

Site of Service Reviews for MR/CT Services

Frequently Asked Questions

Key Points

- Site of service medical necessity review will only be done if the Magnetic Resonance (MR)/ Computed Tomography (CT) procedure is requested to be performed in an outpatient hospital setting.
- Site of service medical necessity reviews apply to UnitedHealthcare commercial plans, including Neighborhood Health Partnership, UnitedHealthcare of the River Valley commercial benefit plans. These reviews do not apply to UnitedHealthcare West or Sierra at this time.
- As of June 1, 2020, site of service medical necessity reviews will also apply to UnitedHealthcare Oxford commercial benefit plans.
- Site of service medical necessity reviews currently do not apply to care providers in Alaska, Connecticut, Iowa, Kentucky, Maine, Maryland, Massachusetts, New Hampshire, Texas, Utah, Vermont or Wisconsin. Connecticut providers will continue to be excluded except for procedures rendered to members of Oxford commercial benefit plans.

Overview

We are focused on working toward achieving better health outcomes, improving patient experience and lowering the cost of care. Our site of service medical necessity reviews may help minimize out-of-pocket costs for our plan members and help improve cost efficiencies for the overall health care system, while still providing access to safe, quality health care.

Outpatient MR/CT Procedures – Site of Service Utilization Review Guideline

For UnitedHealthcare commercial benefit plans, except UnitedHealthcare Oxford benefit plans, you can find the utilization review guideline we use to facilitate MR/CT site of service medical necessity reviews at **UHCprovider.com/policies** > Commercial Policies > [Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans](#) > [Search for] Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) Scan– Site of Care – Commercial Utilization Review Guideline.

For UnitedHealthcare Oxford benefit plans, you can find the clinical policy we'll use to facilitate MRI/CT site of service medical necessity reviews at **UHCprovider.com/policies** > Commercial Policies > [UnitedHealthcare® Oxford Clinical, Administrative and Reimbursement Policies](#) > [Search for] Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) Scan– Site of Care – Oxford Clinical Policy.

Frequently Asked Questions and Answers

1. Why did UnitedHealthcare choose these particular procedures?

We conducted careful reviews to determine which procedures are clinically appropriate, equally safe and effective, if performed at locations other than an outpatient hospital setting. We also considered the terms of our members' benefit plans. The out-of-pocket cost for plan members may be significant, depending on the location where a procedure is performed.

2. To which UnitedHealthcare commercial benefit plans do site of service medical necessity reviews apply?

Site of service medical necessity reviews apply to UnitedHealthcare commercial benefit plans, including:

- UnitedHealthcare
- Neighborhood Health Partnership
- UnitedHealthcare of the River Valley
- UnitedHealthcare Oxford, as of June 1, 2020

Site of service medical necessity reviews do not apply to UnitedHealthcare West or Sierra benefit plans at this time.

3. How will the site of service medical necessity review process affect decisions between a physician and their patients?

We support informed patient choice and respect care decisions between physicians and our plan members. Our coverage determinations reflect only whether or not a service or site is covered under a member's benefit plan and aren't intended to replace treatment decisions.

4. What criteria will be used for site of service medical necessity reviews?

To facilitate site of service medical necessity reviews, we'll use the criteria in our MR/CT Site of Service Utilization Review Guideline. You can find the guideline at UHCprovider.com/policies > Commercial Policies > [Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans](#) > [Search for] Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) Scan – Site of Service – Commercial Utilization Review Guideline.

For UnitedHealthcare Oxford, we'll use the criteria in our clinical policy titled Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) Scan – Site of Service clinical policy (communicated in November 2019 edition of the *Network Bulletin*) to facilitate site of service medical necessity reviews. After June 1, 2020, you can find the policy at UHCprovider.com/policies > Commercial Policies > [UnitedHealthcare Oxford Clinical, Administrative and Reimbursement Policies](#). We'll only conduct site of service medical necessity reviews if the MRI or CT procedure will be performed in an outpatient hospital setting.

5. How do I provide notification or request prior authorization?

Notification/prior authorization is already required for the MR/CT procedures that are subject to site of service medical necessity review.

The process for completing the notification/prior authorization request and timeframes remains the same. The preferred method is online. You may complete the prior authorization and notification process or confirm a coverage decision online or by phone:

- For UnitedHealthcare commercial members, except UnitedHealthcare Oxford members:
 - Online: Use Prior Authorization and Notification tool on Link UHCprovider.com/radiology.

- Call 877-842-3210 or the Provider Services number on the back of the plan member's health plan ID card to verify eligibility and benefit coverage.
- For UnitedHealthcare Oxford members:
 - Online: Use Prior Authorization and Notification tool on Link UHCprovider.com/radiology.
 - Call 877-773-2884

6. What happens if I don't complete the notification/prior authorization process?

If you don't complete the notification/prior authorization process before the procedure is rendered, we may deny the claims and you can't bill the member for the service.

7. Will site of service medical necessity reviews take place in all states?

Site of service medical necessity reviews do not apply to providers in the following states at this time:

Alaska, Connecticut Iowa, Kentucky, Maine, Maryland, Massachusetts, New Hampshire, Texas, Utah, Vermont or Wisconsin. Connecticut providers will continue to be excluded except for procedures rendered to members of Oxford commercial benefit plans.

We previously announced the effective dates for all impacted states, but wanted to clarify that for UnitedHealthcare commercial plans in Georgia, North Carolina and South Carolina, MR/CT procedures that are already subject to notification/prior authorization requirements are now subject to site of service medical necessity reviews.

8. How can I find participating freestanding imaging centers in my area?

Participating freestanding imaging centers are listed in the UnitedHealthcare Physician Directory at UHCprovider.com/findprovider > [Search for a Provider](#).

- When you click the "Search for a Provider" link, a new tab will open in your browser.
- Click on "Medical Directory," then select the applicable health plan.
- You'll see a variety of search options. Choose "Places," "Labs and Imaging" and "Imaging Centers." To narrow your search, look for the "Freestanding Facility" filter under "Refine Results."

UnitedHealthcare commercial members, except UnitedHealthcare Oxford members can also call 877-842-3210.

UnitedHealthcare Oxford members can also call eviCore Healthcare at 877-773-2884. Once the ordering physician completes the prior authorization process the scheduling process begins. Members authorized for high-tech imaging procedures will receive a phone call from a Smart Choice representative to schedule the procedure. Once the member selects a location for the procedure, a fax is sent to the ordering physician and the chosen rendering facility with the member's authorization number and the name of the selected service location. Members may also contact the Smart Choice line directly at 800-792-8793 to assist in locating a participating location, once services have been authorized.

9. Will there be special considerations for care providers with Accountable Care Organization (ACO) relationships?

Not at this time. We expect care providers, including those who are part of ACO arrangements, to notify us and request prior authorization in accordance with our protocols.

10. Can I bill members if the site of service is denied for lack of medical necessity?

Plan members can be billed if we determine a site of service isn't medically necessary, as long as you get the member's written consent. The consent must be consistent with our protocols and given **before** a service is performed.

11. Can a request be approved for an outpatient hospital?

We'll only approve the outpatient hospital site of service if the criteria in the applicable utilization review guideline or clinical policy are satisfied. If the criteria are not satisfied, the outpatient hospital location will be determined to not be medically necessary. You aren't required to complete the notification/prior authorization process for any procedures performed in an emergency room, urgent care center, observation unit or done during an inpatient stay.

Example Scenarios

12. What if a patient has medical conditions requiring the use of an outpatient hospital site?

We understand some patients need more complex care because of factors like age or medical conditions. Using the clinical information that you submit, we'll review the plan member's situation to evaluate a site of service in accordance with the applicable utilization review guideline or clinical policy.

You can find the utilization review guideline at [UHCprovider.com/policies](https://uhcprovider.com/policies) > Commercial Policies > [Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans](#) > [Search for] Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) Scan – Site of Service – Commercial Utilization Review Guideline.

For UnitedHealthcare Oxford, we'll use the criteria in our clinical policy titled [Magnetic Resonance Imaging \(MRI\) and Computed Tomography \(CT\) Scan – Site of Service.](#)

13. What if the nearest participating freestanding diagnostic radiology center or office setting is a long distance for the member to travel or doesn't have the equipment or resources for the planned procedure?

We realize there may be times when a plan member isn't within a reasonable distance of a participating, freestanding diagnostic radiology center or office setting with the necessary resources for the care they need. In these cases, we'll authorize the procedure at a participating outpatient hospital site, in accordance with the terms of the applicable utilization review guideline or clinical policy.

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