Modifier KX Guidelines for Use of Imaging Studies when FEP Patient Presents with a Primary Diagnosis of Uncomplicated Low Back Pain

## Operational Policy Guidelines for Appropriate Use of Imaging Studies

Arkansas Blue Cross and Blue Shield is committed to helping providers manage patients in a high quality, costeffective manner. Therefore, we are adopting recommendations from NCQA and multiple professional societies regarding reimbursement for imaging studies.

**Federal Employee Program (FEP) Members Age 18-75** (Excludes Facility and Emergency Room Claims) Effective January 1, 2023, claims filed for Xray imaging studies performed within 28 days of a <u>primary</u> diagnosis of uncomplicated low back pain require modifier KX when the criteria below is met. Advanced imaging, CT, MRI and PET scan must go through AIM for prior approval and the KX modifier is not required for AIM submission.

## **Qualifying Claims**

All imaging study claims for FEP patients age 18-75 meeting the specifications below are subject to this policy:

• Outpatient Visit

OR

Observation/Visit

OR

• Osteopathic or Chiropractic Manipulation, Physical Therapy, Telehealth Visit or Online Assessment

AND

• Imaging Study Performed

AND

• Principal/Primary Diagnosis of Uncomplicated Low Back Pain

## Guidelines

Modifier KX should be included on qualifying claims for uncomplicated low back pain imaging only if the claim meets one or more of the following criteria:

• Diagnosis of Uncomplicated Low Back Pain (within the most recent 6 months).

OR

• Cancer, History of Cancer, HIV or Major Organ Transplant <u>any time prior through 28 days following the</u> <u>imaging study event date.</u>

OR

• Recent Trauma within 90 days prior through 28 days following the imaging study event date.

OR

• IV Drug Abuse, Neurologic Impairment or Spinal Infection within 12 months prior through 28 days following the imaging study event date.

OR

• Prolonged corticosteroid use for 90 <u>consecutive</u> days <u>from 12 months prior to the imaging study event date</u> <u>through the day of the imaging study event.</u>

Description	Prescription
Corticosteroid	Hydrocortisone
	Cortisone
	Prednisone
	Prednisolone
	Methylprednisolone
	Triamcinolone
	Dexamethasone
	<ul> <li>Betamethasone/Betamethasone Acetate</li> </ul>

OR

• Hospice services received within the most recent 12 month period.

OR

• Evidence of Osteoporosis or Osteoporosis Therapy any time during the member's history or <u>within 28 days</u> <u>following the imaging study event date.</u>

Osteoporosis Medications			
Description	Prescription		
Bisphosphonates	<ul> <li>Alendronate</li> <li>Alendronate-cholecalciferol</li> <li>Ibandronate</li> <li>Risedronate</li> <li>Zoledronic Acid</li> </ul>		
Other Agents	<ul> <li>Abaloparatide</li> <li>Denosumab</li> <li>Raloxifene</li> <li>Romosozumab</li> <li>Teriparatide</li> </ul>		

OR

• Fragility Fracture within the most recent 3 months or within 28 days following the imaging study event date.

OR

• Lumbar Surgery anytime during the member's history or <u>within 28 days following the imaging study event</u> <u>date.</u>

OR

• Spondylopathy diagnosis anytime during the member's history <u>or within 28 days following the imaging</u> <u>study event date.</u>

OR

• Palliative Care services received within the most recent 12-month period.

OR

- Member is age 66+ AND meets the following criteria for Advanced Illness and Frailty anytime within the most recent 12-month period:
  - Encounter or Diagnosis claim for Frailty <u>within the most recent 12-month period</u> AND
  - At least 1 of the following events within the most recent 24-month period:
    - Diagnosis of Advanced Illness in at least 1 acute inpatient encounter or acute inpatient discharge
    - Diagnosis of Advanced Illness on at least 2 outpatient visits, observation visits, Emergency Room visits, telephone visits, e-visits or virtual check-ins, or non-acute inpatient encounters or discharges (on different dates of service)
    - Dispensed Dementia Medications

Dementia Medications		
Description	Prescription	
Cholinesterase Inhibitors	Donepezil Galantamine Rivastigmine	
Miscellaneous Central Nervous System Agents	Memantine	
Dementia Combinations	Donepezil-memantine	

Please refer to the Low Back Pain Code Sets list <u>here</u> for more information.

If any one of the above exclusions has been met, then use of the KX modifier on the claim is appropriate and the claim will be paid. If none of the above is applicable to the member, then use of the KX modifier is not appropriate and the claim will be subject to reject due to inappropriate use of imaging studies for a diagnosis of uncomplicated low back pain. Providers by using the KX modifier are attesting that the Imaging study meets medical necessity requirements. NOTE: The patient will be held harmless if a claim is rejected under this policy.

## **Medical Record Documentation Requirements**

- All documentation supporting use of modifier KX on the claim must be maintained in the patient's medical record and available upon request. All claims and medical records are subject to audit at Arkansas Blue Cross and Blue Shield discretion.
- Every page of the record must be legible and include appropriate patient identification information (e.g., complete name, dates of service). The record must include the identity of the physician or non-physician practitioner responsible for and providing the care of the patient.
- The submitted medical record should clearly describe the service(s) performed.
- Medical record documentation (e.g., history and physical, progress notes) maintained by the ordering physician/treating physician must indicate the medical necessity for performing an imaging study. All tests must be ordered in writing by the treating provider.
- When an imaging study for uncomplicated low back pain is performed, the patient's medical record must show medical necessity criteria outlined in this policy was met.
- It is not considered reasonable or necessary to perform imaging studies (e.g., X-ray) when the patient presents with a diagnosis of uncomplicated low back pain only and no other concurrent diagnosis as outlined in this policy.

For more information regarding imaging for uncomplicated low back pain, refer to the letter from Dr. Mark Jansen, Chief Medical Officer Arkansas Blue Cross and Blue Shield