

Radiology Notification with Evidence-Based Dialogue Quick Reference Guide

Contact Information

Physicians or their office staff may obtain or verify a notification number by contacting UnitedHealthcare in the following ways:

- Online via www.UnitedHealthcareOnline.com > **Clinician Resources > Radiology > Radiology Notification.**
- Phone: **866-889-8054** (7 a.m. to 7 p.m., M-F)
- Fax: **866-889-8061** (Fax forms are available at www.UnitedHealthcareOnline.com)

Notification is required for each of the following Advanced Outpatient Imaging Procedures

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

Exclusions: Services performed at the following places of service DO NOT require a notification:

- Inpatient setting
- Emergency room
- Observation unit
- Urgent care centers

Retrospective Reviews

- If an advanced outpatient imaging procedure is required on an urgent basis, or notification cannot be obtained because it is outside of UnitedHealthcare's normal business hours, the service may be performed and notification requested retrospectively within two business days of the service.
- Documentation must include an explanation about why the procedure was required on an urgent basis or could not be prior-notified during UnitedHealthcare's normal business hours.

Member Eligibility Verification

To determine if notification is required for a UnitedHealthcare member, call 877-842-3210 and select the eligibility prompt (#2).

In-Scope Products

Commercial benefit plans issued and administered by UnitedHealthcare or one of its affiliates that are subject to the UnitedHealthcare Physician, Health Care Professional, Facility and Ancillary Provider Administrative Guide, and for which the physician is required to provide prior notification, are in scope for the Radiology Notification Program. In-scope products include Choice, Choice Plus, Definity HRA/HSA, Select and Select Plus.

Out-of-Scope Products/Members

Benefit plans issued or administered by Definity Health, Harvard Pilgrim Health Care, Oxford Health Plans, PacificCare, M.D. IPA, Medica, MAMSI Life and Health Insurance Company, Neighborhood Health Partnership, Optimum Choice or UnitedHealthcare of the River Valley, and that are subject to the administrative guide or manual of that affiliate, are out of scope for the Radiology Notification Program. Also excluded are government benefit plans for Medicare and Medicaid members, and benefit plans in which the member (rather than physician) is required to provide notification, such as Options PPO and UnitedHealthcare Indemnity.

Information Required for a Notification Number Request

1 ► Member Information:

- Member's UnitedHealthcare ID number
- Member's UnitedHealthcare group number
- Member's name
- Member's date of birth
- Member's telephone number and address (optional)

2 ▶ Physician/Provider Information

- Ordering Physician/Provider's Tax ID Number
- Ordering Physician/Provider's last name
- Ordering Physician/Provider's telephone number (10 digit)
- Ordering Physician/Provider's fax number (10 digit)
- Contact person at the Ordering Physician/Provider's office

3 ▶ Clinical Information:

- The examination(s) being requested, with the CPT code(s)
- The working diagnosis or "rule out" with the ICD-9 code(s)
- The member's symptoms, listed in detail, with severity and duration. Any treatments that have been tried, including dosage and duration for drugs, and dates for other therapies.
- Any other information that the physician believes will help in evaluating the request, including but not limited to prior diagnostic tests, consultation reports, etc.
- Dates of prior imaging studies performed.
- To help ensure proper payment, the notification number should be obtained and communicated by the Ordering Physician/Provider to the rendering physician/provider scheduled to perform the imaging procedures. Please note that the receipt of a notification number does not guarantee or authorize payment, but simply is confirmation that notification was made. Medical coverage/payment is a separate process determined by the member's benefit contract and the physician/provider participation agreement.

Radiology Notification Phone Prompt Selections: Dial 866-889-8054 and follow the prompts outlined below.

Request Notification

- Select phone prompt #1
- Enter the following member information
 - Member's ID number (nine characters)
 - Member's group number (six digits)
 - Member's date of birth (mm/dd/yyyy)
- Say or enter the study type requested
- Enter the following physician information
 - Ordering physician/provider's Tax ID (nine digits)
 - First letter of Ordering Physician's last name
 - If multiple matches of the identified Ordering Physician's last name are found, you will be asked to select the correct physician's name from the list provided
- To initiate another request for the same Ordering Physician, a different physician or a different member, say "Yes" and enter information as noted above.

Verify or Check Notification Status

- Select phone prompt #2
- Have the following information available:
 - Case number (ten characters)
 - Member's ID number (nine characters)
 - Member's group number (six digits)
 - Member's date of birth (mm/dd/yyyy)
 - Ordering Physician/Provider's Tax ID

Submit Additional Clinical Information

- Select phone prompt #5
- Select option #7

Initiate Physician-to-Physician Discussion

- Select phone prompt #4
- Enter the 10-digit case number

If no case number is entered, caller will be transferred to a customer care professional.

To Speak to a Radiology Notification Program Customer Care Professional or Modify a Notification Request

- Select phone prompt #5

Study Type Fast Keys

CT-10	Nuclear Medicine-13
MRI/MRA-11	PET-15
Nuclear Stress Test-12	

Phone Keys

ABC-2	GHI-4	MNO-6	TUV-8
DEF-3	JKL-5	PQRS-7	WXYZ-9

Helpful Hints

- Background noise may interfere with the application. Please attempt to reduce background noise while making a request (e.g., if using a speaker phone please have the mute button on when using the telephone keypad).
- The application will always repeat the information you have entered. If you wish to bypass this function simply enter the next required data element.
- If you make a typing error, you may press # to end that entry and try again.
- Organize information according to the guide before calling.
- Physician can initiate multiple requests per call for the same member.

