

RadMD Quick Start Guide

Request an exam or specialty procedure

This Quick Start Guide is a tool to assist ordering providers and their staff in obtaining prior authorizations for specialty procedures quickly and easily via www.RadMD.com. To start, open your internet browser and visit RadMD. Click *Sign In* on the right-hand side of the screen. Enter your *Username* and *Password*, then click *Login*.

1. Request an exam or specialty procedure

From the main menu under *Request*, click *Exam or specialty procedure*.

Request
 → Exam or specialty procedure
 (including Cardiac, Ultrasound, Sleep Assessment)
 Physical Medicine
 Initiate a Subsequent Request
 Radiation Treatment Plan
 Pain Management
 or Minimally Invasive Procedure
 Spine Surgery or Orthopedic Surgery
 Genetic Testing

2. Identify the patient

Enter the patient's information (Member ID is optional).
 Click *Save and Continue to Step 2*.

* Last Name: Requires first two letters * First Name: Requires first letter

* Date of Birth: / /

* Health Plan: [Where are the other health plans?](#)

Member ID: Optional

3. Identify the physician

Enter physician search criteria.
 Click *Search*.

Search Physician
 Enter at least one search term. To narrow results, enter additional criteria.

Last Name: Requires two letters Address: Requires three characters

First Name: Requires two letters Zip: Must be five digits

Phone: Provider ID:

NPI: Must be ten digits Tax ID: Requires nine digits

4. Identify the exam(s)

Select the *Exam(s)* from the list.
 Click *Add* to choose an exam(s).
 Click *Save and Continue to Step 4*.

All Available Exams:
 Abdomen and Pelvis CT Angiography
 Abdomen CT
 Abdomen CT Angiography
 Abdomen MRA
 Abdomen MRI
 Abdominal Arteries CT Angiography
 Ankle CT (left)
 CPT4 / Keyword Lookup

Currently Chosen Exams:

5. Identify the rendering provider

Enter search criteria for a rendering provider.
Click *Search*.

Enter at least one search term.
To narrow results, enter additional criteria.

Name:

City:

Zip:

Tax ID:

NPI:

PIN:

Search

Back to Step 3 Save and Continue to Step 5

6. Reason for the exam

Enter at least one ICD-10 code.
Provide a reason in the text box.
Answer all of the questions.
Enter in the date of service if it is known.
Click *Save and Continue to Confirmation*.

Please answer some questions about the patient and the reason for the exam(s):

* ICD10 Code: [Add ICD10](#) [ICD10 Code Help](#)

*Please provide the reason for this exam(s):

*Is the cause of the illness/injury related to a Motor Vehicle Accident?

*Is Another Party Financially Responsible for the patient's illness/injury?

*Is the cause of the illness/injury related to the Patient's Employment?

Date of Service mm/dd/yyyy

Back (Step 4) Save and Continue to Confirmation

7. Confirm the ordering provider's phone & fax numbers

Enter in the physician's phone number, name and fax number along with the member's phone number.
Click *Continue to Final Confirmation*.

National Imaging Associates may need to contact the ordering provider in regards to this request.

Phone Number:

Contact Name:

Fax Number:

Confirm Fax Number:

Member's Phone Number:

Paperless Option

In an effort to minimize our impact on the environment, Magellan is defaulting communications, including service request notifications, to paperless/electronic. Notifications will be sent to name@magellanhealth.com with a link to RadMD, where you can retrieve correspondence electronically. If you prefer to continue receiving paper correspondence, please change the selection below to No.

Yes No

Back (Step 5) Continue to Final Confirmation

8. Clinical questions: clinical Q/A

Answer questions specific to the procedure.
Click *Next* after answering each question.

Please confirm that this is a request for a Diagnostic CT and NOT a CT Needle Guidance (77011, 77012 or 77013)?

Yes this is a request for a Diagnostic CT
 No this is a request for CT Needle Guidance

Q/A History:

Back Next

The clinical question displayed is just an example.

9. Request complete

Final page confirms the request and displays current status. Click *Upload Clinical Document* to upload medical records/ additional clinical information.

Status	
Current Status:	Pending
Validity Period:	[Not Applicable]
Tracking Number:	0000000

Status	
Current Status:	Approved
Validity Period:	1/31/2014-4/1/2014
Authorization:	0000000

For pended requests, providers can fax or upload clinical documents to Magellan Healthcare*

- Files that can be uploaded include:
 - Microsoft Word documents (.docx files)
 - Image files (.gif, .png, .jpg, .tif and .tiff files)
 - Adobe Acrobat files (.pdf files) and
 - Text documents (.txt files)
- Files must be less than 100 MB in size

Questions? Comments? Need help?

Send an email to RadMDSupport@MagellanHealth.com. Or call toll-free 1-800-327-0641.

RadMD is available 24/7, except when maintenance is performed every third Thursday of the month from 9 p.m. - 12 a.m. PST.

* National Imaging Associates, Inc. is an affiliate of Magellan Healthcare, Inc.