

Policy Updates and Coding Edits for Multiple Diagnostic Imaging, Cardiovascular, and Ophthalmology **Effective May 1, 2024**

Effective May 1, 2024, Florida Blue's policy for the Multiple Imaging Reduction, Multiple Diagnostic Cardiovascular Procedure Reduction, and Multiple Diagnostic Ophthalmology Procedure Reduction will change. This changes our current method of calculating the reduction when multiple services are performed on the same day by the same physician or physician group.

In addition, we will implement new coding edits affecting payment for the professional component of multiple imaging procedures performed on the same day by the same physician or physician group. These coding edits apply to services covered by Florida Blue and/or Health Options plans, including Traditional, BlueChoice, BlueOptions, BlueCare, and Florida Blue Medicare (HMO and PPO). It also applies to BlueCard host and Federal Employee Program® (FEP) claims.

Below is a summary of these updates.

Multiple Imaging Reduction

The coding edit will apply a 50% reduction to the technical component (TC) and a 5% reduction to the professional component (PC) of second and subsequent procedures. When two or more imaging procedures are reported, the primary imaging procedure is determined by the procedure with the highest Relative Value Unit (RVU). The primary imaging procedure will be eligible for 100% of the allowance for that procedure. The payment reduction applies to the TC and PC for global services and to the TC and PC only of the second and subsequent imaging procedures. The policy has been revised to outline the new method of calculating the reduction based on a percentage value (rounded to the nearest thousandth) of the total global RVU.

Multiple Diagnostic Cardiovascular Procedure Reduction

The primary diagnostic cardiovascular procedure will be eligible for 100% of the allowance for that procedure. The payment reduction applies to TC only and the TC for global services. The coding edit will continue to apply a 25% reduction to the TC of second and subsequent cardiovascular procedures. The policy has been revised to outline the new method of calculating the reduction based on a percentage value (rounded to the nearest thousandth) of the total global RVU.

Multiple Diagnostic Ophthalmology Procedure Reduction

The primary diagnostic ophthalmology procedure will be eligible for 100% of the allowance for that procedure. The payment reduction applies to TC-only services and the TC for global services. The coding edit will continue to apply a 20% reduction to the TC of second and subsequent ophthalmology procedures. The policy will outline the new method of calculating the reduction based on a percentage value (rounded to the nearest thousandth) of the total global RVU.

More information about these policy updates, a complete listing of procedures subject to payment changes, and an example of how the change is applied can be found on the Florida Blue website.

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