



Musculoskeletal Care Management (MSK) Program Quick Reference Guide for Ordering Physicians/Surgeons

Medicaid and Ambetter (Marketplace)

January 1, 2024

Sunshine Health, Ambetter from Sunshine Health, and Children's Medical Services (CMS) Health Plan have entered into an agreement with National Imaging Associates, Inc. (NIA), to implement a Musculoskeletal Care Management (MSK) Program. This program includes prior authorization for these non-emergent MSK procedures:

- Inpatient and outpatient hip surgeries
- Inpatient and outpatient knee surgeries
- Inpatient and outpatient shoulder surgeries
- Inpatient and outpatient lumbar and cervical spine surgeries

Providers may begin contacting NIA on January 1, 2024, to obtain prior authorization for procedures scheduled on or after January 1, 2024.

Prior Authorization Implementation

As a provider of MSK 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 MSK surgery hospital admission, and the member cannot be balance-billed for such procedures.

Procedures Requiring Prior Authorization: *

*A separate prior authorization number is required for each procedure ordered.

Outpatient and Inpatient Hip Surgery Services:

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

Outpatient and Inpatient Knee Surgery Services:**

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

- 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)

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
- Frozen Shoulder Repair/Adhesive Capsulitis
- Shoulder Surgery – Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, claviclectomy, diagnostic shoulder arthroscopy)

Outpatient and Inpatient Spine Surgery Services:

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetomy & 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 – Single & Two Levels
- Cervical Anterior Decompression (without fusion)
- Sacroiliac Joint Fusion

NIA will manage non-emergent inpatient and outpatient hip, knee, shoulder, and spine surgeries through the existing contractual relationships with Sunshine Health, Ambetter and CMS Health

Plan. If an urgent/emergent clinical situation exists outside of a hospital emergency room, please contact NIA immediately at **1-866-214-2569** with the appropriate clinical information for an expedited prior authorization review.

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

Prior Authorization Information

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

Outpatient and Inpatient Musculoskeletal Surgeries:

- Emergency musculoskeletal surgery (admitted via the Emergency Room) does not require prior authorization through NIA.
- Non-emergent outpatient and inpatient hip, knee, shoulder, and spine surgery services require prior authorization through NIA.
- The ordering physician must obtain prior authorization with NIA prior to performing the surgery. Facility admissions do not require a separate prior authorization. However, the facility should ensure that an NIA prior authorization has been obtained prior to scheduling the surgery/procedure.
- 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 Sunshine Health, Ambetter and CMS Health Plan with the surgery type requested and authorization determination.
- Authorizations for outpatient surgeries are valid for 30 days from the date of request, 1 day for inpatient surgeries.

Checking Authorizations

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

Submitting Claims

Claims will continue to go directly to Sunshine Health, Ambetter and CMS Health Plan. Please send your claims for MSK procedures to:

SunshineHealth.com/login (Sunshine Health and CMS Health Plan)

Providers are encouraged to use EDI claims submission.

The Sunshine Health, Ambetter and CMS Health Plan payer ID number is **68069**.

Quick Contacts

- Website: www.RadMD.com
- Toll Free Phone Numbers:
- 1-866-214-2569

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 Sunshine Health, Ambetter or CMS Health Plan is not the member's primary insurance?

- No - For Sunshine Health and CMS Health Plan (Medicaid)
- Yes - For Ambetter exchange plan members (Exchange)

What does the NIA authorization number look like?

The NIA authorization number consists of alpha/numeric characters (e.g., 1234X567). In some cases, the ordering physician may instead receive an 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 website or via our Interactive Voice Response 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 Provider Relations Manager at Adietz@evolent.com
- 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 will referring/ordering physicians know who NIA is?

Sunshine Health, Ambetter and CMS Health Plan will send orientation materials to referring/ordering providers and coordinate with NIA to provide additional outreach and orientation activities.

What will the member ID card look like? Will it have NIA information on the card? Or will there be two cards?

The Sunshine Health, Ambetter and CMS Health Plan member ID cards will not have NIA identifying information on it.