



**Superior HealthPlan and National Imaging Associates (NIA)  
Interventional Pain Management Program (IPM)  
Frequently Asked Questions (FAQs)**

Question	Answer
<b>GENERAL</b>	
<p><b>Why is Superior implementing IPM Program?</b></p>	<p>Superior is implementing a prior authorization program for Interventional Pain Management (IPM) to improve quality and manage the utilization of non-emergent IPM procedures for members. Superior providers will utilize the same provider tools available through NIA, Superior's existing advanced imaging vendor. Providers can access these tools through NIA's website, <a href="http://www.RadMD.com">www.RadMD.com</a>, to request IPM procedures as they do today for advanced imaging procedures.</p> <p>IPM Procedures include:</p> <ul style="list-style-type: none"> <li>▪ Spinal Epidural Injections</li> <li>▪ Paravertebral Facet Joint Injections or Blocks</li> <li>▪ Paravertebral Facet Joint Denervation (Radiofrequency Neurolysis)</li> <li>▪ Sacroiliac Joint Injections</li> </ul>
<p><b>Why did Superior select NIA?</b></p>	<p>NIA was selected to partner with Superior because of its clinically driven program designed to effectively manage quality and member safety, while ensuring appropriate utilization of resources for Superior members.</p>
<p><b>Which Superior members will be covered under this relationship and what networks will be used?</b></p>	<p>Effective January 1, 2021, NIA will manage non-emergent outpatient IPM procedures for members ages 21 and older enrolled in Superior Medicaid (STAR, STAR+PLUS, STAR Health), STAR+PLUS Medicare-Medicaid Plan (MMP), Allwell from Superior HealthPlan (HMO and HMO SNP) and Ambetter from Superior HealthPlan (Marketplace).</p>
<b>PROGRAM START JANUARY 1, 2021</b>	
<p><b>What is the implementation date for this IPM Program?</b></p>	<p>The program start date is January 1, 2021. Superior and NIA will collaborate to offer provider training activities prior to the start date including:</p>

	<ul style="list-style-type: none"> <li>• Provider announcements located on <a href="#">Superior's Provider News and Information webpage</a> and <a href="#">Superior's Provider Newsflash</a>.</li> <li>• Updated provider manuals located on <a href="#">Superior's Training and Manuals webpage</a>.</li> <li>• New provider education events (face to face and web-based) located on <a href="#">Superior's Provider Training Calendar</a>.</li> </ul>
<b>PRIOR AUTHORIZATION</b>	
<b>What IPM services will require a provider to obtain a prior authorization?</b>	<p>The following procedures require prior authorization through NIA:</p> <ul style="list-style-type: none"> <li>• Spinal Epidural Injections</li> <li>• Paravertebral Facet Joint Injections or Blocks</li> <li>• Paravertebral Facet Joint Denervation (Radiofrequency Neurolysis)</li> <li>• Sacroiliac Joint Injections</li> </ul>
<b>When is prior authorization required?</b>	<p>Prior authorization is required for outpatient, non-emergent interventional pain procedures. Ordering providers must obtain prior-authorization prior to performing the service.</p> <p><i>Note: All IPM procedures performed in the emergency department or as part of inpatient care do not require prior authorization.</i></p>
<b>Is prior authorization required for members currently undergoing treatment?</b>	<p>Yes, authorization is required for dates of service on or after January 1, 2021, even if the member is continuing treatment.</p>
<b>Who is responsible for requesting prior authorization for IPM procedures?</b>	<p>The ordering physician is responsible for requesting prior authorization for IPM procedures. These procedures are usually ordered by one of the following specialists:</p> <ul style="list-style-type: none"> <li>• Anesthesiologists</li> <li>• Neurologists</li> <li>• Pain Management Specialists</li> <li>• Orthopedic Spine Surgeons</li> <li>• Neurosurgeons</li> <li>• Other physicians with appropriate pain procedure training and certification</li> </ul>
<b>Are inpatient IPM procedures included in this program?</b>	<p>Inpatient IPM procedures do not require prior authorization through NIA. However, Superior's inpatient notification and other authorization requirements still apply.</p>
<b>How does the ordering provider obtain a prior authorization from NIA for an outpatient IPM procedure?</b>	<p>Providers may request prior authorization through <a href="http://www.RadMD.com">www.RadMD.com</a> or by calling 1-800-642-7554 (Medicaid), 1-866-214-1703 (Medicare) or 1-800-424-4916 (Ambetter).</p>

<p><b>What information will NIA require in order to receive prior authorization?</b></p>	<p>To expedite the process, please have the following information ready before logging on to <a href="http://www.RadMD.com">www.RadMD.com</a> or calling 1-800-642-7554 (Medicaid), 1-866-214-1703 (Medicare) or 1-800-424-4916 (Ambetter). Please also be prepared to fax or upload this information, if requested. (*required information):</p> <p><b>IPM Procedures:</b></p> <ul style="list-style-type: none"> <li>• Name and office phone number of ordering physician*</li> <li>• Member name and ID number*</li> <li>• Requested procedure*</li> <li>• Name of provider office or facility where the service will be performed*</li> <li>• Date of service*</li> <li>• Details justifying the pain procedure*: <ul style="list-style-type: none"> <li>○ Diagnosis</li> <li>○ Date of onset of pain or exacerbation</li> <li>○ Physician exam findings and member symptoms</li> <li>○ <b>Date and results</b> of prior IPM procedures</li> <li>○ Diagnostic imaging results, <i>when available</i></li> <li>○ Conservative treatment modalities completed, duration, and results (e.g., physical therapy, chiropractic or osteopathic manipulation, hot pads, massage, ice packs and medication)</li> </ul> </li> </ul>
<p><b>Is date of service required when requesting prior authorization?</b></p>	<p>Yes, the date of service must be provided when requesting prior auth. The date of service is used to determine the frequency between injections.</p>
<p><b>What if the date of service changes after the authorization is issued?</b></p>	<p>The date of service must fall within the date span of the authorization in order for services to be considered authorized. If the date of service is outside of the authorization date span, please contact NIA to either have the authorization updated or to request a new auth.</p>
<p><b>Where can a provider find NIA's Guidelines for Clinical Use of Pain Management Procedures?</b></p>	<p>NIA's IPM Guidelines can be found at <a href="http://www.RadMD.com">www.RadMD.com</a>. They are presented in a PDF file format that can easily be printed for future reference. NIA's clinical guidelines have been developed from practice experiences, literature reviews, specialty criteria sets and empirical data.</p>
<p><b>Can a provider request more than one procedure at a time for a member (i.e., a series of epidural injections)?</b></p>	<p>No. NIA requires separate prior authorization for each pain procedure requested and will not authorize more than one procedure at a time.</p>

<p><b>What kind of response time can ordering providers expect for prior authorization?</b></p>	<p>For the most efficient turnaround time, providers should submit an authorization request online at <a href="http://www.RadMD.com">www.RadMD.com</a> or calling 1-800-642-7554 (Medicaid), 1-866-214-1703 (Medicare) or 1-800-424-4916 (Ambetter). Please have the following information available:</p> <ul style="list-style-type: none"> <li>▪ The member’s history and diagnosis</li> <li>▪ Onset of pain</li> <li>▪ Findings on physical examination</li> <li>▪ Response and type of non-operative management the member has undergone</li> <li>▪ History of medical or surgical treatment</li> <li>▪ Rationale for the procedure</li> </ul> <p>Generally, a determination is made within 2 business days after receipt of request with complete clinical documentation. In certain cases, the review process can take longer if additional clinical information is required to make a determination. Final determination will not exceed timeframes required by state or federal regulations.</p>
<p><b>What does the NIA authorization number look like?</b></p>	<p>The NIA authorization number consists of 11 alpha-numeric characters. In some cases, the ordering provider may instead receive an NIA tracking number (not the same as an authorization number) if the provider’s authorization request is not approved at the time of initial contact. Providers will be able to use either number to check the status of their request online or through an Interactive Voice Response (IVR) telephone system.</p>
<p><b>If requesting an authorization through RadMD and the request pends, what happens next?</b></p>	<p>The provider will receive a tracking number, and will be contacted by NIA with details on how to complete the process.</p>
<p><b>How long is the prior authorization number valid?</b></p>	<p>The authorization validity period will be outlined in the approval notification.</p>
<p><b>Is authorization required if the member has more than one insurance?</b></p>	<p>Yes. Authorization is required regardless of whether Superior is primary or secondary insurer.</p>
<p><b>If a provider obtains a prior authorization number does that guarantee payment?</b></p>	<p>An authorization number is not a guarantee of payment. Authorization is based on medical necessity and contingent upon eligibility and benefits at the time of service.</p>
<p><b>Does NIA allow retro-authorizations?</b></p>	<p>As a standard process, no. Physicians administering these procedures <u>should not</u> schedule or perform procedures without prior authorization. However, extenuating circumstances may require retrospective</p>

	review. These requests are evaluated for medical necessity and reviewed to determine whether a situation occurred that prevented the provider from obtaining authorization <b>prior</b> to providing services.
<b>Can RadMD be used to request retrospective or expedited authorization request?</b>	No, retrospective and expedited requests must be requested for processing by calling 1-800-642-7554 (Medicaid), 1-866-214-1703 (Medicare) or 1-800-424-4916 (Ambetter).
<b>What happens if I have a service scheduled for January 1, 2021?</b>	An authorization can be obtained for all pain management procedures for dates of service January 1, 2021 and beyond, beginning December 21, 2020. NIA and Superior will work with the provider community on an ongoing basis to continue to educate providers that authorizations are required.
<b>Can a provider verify an authorization number online?</b>	Yes. Providers can check the status of authorization quickly and easily by going to the website at <a href="http://www.RadMD.com">www.RadMD.com</a> .
<b>Will the NIA authorization number be displayed on the Superior web site?</b>	No. Providers will only be able to check status of NIA authorization requests at <a href="http://www.RadMD.com">www.RadMD.com</a> or by calling NIA at 1-800-218-7508.
<b>What if I disagree with NIA's determination?</b>	In the event of an adverse determination, member appeal rights will be outlined in the denial letter.
<b>SCHEDULING PROCEDURES</b>	
<b>Will NIA make a final determination based on the Anticipated Date of Service?</b>	NIA does not guarantee final determination of the request by the anticipated date of service.  Please be advised that NIA needs 2-3 business days after the receipt of full clinical information to review and render a decision on a request. Please do not schedule or perform the procedure until an approved authorization is received.
<b>Do ordering physicians have to obtain an authorization before the member's services are scheduled?</b>	Ordering physicians should obtain prior authorization before scheduling the member.
<b>CLAIMS RELATED</b>	
<b>Will there be changes to how and/or where claims are submitted for IPM services?</b>	There are no changes to the existing claim submissions.
<b>How can providers check claims status?</b>	Claims status may be verified through <a href="#">Superior's Secure Provider Portal</a> or by <a href="#">contacting your assigned Superior Account Manager</a>
<b>Whom should a provider contact if they want to appeal a claim?</b>	Instructions for appealing claims can be located in Superior's provider manuals found on <a href="#">Superior's Provider Training and Manuals webpage</a> .

<b>MISCELLANEOUS</b>	
<b>How does NIA determine medical necessity?</b>	<p>NIA defines medical necessity as services that:</p> <ul style="list-style-type: none"> <li>• Meet generally accepted standards of medical practice; are appropriate for the symptoms, consistent with diagnosis, and otherwise in accordance with sufficient evidence and professionally recognized standards;</li> <li>• Are appropriate to the illness or injury for which they are performed as to type of service and expected outcome;</li> <li>• Are appropriate to the intensity of service and level of setting;</li> <li>• Provide unique, essential, and appropriate information when used for diagnostic purposes;</li> <li>• Are the lowest cost alternative that effectively addresses and treats the medical problem; and rendered for the treatment or diagnosis of an injury or illness; and</li> <li>• Are not furnished primarily for the convenience of the member, the attending physician, or other provider.</li> </ul>
<b>How will NIA and Superior train providers?</b>	Superior and NIA are coordinating outreach, training sessions, updating provider manuals, posting announcements on Superior’s website, and highlighting changes in Superior’s Provider Newsflash.
<b>Will provider trainings be offered closer to the January 1, 2021 implementation date?</b>	NIA will conduct provider training sessions in partnership with Superior.
<b>Will the ID card have both NIA and Superior HealthPlan information on it?</b>	The Superior member ID card will not have NIA identifying information on it. However, examples of Superior member ID cards can be located in Superior’s provider manuals.
<b>CONTACT INFORMATION</b>	
<b>Whom can a provider contact at NIA for more information?</b>	Providers can contact April Sabino, Senior Clinical Provider Relations Manager, at 1-410-953-1078 or <a href="mailto:aisabino@magellanhealth.com">aisabino@magellanhealth.com</a> .

