

## Contracting & Payer Relations

### **Tufts Health Plan Update – New Commercial Coding Edit – Diagnostic and Radiology Services**

Effective for dates of services on or after February 1, 2009, Tufts Health Plan will not reimburse a diagnostic test or radiology service billed with modifier 26 (professional component) and modifier TC (technical component) if the technical and professional components of the service are performed by the same provider billed on the same or different claim on the same date of service. According to the AMA Principles of CPT Coding, it is not appropriate to report the components of the professional and technical service separately.

This change applies to commercial professional providers and is documented in the Imaging Professional Payment Policy.

For more information, go to [www.tuftshealthplan.com/providers](http://www.tuftshealthplan.com/providers).

If you have any questions, please contact Tufts Health Plan's Provider Services Department at 1-888-884-2404.

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