Harvard Pilgrim has a partnership with National Imaging Associates, Inc. (NIA) to provide utilization management for our Musculoskeletal Management (MSK) Program to ensure clinically appropriate utilization of these services. Under this program, Harvard Pilgrim requires prior authorization for the following non-emergent musculoskeletal procedures: outpatient interventional spine pain management services; and inpatient and outpatient hip, knee, shoulder and spine surgeries.

The following procedures are included in the Musculoskeletal Management Program for Harvard Pilgrim members:

- Outpatient interventional spine pain management services
- Inpatient and outpatient lumbar and cervical spine surgeries
- Inpatient and outpatient knee surgeries
- Inpatient and outpatient hip surgeries
- Inpatient and outpatient shoulder surgeries

In addition to the Cervical Artificial Disc Replacement procedures that currently require prior authorization, the following cervical spine surgeries will require prior authorization for dates of service beginning January 1, 2019:

- Cervical Anterior Decompression with Fusion — Single & Multiple Levels
- Cervical Posterior Decompression with Fusion — Single & Multiple Levels
- Cervical Posterior Decompression without fusion
- Cervical Anterior Decompression without fusion

Ordering physicians are responsible for requesting and obtaining authorizations. It is the responsibility of the ordering physician/surgeon and rendering facility to ensure that prior authorization was obtained. Payment will be denied for procedures performed without a prior authorization, and the member cannot be balance-billed for such procedures.

Facility admissions do not require a separate prior authorization. However, the facility should ensure that a NIA prior authorization has been obtained prior to scheduling the surgery/procedure.

To Request Prior Authorization

- Website: [www.RadMD.com](http://www.RadMD.com)
- Toll Free Phone Number: 1-800-642-7543
Procedures Requiring Prior Authorization:

**Outpatient Interventional Spine Pain Management Services***:

- Spinal Epidural Injections
- Paravertebral Facet Joint Injections or Blocks
- Paravertebral Facet Joint Denervation [Radiofrequency (RF) Neurolysis]

**Outpatient and Inpatient Spine Surgery Services**:

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetectomy & Foraminotomy)
- Lumbar Spine Fusion (Arthrodesis) With or Without Decompression — Single & Multiple Levels
- Cervical Anterior Decompression with Fusion — Single & Multiple Levels *(Effective Jan. 1, 2019)*
- Cervical Anterior Decompression without fusion *(Effective Jan. 1, 2019)*
- Cervical Posterior Decompression with Fusion — Single & Multiple Levels *(Effective Jan. 1, 2019)*
- Cervical Posterior Decompression without fusion *(Effective Jan. 1, 2019)*
- Cervical Artificial Disc Replacement — *Currently requires prior authorization*

**Outpatient and Inpatient Hip Surgery Services**:

- Revision/Conversion Hip Arthroplasty
- Total Hip Arthroplasty/Resurfacing
- Femoroacetabular Impingement (FAI) Hip Surgery (includes CAM/pincher & labral repair)
- Hip Surgery – Other (includes synovectomy, loose body removal, debridement, diagnostic hip arthroscopy, and extra-articular arthroscopy)

**Outpatient and Inpatient Knee Surgery Services**:

- Revision Knee Arthroplasty
- Total Knee Arthroplasty (TKA)
- Partial-Unicompartmental Knee Arthroplasty (UKA)
- Knee Manipulation under Anesthesia (MUA)
- Knee Ligament Reconstruction/Repair
- Knee Meniscectomy/Meniscal Repair/Meniscal Transplant
- Knee Surgery – Other (includes synovectomy, loose body removal, diagnostic knee arthroscopy, debridement with or without chondroplasty, lateral release/patellar realignment, articular cartilage restoration)

*Surgeon must request surgery authorization for each joint, even if bilateral joint surgery is to be performed on the same date.*

*A separate prior authorization number is required for each procedure ordered.*
Outpatient and Inpatient Shoulder Surgery Services:

- Revision Shoulder Arthroplasty
- Total/Reverse Arthroplasty or Resurfacing
- Partial Shoulder Arthroplasty/Hemiarthroplasty
- Shoulder Rotator Cuff Repair
- Shoulder Labral Repair
- Frozen Shoulder Repair/Adhesive Capsulitis
- Shoulder Surgery — Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, clavicleectomy, diagnostic shoulder arthroscopy)

If an urgent/emergent clinical situation exists outside of a hospital emergency room, please contact NIA immediately at 1-800-642-7543 with the appropriate clinical information for an expedited review.

Please refer to NIA’s website www.RadMD.com to obtain the Harvard Pilgrim NIA Billable CPT® Codes Claim Resolution/Utilization Review Matrix for all the CPT-4 codes that NIA authorizes on behalf of Harvard Pilgrim.

Helpful Information

Please adhere to the following guidelines.

Outpatient and Inpatient Musculoskeletal Surgeries:

- Emergency musculoskeletal surgery (admitted via the Emergency Room) does not require prior authorization through NIA.
- Non-emergent outpatient and inpatient hip, knee, shoulder and spine surgery services require prior authorization through NIA.
- Authorizations are valid for 4 days from the scheduled date of service for inpatient surgery and 1 day from the date of service for outpatient surgery.

Interventional Pain:

- Interventional pain management procedures performed in the emergency room or on an inpatient basis do not require prior authorization through NIA.
- All outpatient interventional pain management services require a prior authorization through NIA for each procedure performed.
- Authorizations are valid for 30 days from the date of service.

Authorization Status

You can check on the status of patients’ authorizations quickly and easily by going to the NIA website, www.RadMD.com. After obtaining a secure password sign-in to select, the My Exam Requests tab to view all outstanding authorizations.
Submitting Claims

Claims go directly to Harvard Pilgrim. Providers are encouraged to use EDI claims submission (see www.harvardpilgrim.org/providers for details). Or mail your claims to the following address:

Harvard Pilgrim Health Care
PO Box 699183
Quincy, MA 02269-9183

For More Information
For additional information, please refer to our Frequently Asked Questions document and checklists, found on www.RadMD.com.