

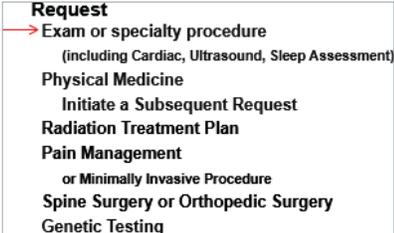
RadMD Quick Start Guide

Request an exam or specialty procedure

This quick start guide assists ordering providers and their staff in obtaining prior authorizations for specialty procedures quickly and easily via RadMD. To start, visit **RadMD.com**. Click *Sign In* on the right-hand side of the screen. Enter your username and password, then click *Login*.

1. Request an exam or specialty procedure

From the main menu under Request, click *Exam or specialty procedure*



Request

- Exam or specialty procedure
(including Cardiac, Ultrasound, Sleep Assessment)
- Physical Medicine
- Initiate a Subsequent Request
- Radiation Treatment Plan
- Pain Management
or Minimally Invasive Procedure
- Spine Surgery or Orthopedic Surgery
- Genetic Testing

2. Identify the patient

Enter the patient's information (Member ID is optional), then click *Save and Continue*



* Last Name: Requires first two letters * First Name: Requires first letter

* Date of Birth: / /

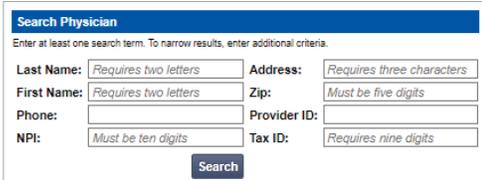
* Health Plan: [Where are the other health plans?](#)

Member ID: Optional

Back (Menu) Save and Continue to Step 2

3. Identify the physician

Enter physician search criteria, then click *Search*



Search Physician

Enter at least one search term. To narrow results, enter additional criteria.

Last Name: Requires two letters Address: Requires three characters

First Name: Requires two letters Zip: Must be five digits

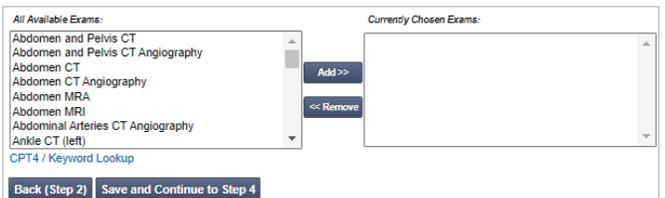
Phone: Provider ID:

NPI: Must be ten digits Tax ID: Requires nine digits

Search

4. Identify the exam(s)

Select the exam(s) from the list. Click *Add* to choose an exam(s). Click *Save and Continue*.



All Available Exams:

- Abdomen and Pelvis CT
- Abdomen and Pelvis CT Angiography
- Abdomen CT
- Abdomen CT Angiography
- Abdomen MRA
- Abdomen MRI
- Abdominal Arteries CT Angiography
- Ankle CT (left)
- CPT4 / Keyword Lookup

Currently Chosen Exams:

Add >> **<< Remove**

Back (Step 2) Save and Continue to Step 4

5. Identify the rendering provider

Enter search criteria for a rendering provider, then click *Search*.



Enter at least one search term.
To narrow results, enter additional criteria.

Name:

City:

Zip:

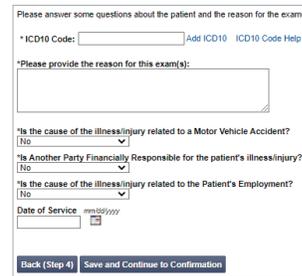
Tax ID:

NPI:

PIN:

6. Reason for the exam

Enter at least one ICD-10 code.
Provide a reason in the text box.
Answer all questions.
Enter in the date of service if it is known.
Click *Save and Continue to Confirmation*.



Please answer some questions about the patient and the reason for the exam(s).

* ICD10 Code:

*Please provide the reason for this exam(s):

*Is the cause of the illness/injury related to a Motor Vehicle Accident?
 No Yes

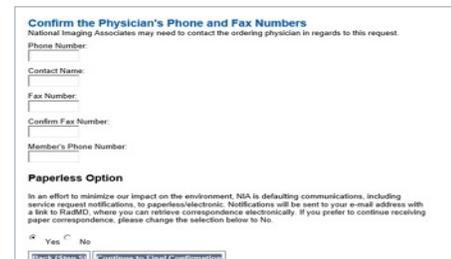
*Is Another Party Financially Responsible for the patient's illness/injury?
 No Yes

*Is the cause of the illness/injury related to the Patient's Employment?
 No Yes

Date of Service:

7. Confirm the ordering provider's phone and fax numbers

Enter the physician's phone number, name and fax number along with the member's phone number. Click *Continue to Final Confirmation*.



Confirm the Physician's Phone and Fax Numbers
National Imaging Associates may need to contact the ordering physician in regards to this request.

Phone Number:

Contact Name:

Fax Number:

Confirm Fax Number:

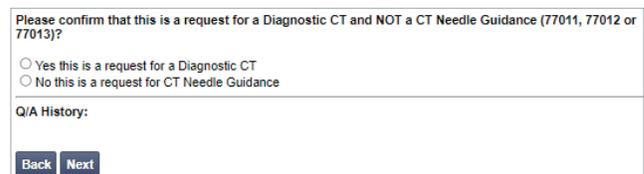
Member's Phone Number:

Paperless Option
In an effort to minimize our impact on the environment, NIA is defaulting communications, including service request notifications, to paperless/electronic. Notifications will be sent to your e-mail address with a link to iRadMD, where you can review correspondence electronically. If you prefer to continue receiving paper correspondence, please change the selection below to No.

Yes No

8. Clinical questions: clinical Q/A

Answer questions specific to the procedure.
Click *Next* after answering each question.



Please confirm that this is a request for a Diagnostic CT and NOT a CT Needle Guidance (77011, 77012 or 77013)?

Yes this is a request for a Diagnostic CT
 No this is a request for CT Needle Guidance

Q/A History:

9. Request Complete

Final page confirms the request and displays current status. Click *Upload Clinical Document* to upload medical records/additional clinical information.



Status	
Current Status:	Pending
Validity Period:	[Not Applicable]
Tracking Number:	0000000

Status	
Current Status:	Approved
Validity Period:	1/31/2014-4/1/2014
Authorization:	0000000

FOR PENDED REQUESTS, PROVIDERS CAN UPLOAD OR FAX CLINICAL DOCUMENTS.

Faxed clinical information should be accompanied by the OCR fax cover sheet.

Files that can be uploaded include:

- Microsoft Word documents (.doc)
- Image files (.gif, .png, .jpg, .tif, and .tiff)
- Adobe Acrobat files (.pdf)
- Text documents (.txt)

Files must be less than 100 MB in size.

Questions? Comments?

For assistance, please contact the provider support team at:

radmdsupport@evolent.com or call **1.800.327.0641**.

RadMD is available 24/7, except when maintenance is performed every third Thursday of the month from 9 p.m.–12 a.m. PST.