

Tufts Health Public Plans Spinal Conditions Management Program and Joint Surgery Program Quick Reference Guide for Ordering Physicians/Surgeons

Effective December 1, 2015
Revised January 1, 2018

Tufts Health Public Plans has an agreement with National Imaging Associates, Inc. (NIA), for a Joint Surgery Program. This program includes prior authorization for non-emergent, inpatient and outpatient joint surgeries including diagnostic and surgical hip/knee/shoulder arthroscopy and arthrotomy, hip/knee/shoulder arthroplasty (including total and partial joint replacement/revision and removal) and knee manipulation under anesthesia. NIA's goal for this program is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

The following procedures are currently included in the Spinal Conditions Management Program for Tufts Health Public Plans members:

- Outpatient interventional spine pain management services
- Inpatient and outpatient lumbar and cervical spine surgeries

The following procedures will be added to Spinal Condition Management Program with the Joint Surgery Program

- Inpatient and outpatient knee surgeries - **Effective January 1, 2018**
- Inpatient and outpatient hip surgeries - **Effective January 1, 2018**
- Inpatient and outpatient shoulder surgeries - **Effective January 1, 2018**

Prior Authorization Implementation

As a provider of joint surgery services that require prior authorization, it is essential that you develop a process to ensure that the appropriate authorization number(s) has been obtained.

It is the responsibility of the ordering physician/surgeon and rendering facility to ensure that prior authorization was obtained, when necessary. Payment will be denied for procedures performed without a prior authorization, including the joint surgery hospital admission, and the member cannot be balance-billed for such procedures.

New Joint Surgery Procedures Requiring Prior Authorization

Outpatient and Inpatient Hip Surgery Services: **

- Revision/Conversion Hip Arthroplasty
- Total Hip Arthroplasty/Resurfacing
- Femoroacetabular Impingement (FAI) Hip Surgery (includes CAM/pincher & labral repair)
- Hip Surgery – Other (includes synovectomy, loose body removal, debridement, diagnostic hip arthroscopy, and extra-articular arthroscopy)

Outpatient and Inpatient Knee Surgery Services: **

- Revision Knee Arthroplasty
- Total Knee Arthroplasty (TKA)
- Partial-Unicompartmental Knee Arthroplasty (UKA)
- Knee Manipulation under Anesthesia (MUA)
- Knee Ligament Reconstruction/Repair
- Knee Meniscectomy/Meniscal Repair/Meniscal Transplant
- Knee Surgery – Other (includes synovectomy, loose body removal, diagnostic knee arthroscopy, debridement with or without chondroplasty, lateral release/patellar realignment, articular cartilage restoration)

**Surgeon must request surgery authorization for each joint, even if bilateral joint surgery is to be performed on the same date.

Outpatient and Inpatient Shoulder Surgery Services: **

- Revision Shoulder Arthroplasty
- Total/Reverse Arthroplasty or Resurfacing
- Partial Shoulder Arthroplasty/Hemiarthroplasty
- Shoulder Rotator Cuff Repair
- Shoulder Labral Repair
- Shoulder Surgery – Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, claviclectomy, diagnostic shoulder arthroscopy)

Current Procedures Requiring Prior Authorization (under the Spinal Condition Management Program)

Outpatient and Inpatient Spine Surgery Services:

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetectomy & Foraminotomy)
- Lumbar Spine Fusion (Arthrodesis) With or Without Decompression – Single & Multiple Levels
- Cervical Anterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression (without fusion)
- Cervical Artificial Disc Replacement
- Cervical Anterior Decompression (without fusion)

Outpatient Interventional Spine Pain Management Services*:

- Spinal Epidural Injections

- Paravertebral Facet Joint Injections or Blocks
- Paravertebral Facet Joint Denervation (Radiofrequency (RF) Neurolysis)

NIA will continue to manage non-emergent outpatient interventional spine pain management services. Effective January 2018, NIA will manage inpatient and outpatient joint surgeries including diagnostic and surgical hip/knee/shoulder arthroscopy and arthrotomy, hip/knee/shoulder arthroplasty (including total and partial joint replacement/revision and removal) and knee manipulation under anesthesia through the existing contractual relationships with Tufts Health Public Plans. If an urgent/emergent clinical situation exists outside of a hospital emergency room, please contact NIA immediately with the appropriate clinical information for an expedited review. The number to call to obtain a prior authorization is 1-800-207-4209 for Tufts Health Public Plans providers.

Please refer to NIA's website www.RadMD.com to obtain the Tufts Health Public Plans NIA Billable CPT® Codes Claim Resolution/Utilization Review Matrix for all of the CPT-4 codes that NIA authorizes on behalf of Tufts Health Public Plans.

Prior Authorization Information

To ensure that authorization numbers have been obtained, please adhere to the following guidelines.

Interventional Pain:

- Interventional pain management procedures performed in the emergency room or on an inpatient basis do not require prior authorization through NIA.
- All outpatient interventional pain management services require a prior authorization through NIA for each procedure performed.
- It is the responsibility of the ordering physician to obtain authorization for all interventional pain management procedures outlined. Failure to do so may result in non-payment of your claim.
- Authorizations are valid for 60 days from the date of service/request.

Outpatient and Inpatient Musculoskeletal and Joint Surgeries:

- Emergency musculoskeletal and joint surgery (admitted via the Emergency Room) does not require prior authorization through NIA.
- Non-emergent outpatient and inpatient joint surgery services, as listed above require prior authorization through NIA.
- Any Tufts Health Public Plans inpatient admission notification requirements for the facility or hospital admission must be obtained separately and only initiated after the surgery has met NIA's medical necessity criteria.
- NIA's medical necessity review and determination is for the authorization of the surgeon's professional services and type of surgery being performed. NIA will provide Tufts Health Public Plans with the surgery type requested and authorization determination.
- Authorizations are valid for 60 days from the date of service/request.

Checking Authorizations

You can check on the status of patients' authorizations quickly and easily by going to the NIA website, www.RadMD.com. After obtaining a secure password sign-in to select, the **My Exam Requests** tab to **view all** outstanding authorizations.

Submitting Claims

Claims will continue to go directly to Tufts Health Public Plans. Please send your claims for spinal condition management and joint surgery procedures to the following address:

Tufts Health Public Plans
Attn: Claims Department
P.O. Box 9163
Watertown, MA 02471-9163

Quick Contacts

- Website: www.RadMD.com
- Toll Free Phone Numbers:
- 1-800-207-4209

Providers are encouraged to use EDI claims submission.

Tufts Health Public Plans payor ID number is 04298.

Frequently Asked Questions

In this section NIA addresses commonly asked questions received from providers.

Where can I find NIA's Guidelines for these MSK procedures?

Guidelines can be found on NIA's website at www.RadMD.com.

Is prior authorization necessary if Tufts Health Public Plans is not the member's primary insurance?

Yes.

What does the NIA authorization number look like?

The NIA authorization number consists of 8 or 9 alpha/numeric characters (e.g., 1234X567). In some cases, the ordering physician may instead receive a NIA tracking number (not the same as an authorization number) if the physician's authorization request is not approved at the time of initial contact. Physicians can use either number to track the status of their request on the RadMD Web site or via our Interactive Voice Response (IVR) telephone system.

Who can I contact at NIA for questions, complaints, and appeals, etc.?

Please use the following NIA contacts by type of issue:

- To educate your staff on NIA procedures and to assist you with any provider issues or concerns, contact your NIA Area Provider Relations Manager.
- Preauthorization and claims payment complaints/appeals: Follow the instructions on your non-authorization letter or Explanation of Benefit (EOB)/Explanation of Payment (EOP) notification.

How do referring/ordering physicians know who NIA is?

Tufts Health Public Plans sends orientation materials to referring/ordering providers. Tufts Health Public Plans and NIA also coordinate outreach and orientation activities.

What does the member ID card look like? Does it have both NIA and Tufts Health Public Plans information on the card? Or are there two cards?

The Tufts Health Public Plans member ID card will not have NIA identifying information on it.