



NIA Magellan¹ Frequently Asked Questions (FAQ's) For Virginia Premier Health Plan Providers

Question	Answer
GENERAL	
Why did Virginia Premier Health Plan implementing an outpatient imaging program?	To improve quality and manage the utilization of non-emergent CT/CTA, MRI/MRA, PET Scans, CCTA, Myocardial Perfusion Imaging and Muga Scan procedures for our members.
Why did Virginia Premier Health Plan select NIA Magellan to manage its outpatient advanced imaging services?	NIA Magellan was selected to partner with us because of its clinically driven program designed to effectively manage the quality, patient safety and while ensuring appropriate utilization of resources for Virginia Premier Health Plan membership.
Which Virginia Premier Health Plan members will be covered under this relationship and what networks will be used?	Effective November 1, 2011, NIA Magellan began managing non-emergent outpatient imaging services for Virginia Premier Health Plan membership through Virginia Premier Health Plan contractual relationships.
PRIOR AUTHORIZATION	
What is the implementation date	Implementation date was November 1, 2011.

¹ NIA Magellan refers to National Imaging Associates, Inc.

for this outpatient imaging program?	
What imaging services require provider's to obtain a prior authorization?	<p>The following imaging procedures require prior authorization through NIA Magellan:</p> <ul style="list-style-type: none"> • MRI/MRA • CT/CTA • PET • CCTA • Myocardial Perfusion Imaging • Muga Scan <p>Emergency room, observation and inpatient imaging procedures do not require prior authorization from NIA Magellan. If an urgent/emergent emergency clinical situation exists outside of a hospital emergency room, please contact NIA Magellan immediately with the appropriate clinical information for an expedited review.</p>
When is prior authorization required?	<p>Prior authorization is required for outpatient, non-emergent CT/CTA, MRI/MRA, PET Scans, CCTA, Myocardial Perfusion Imaging and Muga Scan procedures. Ordering providers must obtain prior-authorization of these procedures prior to the service being performed at an imaging facility.</p>
Is prior authorization necessary for sedation with an MRI?	<p>No, prior authorization is not required for sedation when performed with an MRI.</p>
Is an NIA Magellan authorization number needed for a CT-guided biopsy?	<p>No, prior authorization is not required for this procedure.</p>
Can a chiropractor order images?	<p>Yes</p>
Are routine radiology services a part of this program?	<p>No. Routine radiology services such as x-ray, ultrasound or mammography are not part of this program and do not require a prior authorization through NIA Magellan.</p>
Are inpatient advanced imaging procedures included in this program?	<p>No. Inpatient procedures are included in the authorization for the inpatient stay that is managed through the Virginia Premier Health Plan Medical Management Department.</p>
Is prior authorization required for imaging	<p>No. Imaging studies performed in the emergency room are not included in this program and do not require prior</p>

studies performed in the emergency room?	authorization through NIA Magellan.
How does the ordering provider obtain a prior authorization from NIA Magellan for an outpatient advanced imaging service?	Providers will be able to request prior authorization via the Internet (www.RadMD.com) or by calling NIA Magellan at 1-800-642-7578.
What information is required in order to receive prior authorization?	<p>To expedite the process, please have the following information ready before logging on to the Website or calling the NIA Magellan Call Center (*denotes required information):</p> <ul style="list-style-type: none"> ▪ Name and office phone number of ordering physician* ▪ Member name and ID number* ▪ Requested examination* ▪ Name of provider office or facility where the service will be performed* ▪ Anticipated date of service (if known) ▪ Details justifying examination.* <ul style="list-style-type: none"> • Symptoms and their duration • Physical exam findings • Conservative treatment patient has already completed (e.g., physical therapy, chiropractic or osteopathic manipulation, hot pads, massage, ice packs, medications) • Preliminary procedures already completed (e.g., x-rays, CTs, lab work, ultrasound, scoped procedures, referrals to specialist, specialist evaluation) • Reason the study is being requested (e.g., further evaluation, rule out a disorder)
Can a provider request more than one procedure at a time for a member (i.e., CT of abdomen and CT of thorax)?	Yes. NIA Magellan can handle multiple authorization requests per contact. Separate authorization numbers are issued by NIA Magellan for each study that is authorized.
What kind of response time can ordering	Generally, within 2 business days after receipt of request, a determination will be made. In certain cases, the review

providers expect for prior authorization?	process can take longer if additional clinical information is required to make a determination.
What does the NIA Magellan authorization number look like?	The NIA Magellan authorization number consists of 8 or 9 alpha-numeric characters. In some cases, the ordering provider may instead receive an NIA Magellan tracking number (not the same as an authorization number) if the provider's authorization request is not approved at the time of initial contact. Providers can use either number to track the status of their request online or through an Interactive Voice Response (IVR) telephone system.
If requesting authorization through RADMD and the request pends, what happens next?	You will receive a tracking number and NIA Magellan will contact you to complete the process.
Can RadMD be used to request an expedited authorization request?	No, those requests will need to be called into NIA Magellan's Call Center for processing. The number to call to obtain a prior authorization is 1-800-642-7578.
What happens if a patient is authorized for a CT of the abdomen, and the radiologist or rendering physician feels an additional study of the thorax is needed?	If the radiologist or rendering provider feels that, in addition to the study already authorized, an additional study is needed, please contact NIA Magellan immediately with the appropriate clinical information for an expedited review. The number to call to obtain a prior authorization is 1-800-642-7578.
Can the rendering facility obtain authorization in the event of an urgent test?	Yes, If an urgent clinical situation exists outside of a hospital emergency room, please contact NIA Magellan immediately with the appropriate clinical information for an expedited review. The number to call to obtain a prior authorization is 1-800-642-7578.
How long is the prior authorization number valid?	The authorization number is valid for 45 days from the date of service. When a procedure is authorized, NIA Magellan will use the date of the initial request as the starting point for the 45 day period in which the examination must be completed.

Is prior authorization necessary for an outpatient, advanced imaging service if Virginia Premier Health Plan is NOT the member's primary insurance?	Yes
If a provider obtains a prior authorization number does that guarantee payment?	An authorization number is not a guarantee of payment. Authorizations are based on medical necessity and are contingent upon eligibility and benefits. Benefits may be subject to limitations and/or qualifications and will be determined when the claim is received for processing.
Does NIA Magellan allow retro- authorizations?	It is important that rendering facility staff be educated on the prior authorization requirements. Beginning November 1, 2011, claims for non-emergent CT/CTA, MRI/MRA, PET Scans, CCTA, Myocardial Perfusion Imaging and Muga Scan procedures that have <u>not</u> been properly authorized will <u>not</u> be reimbursed. The rendering facility <u>should not</u> schedule procedures without prior authorization.
Can a provider verify an authorization number online?	Yes. Providers can check the status of member authorization quickly and easily by going to the Website at www.RadMD.com .
Will the NIA Magellan authorization number be displayed on the Virginia Premier Health Plan Website?	No.
SCHEDULING EXAMS	
How will NIA Magellan determine where to schedule an exam for a Virginia Premier Health Plan member?	NIA Magellan will manage non-emergent outpatient radiology services through Virginia Premier Health Plan's contractual relationships.
Why does NIA Magellan ask for a date of service when authorizing a procedure? Do physicians have to obtain an authorization before	At the end of the authorization process, NIA Magellan asks where the procedure is being performed and the anticipated date of service. The exact date of service is not required. Physicians should obtain authorization before scheduling the patient

they call to schedule an appointment?	
WHICH MEDICAL PROVIDERS ARE AFFECTED?	
Which medical providers are affected by the outpatient imaging program?	<p>Any provider who orders or performs advanced imaging procedures in an outpatient setting. Ordering providers will need to request a prior authorization and the delivering/servicing providers will need to be sure there is a prior authorization number in order to bill the service.</p> <ul style="list-style-type: none"> • Ordering providers, including Primary Care Providers (PCPs) and Specialty Care providers. • Delivering/Servicing providers who perform diagnostic advanced imaging procedures at: <ul style="list-style-type: none"> ▪ Freestanding diagnostic facilities ▪ Hospital outpatient diagnostic facilities ▪ Provider offices
CLAIMS RELATED	
Where do providers send their claims for outpatient, non-emergent advanced imaging services?	Providers should send claims to the address indicated on the back of the Virginia Premier Health Plan member ID card. Providers are also encouraged to follow their normal EDI claims process.
How can providers check claims status?	Providers should check claims status at the Virginia Premier Health Plan Website at www.Navinet.net .
Who should a provider contact if they want to appeal a prior authorization or claims payment denial?	Providers are asked to please follow the appeal instructions given on their non-authorization letter or Explanation of Payment (EOP) notification.
MISCELLANEOUS	
How is medical necessity defined?	<p>NIA Magellan defines medical necessity as services that:</p> <ul style="list-style-type: none"> • Meets generally accepted standards of medical practice; be appropriate for the symptoms, consistent with diagnosis, and otherwise in accordance with sufficient evidence and professionally recognized standards; • Be appropriate to the illness or injury for which it is performed as to type of service and expected outcome; • Be appropriate to the intensity of service and

	<p>level of setting;</p> <ul style="list-style-type: none"> • Provide unique, essential, and appropriate information when used for diagnostic purposes; • Be the lowest cost alternative that effectively addresses and treats the medical problem; and rendered for the treatment or diagnosis of an injury or illness; and • Not furnished primarily for the convenience of the member, the attending physician, or other provider.
<p>Where can a provider find NIA Magellan’s Guidelines for Clinical Use of Diagnostic Imaging Examinations?</p>	<p>NIA Magellan’s Clinical Guidelines can be found on NIA Magellan’s website, www.RadMD.com under Online Tools/Clinical Guidelines. NIA Magellan’s guidelines for the use of imaging examinations have been developed from practice experience, literature reviews, specialty criteria sets and empirical data. To get started, simply go to www.RadMD.com, click the New User button and submit a “RadMD Application for New Account.” Once the application has been processed and password link delivered by NIA Magellan via e-mail, you will then be invited to create a new password. Links to the approved training/education documents are found on the My Practice page for those providers logged in as Ordering Physician. If you are an Imaging Facility or Hospital that performs imaging exams, an administrator must accept responsibility for creating and managing all logins to RadMD. Your RadMD login information should not be shared.</p>
<p>What will the Member ID card look like? Will the ID card have both NIA Magellan and Virginia Premier Health Plan information on it? Or will there be two cards?</p>	<p>The Virginia Premier Health Plan Member ID card will not contain any NIA Magellan identifying information on it. No additional card will be issued from NIA Magellan.</p>
<p>What is an OCR Fax</p>	<p>By utilizing Optical Character Recognition technology, NIA</p>

<p>Coversheet?</p>	<p>Magellan can automatically attach incoming clinical faxes to the appropriate case in our clinical system. We strongly recommend that ordering providers print an OCR fax coversheet from www.RadMD.com or contact NIA Magellan at 1-888-642-7649 to request an OCR fax coversheet if their authorization request is not approved on-line or during the initial phone call to NIA Magellan. NIA Magellan can fax this coversheet to the ordering provider during authorization intake or at any time during the review process. By prefacing clinical faxes to NIA Magellan with an OCR fax coversheet, the ordering provider can ensure a timely and efficient case review.</p>
<p>CONTACT INFORMATION</p>	
<p>Who can a provider contact at NIA Magellan for more information?</p>	<p>Providers can contact, Charmaine Gaymon, Provider Relations Manager, at 1-800-450-7281, Ext. 32615 or 410-953-2615.</p>