad’s Medicare Billing Process



Medicare Claims Processing Manual

10.1.1.3 - Payment Jurisdiction for Reassigned Services (Rev.1987, Issued: 06-11-10, Effective: 08-12-10, Implementation: 08-12-10)
 Through a supplier or provider may reassign payment for his services to another entity, suppliers are still required to bill the correct B/MAC for reassigned services when they are paid under the MPFS. The billing entity must submit claims to the B/MAC that has jurisdiction over the geographic area where the services were rendered. Suppliers and providers must also meet current enrollment criteria stated in chapter 10 of the Program Integrity Manual in order to be able to bill for reassigned services.

10.6.1 - “The POS code for a teleradiology interpretation is generally the place where the interpretation is read. The ZIP code for the POS shall be based on the setting/location where the interpretation takes place.”