

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

**Effective: October 1, 2015**  
**Revised: June 1, 2023**

ConnectiCare has entered into an agreement with National Imaging Associates, Inc. (NIA), to implement a Musculoskeletal Care Management (MSK) Program. This program includes preauthorization/pre-registration for non-emergent MSK procedures: outpatient interventional spine pain management services (IPM); and inpatient and outpatient lumbar, cervical, thoracic, Sacroiliac Joint Fusion, and other spine surgeries, procedures and devices. This decision is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

## Preauthorization Implementation

As a provider of MSK services that require preauthorization, 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 preauthorization was obtained, when necessary. Payment will be denied for procedures performed without a preauthorization, including the MSK surgery hospital admission, and the member cannot be balance-billed for such procedures.

## Procedures Requiring Preauthorization:\*

### Outpatient Interventional Spine Pain Management Services:

- Spinal Epidural Injections
- Paravertebral Facet Joint Injections or Blocks
- Paravertebral Facet Joint Denervation (Radiofrequency (RF) Neurolysis)
- Sacroiliac Joint Injections
- Implantable Infusion Pump Insertion

\*A separate preauthorization number is required for each procedure ordered.

### Other Spine Procedures or Devices – (No or Limited Evidence of Effectiveness)

- Epidural Lysis of Adhesions (Racz procedure)
- Minimally Invasive Decompression (Including MILD)
- Percutaneous Thermal Intra - Discal Procedures (including IDET)
- Interspinous Spacer Device (X-Stop)
- Posterior Intra-Facet Implants
- Prolotherapy

## **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
- Sacroiliac Joint Fusion
- 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)
- Deformity Surgery
- Thoracic Surgery (Non-Deformity)
- Lesion Decompression
- Other Spine Surgeries (Neoplasm, Lesion, Infection (All Regions))
- Other Spine Procedures or Devices (**No or Limited Evidence of Effectiveness**):
  - Pre-Sacral/Axial Interbody Fusion
  - Total Facet Arthroplasty

NIA will manage non-emergent outpatient interventional spine pain management services, and inpatient and outpatient spine surgeries, procedures and devices through the existing contractual relationships with ConnectiCare. 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 preauthorization is 1-877-607-2363 for ConnectiCare providers in Connecticut, Massachusetts and Rhode Island.

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

### **Preauthorization 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 preauthorization through NIA.
- All outpatient interventional pain management services require a preauthorization 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 request.

## **Outpatient and Inpatient Musculoskeletal and Other Surgeries:**

- Emergency musculoskeletal surgery (admitted via the Emergency Room) does not require preauthorization through NIA.
- Non-emergent outpatient and inpatient spine surgery, procedures and devices require preauthorization through NIA.
- 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 the ConnectiCare with the surgery type requested and authorization determination.
- Facilities must continue to follow ConnectiCare's current notification requirements for urgent/emergent hospital admissions and elective surgery based on a member's benefit and coverage requirements. Inpatient admissions, including emergency admissions for spine surgery, will continue to be subject to concurrent review by ConnectiCare.
- Authorizations are valid for 60 days from the date of request.

### **Checking Authorizations**

You can check on the status of members' authorizations quickly and easily by going to the NIA website, <https://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 ConnectiCare. Please send your claims for MSK procedures to the following address:

ConnectiCare  
P.O. Box 546  
Farmington, CT 06034-054

#### **Quick Contacts**

- Website: [www.RadMD.com](http://www.RadMD.com)
- Toll Free Phone Number:  
1-877-607- 2363

Providers are encouraged to use EDI claims submission.

### **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 <https://www.RadMD.com>.

#### **Is preauthorization necessary if ConnectiCare is not the member's primary insurance?**

- Yes

### **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 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.

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

The ConnectiCare member ID card will not have NIA identifying information on it.