

Operations Bulletin 05-10



Date: November 30, 2010

To: «last_name»
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«city», «state» «Zip5»

Subject: Outpatient Advanced Diagnostic Imaging Services

National Imaging Associates (NIA) provides utilization management services for non-emergent, advanced diagnostic imaging for Geisinger Health Plan¹. In the interest of streamlining authorization processes and improving patient outcomes, the Health Plan has expanded its partnership with NIA.

Beginning February 1, 2011, the following additional services will be performed by NIA:

1. Prior authorization for certain outpatient radiology & cardiac-related procedures (Refer to the coding matrix for code specifics).
2. Provider assessment, privileging application and approval program.
3. Provider billing and reimbursement policies changes.

Provider Education Webinars

We encourage all rendering and ordering radiology & cardiac providers to attend one of our upcoming Provider Education Webinars to learn more about NIA's outpatient imaging program and what it means to you. Hour-long Provider Education Webinars will take place on the following dates:

- December 6, 2010 8:00 am and 12:00 pm
- December 9, 2010 8:00 am and 12:00 pm
- December 10, 2010 8:00 am and 12:00 pm
- December 13, 2010 8:00 am and 12:00 pm
- December 16, 2010 8:00 am and 12:00 pm
- December 17, 2010 8:00 am and 12:00 pm
- January 4, 2011 8:00 am and 12:00 pm
- January 6, 2011 8:00 am and 12:00 pm
- January 7, 2011 8:00 am and 12:00 pm

Information reviewed during the session will include a listing of services requiring prior authorization, privileging assessment and application process, claim processing and adjudication guidelines, and additional educational contacts. **Please RSVP at least 1 week prior to the education seminar you plan to attend by calling an NIA representative at (800) 327-0641.** After your RSVP, you will receive a confirmation email from NIA for the Webinar session you have selected. The confirmation email will also include a toll-free dial-in number with access code and web meeting address.

¹ Geisinger Health Plan, Geisinger Indemnity Insurance Company, and Geisinger Quality Options, Inc. shall be collectively referred to herein as "the Health Plan."

This Operations Bulletin amends the Health Plan's Participating Provider Guide Dev. 10/08. If you have any questions regarding this bulletin, please contact your Provider Relations Representative at the applicable phone number below.

Danville: (800) 876-5357
(570) 271-5140

Harrisburg: (888) 281-5338
(717) 909-3340

Scranton: (800) 350-6486
(570) 341-1754

State College: (888) 669-4834
(814) 238-0028

Effective February 1, 2011 - Prior Authorization Requirements

Prior-authorization through NIA is currently required for these outpatient radiology procedures:

- CT/CTA
- MRI/MRA
- PET Scan
- Nuclear Cardiology (MPI)
- Diagnostic Nuclear Medicine

Effective February 1, 2011, these outpatient cardiac-related procedures will also require prior-authorization:

- CCTA
- Echocardiography
- Stress Echo

NIA's Prior-Authorization guidelines will be posted under the "Health Plan Alerts" section of NIA's website at www.RadMD.com.

Key Provisions:

- Emergency room, observation and inpatient imaging procedures do not require authorization.
- The ordering physician must obtain authorization.
- Failure to verify that services have been preauthorized may result in non-payment of your claim.

Please note: Prior-authorization requirements may not apply to Members with an employer self-funded plan for which the Health Plan acts as Third Party Administrator. These identification cards are often green marble in color. Always check the Member's identification card for plan type, copayment information and contact NIA at 866-305-9729 or the Health Plan's Customer Service Team at the telephone number listed on the back of the Member's identification card to verify eligibility.

To obtain prior authorization:

- Contact NIA at 866-305-9729, 8:00 am to 8:00 pm or at www.RadMD.com.
- If a current authorization is required and cannot be located at www.RadMD.com, contact the ordering provider to advise that prior authorization must be obtained and have the ordering provider (or their staff) call NIA to request an initial authorization.

For complete information on prior authorization processes, please refer to the Participating Provider Guide available online at: www.thehealthplan.com/providers_us/guides/guide.cfm.

Effective February 1, 2011 - Provider Assessment & Privileging

NIA's privileging program policies establish reasonable and consistent standards for the performance of all diagnostic imaging services. The program establishes minimum participation guidelines that include facility accreditation, equipment capabilities, physician and technologist education, training and certification, documented procedures for handling patient emergencies, ACLS or BLS certified physician supervision on-site during contrast enhanced procedures and physician on-site during normal business hours, and facility management components such as radiation safety guidelines (i.e., ALARA—As Low as Reasonably Achievable). These guidelines are established and refined with the consideration of the American College of Radiology (ACR) and other accreditation bodies, diagnostic imaging common practice standards, updated literature reviews, and new technology assessments. NIA provides ongoing monitoring of imaging practices and facilities.

The **privileging process** requires that you:

Complete NIA's online privileging application at www.RadMD.com. The online tool has an intuitive user interface and is very easy to use. Based on the information the provider submits, NIA is able to identify provider capabilities and indicate down to the CPT code level the imaging procedures (both advanced and non-advanced imaging modalities) that each location is approved to perform.

Attention Rendering Providers

In December 2010, you will receive an additional notice from NIA outlining their privileging assessment application process. You will have thirty (30) days to complete the application online at www.RadMD.com. Instructions and your unique login will be provided in the upcoming bulletin. Note: Each location will require a separate application to be completed. If you do not obtain approval by NIA for your free-standing or professional office location, advanced diagnostic imaging services will not be approved.

Effective February 1, 2011 - Billing and Reimbursement Policy

The Health Plan will adopt Medicare's policy for all product lines and begin to reimburse outpatient radiology providers using a multiple procedure payment reduction on the technical component (TC) of certain diagnostic imaging procedures. The reduction will be applied to the procedures shown below. Full payment will be made for the highest priced procedure. Each subsequent procedure performed during the same encounter will be reimbursed at fifty (50) percent. If a member has a separate encounter on the same day for a medically necessary reason and receives a second imaging service from the same code family, these are considered multiple studies in the same code family on the same day to be provided in separate sessions. The provider should use modifier -59 to indicate multiple sessions, and therefore the multiple procedure discount does not apply.

The imaging procedures included are arranged by imaging modality:

Family 1 – Ultrasound

Family 2 – CT and CTA with and without contrast

Family 3 – MRI and MRA with and without contrast

The Health Plan is committed to reimbursing providers promptly and accurately in accordance with our contractual agreements. We strive to inform providers of claims processing requirements in order to avoid administrative denials that delay payment and require resubmission of claims. The Health Plan will be using NIA claim editing guidelines on applicable claim encounters, and will reserve the right to rebundle to the primary procedure those services determined to be part of, incidental to, or inclusive of the primary procedure. Health Plan reserves the right to process the claim according to said standards.