



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

General Information

How do I obtain the most current medical policy used for advanced imaging precertification?	All information regarding this program, including medical policies, is available on the Blue Cross and Blue Shield of Alabama provider website, <i>ProviderAccess</i> , at AlabamaBlue.com/Providers . Please see the dedicated Advanced Imaging Services webpage.
What is the precertification process for general radiology?	General radiology services such as X-ray, ultrasound or mammography are not subject to precertification or Carelon credentialing criteria. These services continue to be included as a PMD covered service.

Contacting Carelon

What is Carelon's precertification telephone number?	Carelon can be contacted at 1-866-803-8002 for assistance related to the precertification process.
What are Carelon's days and hours of operation?	<p>Carelon is available from 8 a.m. to 5 p.m., Central time, Monday through Friday. Carelon is closed in observance of the following holidays:</p> <ul style="list-style-type: none">• New Year's Day• Martin Luther King Jr.• Memorial Day• Independence Day• Labor Day• Thanksgiving Day and the day after Thanksgiving• Christmas Day <p>Online access via <i>ProviderAccess</i> is available 24 hours a day, seven days a week (except for occasional maintenance that may occur for a portion of Sundays).</p>



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

Precertification

What procedures require precertification?	<p>Precertification is required for:</p> <ul style="list-style-type: none">• Positron emission tomography (PET) scans• Computerized axial tomography (CT)• Computed tomographic angiography (CTA) tests• Magnetic resonance imaging (MRI)• Magnetic resonance angiography (MRA) <p>The list of procedure codes that will require precertification via Carelon is available on <i>ProviderAccess</i>.</p>
Do imaging services provided in a hospital inpatient or emergency room setting require a precertification?	No. PET scans, MRI, MRA, CT and CTA tests ordered during an emergency room treatment visit, while in the observation unit or during an inpatient stay do not require a precertification.
If a primary care network physician refers a patient to a specialist who determines that the patient needs a PET scan or CT test, who needs to request the precertification?	The physician who orders the image should request the precertification. In this case, it would be the specialist.
Do all Blue Cross and Blue Shield of Alabama plans require precertification?	Precertification is required for most Blue Cross and Blue Shield of Alabama plans, but providers should always check eligibility and benefits to confirm a patient's specific precertification requirements.
What information is needed to obtain a precertification?	<ul style="list-style-type: none">• Patient's first and last name, and date of birth• Ordering physician information• Requested tests – physicians' CPT code or description• Working diagnosis:<ul style="list-style-type: none">▶ Signs and symptoms▶ Results of relevant tests▶ Relevant medications



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

How can the referring provider indicate a particular case is urgent?	<p>For urgent cases during Carelon's regular business hours (Monday through Friday from 8 a.m. to 5 p.m., Central time), please initiate those requests by calling Carelon at 1-866-803-8002 and clearly advise the intake coordinator that the case is urgent. If the clinical reviewer is unable to approve the case, the referring physician may join the call and request to speak directly with one of Carelon's physicians to expedite the urgent request. This physician-to-physician discussion should allow for prompt precertification determination by the conclusion of the call.</p> <p>Upon approval, precertification approval numbers will be issued and posted to <i>ProviderAccess</i>.</p>
What if the patient requires an urgent test and it is after Carelon's regular business hours?	<p>For urgent requests after Carelon's normal business hours, including a weekend or a holiday, the referring provider should proceed with ordering the image. The referring provider needs to request the precertification within two business days of the service by providing the clinical indications for the examination, including the reason it was deemed urgent. Medical necessity criteria are still applied. Upon approval, precertification approval numbers are issued and posted to <i>ProviderAccess</i>.</p>
Does Carelon employ physicians other than radiologists to review precertification requests?	<p>Carelon employs and/or contracts with physicians of various specialties to respond to network needs.</p>
Who can verify if a precertification has been approved?	<p>The referring provider, imaging provider and hospital can verify if a precertification has been approved or not approved by checking the status via <i>ProviderAccess</i>.</p> <p>Referring providers are notified of the precertification determination by telephone. Faxed approvals are issued in the event the telephone communication is unsuccessful or the provider specifically requests a written confirmation. Written notification is provided upon request if the rendering provider contacts Carelon's Customer Service.</p> <p>If a precertification is not approved, the referring provider is informed of the reason for the denial, as well as what information is needed to reconsider the decision. Denial reasons are available through <i>ProviderAccess</i>.</p>
If the precertification is approved is the patient limited to a particular provider?	<p>No. The purpose of the precertification is to determine medical necessity, but does not dictate where the imaging study can be performed.</p>
Is there an appeal process if a precertification is not approved?	<p>Yes. Appeal rights are detailed in communications sent to providers with each adverse determination.</p>
Can a diagnostic facility initiate the precertification for the referring provider?	<p>The precertification should be initiated by the physician who has all the clinical information and determines the need for the diagnostic test. Therefore, it is the referring physician's responsibility to obtain the precertification. In addition, the referring physician should retain all clinical information.</p>



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

What if the website is not available?	If the website is unavailable, contact Carelon at 1-866-803-8002 to initiate a new precertification or to check status of a previously submitted precertification request.
If <i>ProviderAccess</i> is down, can you access authorizations through the Carelon portal instead?	No, all precertifications should be obtained via <i>ProviderAccess</i> . If our portal is down, you would need to call Carelon for the precertification at 1-866-803-8002.
How long will a precertification approval be valid?	Precertifications are valid for 60 days from the date of approval.
A precertification is valid for 60 days. If a patient comes back within that time frame for follow-up and another image is needed, will a new precertification be required?	Yes.
Does the precertification/case number have to be included on the claim form when filing for the imaging services?	No.
Can a referring provider use a third-party to transmit information to and from Carelon?	<p>The intent of the program has always been for referring physicians to provide clinical justification for the referral, which must be supported by the patient's medical record.</p> <p>It is at the discretion of the referring physician to select a method to complete the precertification process. However, it is the responsibility of the referring physician to ensure the accuracy and integrity of the information provided to Carelon.</p> <p>Failure to comply with the precertification requirements may result in claim refunds or other steps that affect your continued participation in the PRP or PMD Program.</p>
Will we be able to verify authorization numbers online?	Yes, you will be able to verify authorization numbers and see other information online pertaining to the request.
Will clinical data need to be entered for all requests?	Yes, all precertification requests will require clinical information to be entered.
Can a radiology facility request a user ID and sign-on with Carelon?	A direct sign-on with Carelon is not required. All providers should access Carelon through <i>ProviderAccess</i> by clicking the green "Go" button returned through eligibility and benefits when precertification is required for a specific patient.
If you get a precertification for one facility and the patient decides to use another facility in the area, do you have to correct the precertification with Carelon?	No.



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

If the authorization does not cross over to Blue Cross and the claim is denied, can we still give the authorization to Blue Cross and Blue Shield of Alabama directly or do we need to contact Carelon?	Contact Blue Cross Customer Service with your authorization number and they will contact Carelon to resend that precertification information.
Currently, CPT Code 72195 (MRI pelvis) automatically requires an ultrasound when the clinical relates to a pelvic bone condition, not female pelvis. How do we get around that issue?	Pelvic MRI does not always require an ultrasound. It depends on the clinical scenario. Depending upon what is being evaluated, there will be a different set of clinical questions.

Precertification Process

If there is no GO button for precertification, does that mean no precertification is required?	For Blue Cross and Blue Shield of Alabama plans, if there is no button to initiate a precertification, then no precertification is required. This does not apply to out-of-state Blue Plans.
What if the referring provider's office does not know the specific test that needs to be ordered?	Carelon will assist the physician's office in identifying the appropriate test based on presented indications and the CPT code. Carelon medical directors are also available for assistance. Call 1-866-803-8002 to get assistance from Carelon.
If the referring provider orders a CT/CTA or MRI/MRA without contrast, but the radiologist thinks it would be more appropriate to perform the service with contrast, will that require a correction to the precertification on file?	No. The radiologist has the ability to make that change without a call to or permission from Carelon.
If the referring provider obtains an approved precertification for a specific CPT code and the radiologist determines that another CPT code is more appropriate, can the radiologist make that change?	Yes. The radiologist must call Carelon within two business days to update the CPT code precertification request. Medical necessity criteria are still applied. Carelon can be contacted at 1-866-803-8002.
How do we make sure our in-office Advanced Imaging is listed as a selected site?	The site of service is not required. You should search for "BCBS" and select "BCBS Imaging Provider" in the facility search in order to proceed to the next step.
Since there are only 300 characters allowed for clinic notes can notes be faxed instead?	Carelon's process regarding faxing additional clinical information is to only accept faxes when specific information has been requested by Carelon for a particular case.
What if a referring provider is not in your list? Do we add it?	Referring physicians can be manually added during case initiation with the Carelon call center only.



PRECERTIFICATION OF ADVANCED IMAGING SERVICES

FREQUENTLY ASKED QUESTIONS/ANSWERS

If the physician is not present for a peer-to-peer, can another clinical staff member complete it?	Only a nurse practitioner, physician assistant or another physician colleague can participate in peer-to-peer.
Regarding the peer-to-peer questions, is it just a one-session option?	Yes. One peer-to-peer discussion will result in determination (approval, denial, withdrawn request).
Do peer-to-peer reviews have to be set up beforehand or can peer-to-peer providers be called when they are in the office?	Peer-to-peer reviews are offered at intake if criteria is not met (both on portal submittals and in the Carelon call center). The physician can be transferred to the Carelon MD reviewer if available. Otherwise, the case will pend for additional review for established turnaround time prior to case closure to allow for the physician to call back. The case turnaround time is three business days (10 calendar days for Blue Advantage patients).
Is there a way to submit clinicals by webpage using attachments?	This is not currently available for radiology precerts.
Can you list multiple ICD-10 codes/reasons for scans to be done?	No, only one ICD code is applicable per exam request. The most appropriate reason for the study should be entered.
Will Carelon fax the requesting physician's office with an approval notification once a decision has been determined on a case?	Yes, approval and denial letters (as well as appeal letters) are faxed to the ordering physician assigned to the request. If the fax is not transmitted successfully, letters are mailed via USPS.
What should be done if the status shows incomplete	Incomplete status means that the request was not submitted to Carelon for review. Status will reflect "pending" if it requires additional review until a determination is made.



**BlueCross BlueShield
of Alabama**

Blue Cross and Blue Shield of Alabama is an independent licensee of the Blue Cross and Blue Shield Association.
Carelon Medical Benefit Management, an independent company, is contracted to provide pre-certification services for Blue Cross and Blue Shield of Alabama.
Current Procedural Terminology © 2024 American Medical Association. All rights reserved. Applicable FARS/DFARS apply.