

NIA-Rad MD Pre-authorization

▶ Visit www.RadMD.com

▶ Call **866.249.1587**

Monday – Friday: 7:00 a.m. to 7:00 p.m.

High Tech Imaging Services

Pre-authorization is required for procedures in each of the categories below. Authorizations are required for studies rendered in an outpatient setting such as a provider's office, free-standing center (including radiology center) or in a hospital outpatient department:

- CT Scans
- Nuclear Medicine
- MRI/MRA
- Stress Echo
- Echocardiography
- Nuclear Cardiology
- PET Scans

Rendering Location Exclusions:

- Imaging studies performed in conjunction with emergency room services
- Inpatient hospitalization
- Outpatient surgery (hospitals and free-standing surgery centers)
- 23-hour observations

Eligibility Verification

Providers should verify member eligibility prior to requesting/providing services.

Verify Member's ID Card

At each visit, the office should ask to see the member's ID card to verify eligibility and to collect the appropriate copayment.

To Check Eligibility

Use one of the following options:

1. Log in at QualChoice.com.
2. Call Customer Service:
Monday – Friday, 8 a.m. to 5 p.m.
501.228.7111 or
800.235.7111 (outside central Arkansas)

Claims Submission

Provider should submit claims to QualChoice. Provider NPI# is required.

PRE-AUTHORIZATIONS ARE VALID FOR 45 CALENDAR DAYS

Referring providers are responsible to notify patients regarding approved services. Failure to obtain pre-authorization will result in payments being denied and the member will be held harmless.

► **Complete Pre-certification Request**

Responsibility of Ordering Provider

Patient Information

- Health plan name
- Patient's QualChoice ID number
- Patient's name and date of birth
- Patient's address and phone number

Medical Identifiers

- Name, NPI and phone number and fax number of ordering providers
- Requested examination and anticipated date of service
- Name of facility where services will be performed, address, TIN, requested setting (inpatient, outpatient, ambulatory surgical center)

Clinical Information

- Requested examination(s) with CPT code(s)
- Diagnosis or "rule out" with ICD-10 code(s)
- Details justifying examination, symptoms and their duration; physical exam and findings; attempted treatments, completed for 6 weeks within the last 6 months
- Any additional information, including but not limited to previous diagnostic tests, consultation reports, etc.
- Reason the study is being requested; please be prepared to send clinical information if requested

► **The Pre-authorization Process**

Supply all information listed above. Clinical history and diagnostic information will determine if the procedure meets medical criteria.

- All decisions are made by licensed healthcare professionals.
- Reviews of non-urgent cases are completed within two (2) working days of receipt of information.

- Ordering & performing providers will be notified of determination.
- Ordering & performing providers can check authorization status online at [RadMD.com](https://www.radmd.com).

Approvals: Requests meeting criteria for medical necessity will be approved. Ordering and performing providers will receive approval and authorization number by telephone and in writing.

Withdrawal: If ordering providers agree the requested service is not appropriate, s/he may withdraw the request.

Non-certified (Adverse Determination): Studies that do not meet criteria for medical necessity will not be authorized.

- Before a final decision, additional clinical information may be requested from the ordering providers.
- The requesting providers, as the patient designee, will be notified of the adverse determination by phone. The patient is notified by mail, as required by law.
- Notification will include reason(s) for denial and the member's appeal rights.
- Providers may provide additional information and request reconsideration from RadMD. Call 866.249.1587.

Appeals: Members for whom a procedure has been denied have the right to initiate an appeal to QualChoice.

Providers may refer to the adverse determination notification when filing a *Request for Reconsideration* with QualChoice or by calling QualChoice Customer Service at 800.235.7111.

► **Urgent Cases**

Authorization requests may be made on an urgent basis if medically required. Decisions for urgent requests are made within three (3) hours of NIA RadMD receiving all required information.