On behalf of BlueCross BlueShield of South Carolina, National Imaging Associates (NIA) pre-authorizes radiology benefits. NIA is an independent company that provides radiology benefits management.
Frequently Asked Questions

Q.1 Is prior authorization required for emergency situations?
A.1 No. Patients who are directed to the emergency room are exempt from prior authorization. It is not necessary for anyone to call NIA retrospectively to authorize any imaging procedure performed during an emergency room visit.

Q.2 What kind of response time can ordering physicians expect for prior authorization?
A.2 The best way to increase the possibility of having a request approved is to have knowledge of the case, including:

- Patient symptoms and their duration.
- Physical exam findings.
- Conservative treatment already completed.
- Preliminary procedures already completed (e.g. X-rays, CTs and lab work).
- Reason physician is requesting the study (e.g. further evaluation, rule out a disorder).

Authorization requests are approved at intake in approximately 60% of the cases. Generally, within two business days after NIA receives a request, it will make a determination. In certain cases, the review process can take longer if NIA needs additional clinical information to make a determination.

Q.3 Where can I find NIA’s Guidelines for Clinical Use of Diagnostic Imaging Examinations?
A.3 You can find NIA’s Diagnostic Imaging Guidelines for clinical use of examinations on www.SouthCarolinaBlues.com and on NIA’s Web site at www.RadMD.com. The guidelines are in a PDF file that you can print for future reference. NIA developed its clinical guidelines from practice experiences, literature reviews, specialty criteria sets and empirical data.

Q.4 Can NIA handle multiple authorization requests per contact?
A.4 Yes.

Q.5 Why is NIA asking for a date of service when authorizing a procedure?
A.5 NIA will ask for an anticipated date of service when authorizing a procedure. The request for the anticipated date of service is to ensure that the authorization is not being requested too far in advance. When the claim is received the actual date of service will be used when validating the authorization number. The prior authorization number is valid for 30 days from the date of issuance.

Q.6 Do physicians have to get authorization before they call to schedule an appointment?
A.6 Physicians should get authorization before scheduling the patient.

Q.7 For how long is an authorization number valid?
A.7 The authorization number is valid for 30 days from the date of issuance. When NIA authorizes a procedure, it uses the date of the final determination as the starting point for the 30-day period during which the physician must complete the examination.

Q.8 What if my office staff forgets to contact NIA and then goes ahead to schedule an imaging procedure requiring prior authorization?
A.8 It is important to notify office staff and educate them about this new policy. This policy will be effective April 1, 2009. BlueCross will not reimburse claims for Computerized Axial Tomography (CAT) Scans, Magnetic Resonance Imaging (MRI), Magnetic Resonance Angiography (MRA) and Positron Emission Tomography (PET) Scans that NIA has not properly authorized.
Q.9 Can the physician get authorization in the event of an urgent study?
A.9 Yes, the physician must contact NIA within one business day to initiate the review process for medical necessity.

Q.10 What does the NIA authorization number look like?
A.10 The NIA authorization number consists of eight or nine alpha-numeric characters.

Q.11 Do I need an NIA authorization number for a CT-guided biopsy?
A.11 No, this does not require prior authorization.

Q.12 Which PET scans require prior authorization?
A.12 All outpatient PET Scans require authorization by NIA.

Q.13 What happens if NIA authorizes a patient for a CT of the abdomen, and the radiologist or rendering physician feels an additional study of the pelvis is necessary?
A.13 The radiologist or rendering physician should proceed with the pelvic study. If this occurs, either the radiologist or rendering physician can call NIA with the information and clinical rationale to begin the process and NIA will follow-up with the ordering physician to complete the process. Or, the radiologist or rendering physician should notify the patient’s ordering physician of the additional test on the same day, as a matter of courtesy and appropriate medical procedure. The original ordering physician should then call NIA to proceed with the normal review process to get an additional authorization number.

Q.14 If a patient needs a CT in preparation for radiation therapy, is prior authorization necessary?
A.14 No, this does not require authorization.

Q.15 Can a chiropractor order images?
A.15 Yes.

Q.16 How should physicians handle procedures that do not require NIA prior authorization?
A.16 Physicians should handle these procedures as they do today through BlueCross BlueShield of South Carolina.

Q.17 If a physician requests an authorization through NIA’s Web site and the request pends, what happens next?
A.17 The physician will receive a tracking number and NIA will contact the physician to complete the process.

Q.18 Can physicians use RadMD to request retrospective or expedited authorization requests?
A.18 No, physicians should call those requests into NIA’s Call Center for processing.

Q.19 Can I speak directly with a Clinical Reviewer or Physician (Peer-to-Peer) Level Reviewer?
A.19 Once the initial intake process is complete, you can request to be transferred to the clinical level of review. Initial intake information is necessary to determine member eligibility and to process the request.
Q.20 What steps will the ordering physician take when NIA does not give the authorization during the initial intake process (level 1)?

A.20 NIA will forward the case to its clinical departments, which will review the clinical information the physician submitted. If needed, the clinical staff will request, via fax, additional clinical information. Physicians can fax this information to NIA’s dedicated clinical fax line. An ordering office might request a hot transfer to a nurse clinical reviewer (level 2) during the initial request. A hot transfer to a nurse clinical reviewer should only be requested during the initial call if the office clinician is available to speak to the NIA nurse and has additional clinical information that would support the requested study.

If authorization is still pending at the end of the initial call, it is not necessary for the ordering physician’s office to remain on the line. If the authorization request still does not meet clinical criteria at the nurse review level, NIA will be escalated to physician review (level 3). At that point, the NIA physician may ask for more clinical information or request to have a peer discussion with the ordering physician.

Q.21 If NIA denies prior authorization of an imaging study, do we have the option to appeal the decision?

A.21 If a physician does not agree with the medical necessity decision made by NIA, the physician can appeal the decision through NIA. The physician will receive a denial letter that details the appeals process.

Q.22 Can a facility access information on an approved authorization?

A.22 Yes, facilities can view approved authorizations at www.SouthCarolinaBlues.com.