



Consult Questions and Answers

What is Consult?

Consult, a radiology-centered program, provides real-time decision support for practitioners considering CT, CTA, MRI, MRA, Cardiac Nuclear Medicine, and PET scans as part of a diagnostic work-up. The consult process involves collecting relevant clinical information from the ordering practitioner's office, reviewing this information alongside current evidence-based guidelines, and, if necessary, providing physician-to-physician consultation for education on test appropriateness and patient safety. The program follows URAC guidelines for utilization management.

Who requires a Prior Approval Number?

Prior Approval Numbers are required for all of New York State Medicaid FFS Program membership. Beneficiaries eligible for both Medicaid and Medicare (dual eligible) or beneficiaries who are enrolled in a managed care plan are not included.

What procedures require a Prior Approval Number?

Outpatient, non-emergency CT, CTA, MRI, MRA, Cardiac Nuclear Medicine, and PET scans are assessed through HealthHelp's program. Procedures such as plain film x-ray, ultrasound, and fluoroscopy are not included in HealthHelp's Consult program.

How can I contact Consult?

The ordering practitioner who requests the exam for the patient is responsible for contacting Consult and obtaining the Prior Approval Number. This is because clinical questions will be asked and the ordering practitioner has a better knowledge of the patient's previous treatments.

The ordering practitioner's office may contact HealthHelp in two ways:

Phone

(888) 209-4122

Fax

(888) 209-9634

Can I suggest a change to your criteria?

Yes, we welcome your suggestions. Please submit any suggestions with supporting peer-reviewed literature. The package will be reviewed for appropriateness and submitted to the physician advisory committee for acceptance. We will respond to you within sixty days.

How does the Consult program assist practitioners and their patients?

The principle of ALARA (as low as reasonably achievable) remains the most widely accepted method for managing human exposure to ionizing radiation, which should always be kept as low as reasonably achievable. Practitioners must consider the consequences of ionizing radiation when ordering radiology exams. While imaging is an important diagnostic tool, using it without moderation proves more harmful than beneficial. Reducing the unnecessary use of all forms of ionizing radiation, especially CT in children, will result in fewer cancer deaths.



What are the clinical criteria used for the Consult program in determining the appropriateness for ordering these procedures?

This program uses proprietary radiology review criteria updated regularly with peer-reviewed literature from the industry. Determinations and recommendations are made in accordance with acceptable medical standards and appropriateness-of-care guidelines. Specific guidelines with supporting literature are faxed to the ordering practice if criteria are not met.

Are these Interqual criteria?

No. The criteria are based on current peer-reviewed literature.

Can I get a copy of your criteria?

Yes, a general synopsis of the criteria and supporting literature, in the form of a Pocket Medical Imaging Consultant, will be provided to the ordering practitioner upon request.

Are the criteria current?

Yes, all criteria are reviewed and updated quarterly.

Who has to make the call to Consult?

The ordering practitioners' office should have the relevant clinical information available in the patient's chart. The information includes the diagnosis, ICD-9 code, and name of ordered test, CPT code, reason for the test, and duration of symptoms, prior imaging studies, laboratory studies, medications, and any prior treatments.

Does Consult check the eligibility of the patient?

Yes, a HealthHelp representative will verify with the New York State Medicaid FFS Program via the eMedNY system

How are your criteria developed?

HealthHelp's proprietary clinical review criteria are developed using existing guidelines (ACR), current medical literature, and regionally accepted practice protocols for particular diagnosis codes and procedures.

Does Consult supply CPT or ICD-9 codes once a diagnosis is given?

To expedite the Consult process, it is best if the practitioner's office is prepared to deliver this type of information.

How does Consult work?

The ordering practitioner's office engages Consult prior to scheduling CT, CTA, MRI, MRA, Cardiac Nuclear Medicine, and PET scans. Consult collects all relevant clinical information and reviews it alongside evidence-based guidelines. A confirmation including a New York State Medicaid FFS Prior Approval number is then sent to the provider's office. When the clinical rationale is inconsistent with the guidelines, a board-certified radiologist consults with the ordering practitioner to evaluate available diagnostic opportunities. A very small percentage of cases require further review.

Does this mean that Consult will preauthorize or deny services?

No. Consult will only provide educational consultation. Ordering practitioners will make the final determinations on the procedures to be performed, and a New York State Medicaid FFS Prior Approval number will be provided.



What are the Consult hours of operation?

Consult representatives and providers are available via phone Monday through Friday from 8 a.m. to 6 p.m. Eastern Standard Time.

What information should our office provide to Consult at the time of the consultation?

Please have the patient's chart available when calling Consult. Relevant clinical information includes the diagnosis, ICD-9 code, and name of the ordered test, CPT code, reason for the test, and duration of symptoms, prior imaging studies, laboratory studies, medications, and any prior treatments.

Are retroactive numbers given?

Prior approval must be submitted within 30 days from the time the submission came within the control of the provider and the request must be made by the New York State Medicaid FFS department.

Does the number have an expiration date?

90 Days

How does the Prior Approval Number make it into the eMedNY system?

Prior Approval Numbers are entered directly into the eMedNY system by HealthHelp.