December 1, 2011

Dear Provider:

Effective February 1, 2012, National Imaging Associates (NIA) will manage the authorization process for outpatient cardiac catheterizations for HealthAmerica's commercial, Medicaid (CoventryCares), and Medicare members. Prior authorization will be required for non-emergent, outpatient cardiac catheterizations CPT codes 93452 through 93461. HealthAmerica will continue to manage the authorizations for inpatient and emergency cardiac catheterization procedures.

The physician ordering the cardiac catheterization is responsible for obtaining prior authorization for outpatient cardiac catheterization services. The rendering facility must ensure that prior authorization was obtained. We recommend that you develop a process to ensure that the appropriate authorization number(s) has been obtained. Payment to the ordering physician and rendering facility will be denied for procedures performed without necessary authorization. The member cannot be balance-billed for such procedures.

Please refer to the enclosed materials for more information about the authorization process. The “Cardiac Catheterization Clinical Guideline for HealthAmerica” will be posted at http://www.radMD.com on December 1, 2011. To preview this guideline:

- Click on the “Health Plans” selection on the Home page menu bar.
- Scroll down to “Coventry/HealthAmerica” on the left side of the screen; click once to open.
- Click on the link below “Preview of Clinical Guidelines” to open the PDF document.

When used appropriately, cardiac catheterization is a useful tool for diagnosing cardiovascular vascular problems. Since catheterization is an invasive procedure with associated risks, it is important not to over-use it, especially for patients with low-risk, who are asymptomatic, or have no evidence of prior diagnostic testing.

We appreciate your continued support. If you have any questions, please contact your HealthAmerica Provider Relations representative.

Sincerely,

Robert S. Mirsky, M.D.
Chief Medical Officer

Enclosure(s)