

Outpatient Radiology Notification/ Prior Authorization Protocol for Commercial and Exchange Plans

Quick Reference Guide

We created this quick reference guide to provide you with information about the Outpatient Radiology Notification/Prior Authorization Protocol. Notification/prior authorization helps support care experiences, outcomes and total cost of care for UnitedHealthcare commercial and Exchange plan members.

You can verify whether notification/prior authorization is required or initiate a request online or by phone:

- Go to UHCprovider.com/radiology > Prior Authorization and Notification tool.
- Call **866-889-8054**, 7 a.m. to 7 p.m., local time, Monday through Friday. The system will enable you to continue with the request process or respond automatically that notification or prior authorization is not needed.

Procedures requiring notification/prior authorization

Notification/prior authorization is required for certain instances of the following procedures (“Advanced Outpatient Imaging Procedures”):

- CT scans
- MRI/MRA
- Nuclear medicine/cardiology
- PET scans

For the most current listing of CPT® codes for which notification/prior authorization is required pursuant to the protocol, refer to UHCprovider.com/radiology.

Place of service exclusions

- Emergency rooms
- Hospital observation units
- Urgent care centers
- Inpatient settings (except for electrophysiology implants)

Excluded benefit plans

The Outpatient Radiology Notification/Prior Authorization Protocol doesn't apply to all UnitedHealthcare commercial and Exchange plans. The following commercial and Exchange benefit plans are excluded:

- UnitedHealthcare Options PPO: Care providers are not required to follow this protocol for Options PPO benefit plans because members enrolled in these benefit plans are responsible for providing notification/requesting prior authorization. **Exception:** Care providers are required to follow this protocol for Options PPO benefit plans for members in Colorado. These members are not responsible for providing notification or requesting prior authorization.
- UnitedHealthOne – Golden Rule Insurance Company, group number 705214 only
- M.D. IPA, Optimum Choice or OneNet
- Oxford Health Plans

- UnitedHealthcare Indemnity/Managed Indemnity
- Benefit plans sponsored or issued by certain self-funded employer groups
- Exchange plans offered in Nevada and Colorado are subject to the administrative guide, member manual or supplement of that affiliate

Information required for notification/prior authorization requests

1. Member information:

- UnitedHealthcare identification (ID) number
- UnitedHealthcare group number
- Name
- Date of birth
- Telephone number and address (optional)

2. Provider information:

- National Provider Identifier (NPI) number
- Tax ID number (TIN)
- Name
- Address
- Telephone number with area code
- Fax number with area code
- Email address
- Office contact person

3. Clinical information:

- The imaging procedure(s) being requested with the CPT code(s)
- The working diagnosis with the appropriate ICD code(s)
- The member's clinical condition, which may include any symptoms, listed in detail, with severity and duration; any treatments that have been received, including dosage and duration for drugs; and dates for other therapies
- Any other information that the care provider believes will help in evaluating whether the service ordered meets current evidence-based clinical guidelines, including but not limited to, prior diagnostic tests and consultation reports
- Dates of prior imaging studies performed

Retrospective reviews

You must call 866-889-8054 to initiate retrospective reviews.

If the ordering care provider determines that an advanced outpatient imaging procedure is medically required on an urgent basis, and a notification/prior authorization number cannot be requested because it is outside of UnitedHealthcare's normal business hours, a notification/prior authorization number must be requested retrospectively within 2 business days after the date of service.

- Documentation must include an explanation of why the procedure was required on an urgent basis and why notification/prior authorization could not have been requested during UnitedHealthcare's normal business hours.

Radiology notification/prior authorization phone options

Please call **866-889-8054** and use the following options:

Request notification/prior authorization:

After providing the NPI number, the options are:

- Select option 1 for UnitedHealthcare commercial and Exchange members and provide the requested information. Then select:
 - Option 1 for advanced outpatient imaging, which includes nuclear stress tests, MRI/MRAs, CT scans and PET scans
 - When you call, have the study type information available
- **New procedure:** If there is another procedure request for the same member, press option 2
- **New patient under the same provider:** If you have additional member requests, press option 3
- **New provider:** If you are requesting prior authorization for additional providers, press option 4

Verify or check notification/prior authorization status:

- Select option 2
- Please provide the 10-digit case number
 - If you don't have a case number or it is invalid, press *

Initiate physician-to-physician discussion:

- Select option 3
- Please provide the 10-digit case number
 - If you don't have a case number or it is invalid, press *

To speak to a Provider Services representative:

- Select option 4
- Please provide the 10-digit case number
 - If you don't have a case number or it is invalid, press *

If you have other questions after selecting option 4, here are the options:

- For questions about claims, payments, appeals or all eligibility issues, select option 1
- For general questions regarding UnitedHealthcare commercial and Exchange members, select option 2
- For all other inquiries, select option 5
- To return to the main menu, select option 6
- To repeat these options, select option 9

Helpful phone hints

- The phone system will always repeat the information entered.
- To bypass this function, enter the next required data element.
- If a typing error is made, press # to end that entry and try again.
- If the member's ID number has alpha characters, use the corresponding numeric number on the telephone key pad to enter them. Verification of the identification will be returned in the numeric format only.
- You can initiate multiple requests per call for the same member.



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