


Imaging Excellence Program

Quick Reference Guide



Information for Referring Physicians:	
Program commencement date:	March 1, 2015
Who is administering this program for New West?	
What imaging procedures require prior authorization?	MRI, MRA, CT, CTA, PET, PET/CT & Nuclear Cardiology <u>Note:</u> The above services require prior authorization if rendered in a freestanding diagnostic imaging facility, physician office, or hospital outpatient diagnostic facility.
Who should submit the authorization request?	The Ordering (Referring) Physician
Which New West plans are covered under this program?	All New West Medicare members
Prior authorization requests can be submitted by:	<ul style="list-style-type: none"> • Phone: 1-888-925-7811 • Fax: 1-877-495-9292 • Web: https://nwhs.careportal.com <p><u>NOTE:</u> There will be a first-time user registration process to complete when first submitting an online request to establish your username and password.</p>
Hours of Operation for Prior Authorization of Imaging Services:	6 a.m. to 5 p.m. MT, Monday through Friday
What information is required when requesting prior authorization?	<ul style="list-style-type: none"> ➤ Member (Patient) Name, Member DOB, Member ID number and referring Physician Name and Address ➤ Name of Facility where services will be performed ➤ Radiological or Imaging Procedure to be performed ➤ Medical Indication(s) for requested procedure and ICD-9 code as available. Be sure to include: <ul style="list-style-type: none"> • Member's major complaint • What the referring physician is looking to rule out • Results of any lab findings, prior tests or imaging procedures • Outcome any prior treatment, including type and duration, for the same medical indication
How long is an authorization valid for?	30 days from the date of approval
Requests for URGENT reviews:	URGENT requests will be considered based on each clinical situation. Make urgent requests by PHONE. Tell the Intake Specialist of your urgent need and provide rationale.
Is prior authorization required if New West is the secondary insurer?	Yes
Must I notify you if I need to modify my request from CONTRAST to NO CONTRAST?	Yes, preferably within 24-48 hours for processing.
Where can I get a prior authorization form?	You may download the form at: http://www.caretocare.com/resources_provider.html