



Having trouble with MRI Prior authorization denials?

General MRI criteria can be found on the MHC website, www.mhc.coop. Most musculoskeletal MRI's require evidence of failure of a trial of conservative therapy. This includes a three-week trial of prescription strength NSAIDs, six weeks of physical therapy and six weeks of actively modification. Ordering an MRI on the first visit or at patient's request is often problematic. Please visit Provider Policies and Forms at www.mhc.coop for more MRI information.



Get automated - it's faster and easier



Appeal “on-line” form

Providers have a consent form to complete an appeal on behalf of the MHC member. It can be found on the MHC website at www.mhc.coop. MHC also offers an “on-line” appeals form, also found on the website. Using the on-line appeals form is not the only way to submit an appeal but it is the best way to submit an appeal regarding a denied claim or a denied service.

Customized - Have you seen the **New** MHC Prior Authorization on-line form?

There is a better way to submit prior authorizations! When using our NEW electronic PA form, you will receive a confirmation that your request has been received. You can also upload medical records. Please click on the link below to access our NEW on-line PA form.

If you need to submit Prior Authorizations requests via FAX, we have also **updated** our PA Fax numbers:

FAX 801-262-0103 for **inpatient notifications**.

FAX 801-213-1358 for *any other Prior auth request*.

Don't wait - EFT & ERA



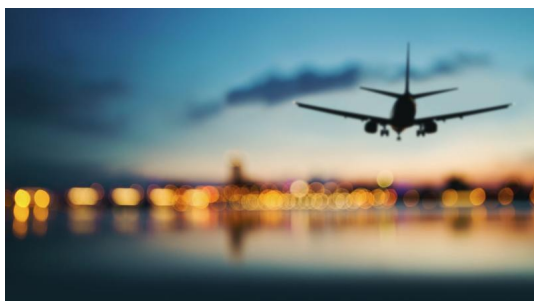
Have you signed up for EFT and ERA yet?

Why wait for snail mail when Electronic Remittance Advice and Electronic Funds Transfer deliver claim information to you and payments to your bank account the same day as they are posted?

Visit uhealthplan.utah.edu/for-providers/edi.php for more information. Don't wait – make your office more efficient by signing up for ERA and EFT today.

Air Ambulances - \$\$ Savings \$\$

The air ambulance companies below are currently participating with the CO-OP. Using one of these providers, when possible, could save the patient a lot of money.



Idaho

Air St. Luke's (208) 381-8900
Twin Falls and Boise, Idaho
Rotor & Fixed Wing

University Of Utah (877) 247-6331
Salt Lake City, Utah
Rotor & Fixed Wing

Montana

Benefis Hospital – Ambulance Air
Transportation
Great Falls, Montana (406) 455-5000
Rotor & Fixed Wing

Montana Medical Transport
Helena, Montana (406) 457-2805
Fixed Wing

St. Vincent's Healthcare
Billings, Montana (406) 237-7000
Rotor & Fixed Wing

Billings Clinic (406) 255-8411
Billings, Montana
Fixed Wing

Kalispell Regional (406) 752-5111
Kalispell, Montana
Rotor & Fixed Wing

University Of Utah (877) 247-6331
Salt Lake City, Utah
Rotor & Fixed Wing

Professional Providers Dispensing DME

If you are a professional provider who dispenses Durable Medical Equipment to patients, some items may only be covered

when purchased by a licensed Durable Medical Equipment provider. Please contact MHC at 855-447-2900 [for a list of codes that are covered when dispensed in the office.](#)



2019 Psychological or Neuropsychological testing code updates

As you may already know, American Medical Association announced changes to some Central Nervous System Assessment/Testing codes for 2019. 96101, 96102, 96103, 96118, 96119 & 96120, historically used to report Central Nervous System Assessments / Tests like computerized neurocognitive, psychological and neuropsychological testing procedures were eliminated.

New billing codes were developed to replace the former testing procedure codes. They were designed to more accurately describe the technical and professional services work performed. The new codes provide a clearer definition of professional “test evaluation services” and the “test administration and scoring” work performed by a technician or qualified health professional. Please read below for further details.

Central Nervous System Assessments / Tests (e.g., Neuro-Cognitive, Mental Status, Speech Testing)

Test Administration Services

96136 - Psychological or Neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method, first 30 minutes

96137 - Each additional 30 minutes (List separately in addition to code for primary procedure)

96138 - Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes

96139 - Each additional 30 minutes (List separately in addition to code for primary procedure)

Test Evaluation Services

96130 - Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour

96131 - Each additional hour (List separately in addition to code for primary procedure)

96132 - Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour

Additional Billing Codes

99483 – Category I: Evaluation and Management "Cognitive Assessment and Care Plan Services" Assessment of and care planning for a patient with cognitive impairment, requiring an independent historian e.g., spouse, informant. etc. in the office or other outpatient, home or domiciliary or rest home, with all the following required elements:

1. Cognition-focused evaluation including a pertinent history and exam. Use of standardized instruments to stage dementia.
2. Medical decision making of moderate or high complexity. (defined by the E/M guidelines).
3. Functional assessment including decision-making capacity.
4. Medication reconciliation and review for high-risk



96133 - Each additional hour
(List separately in addition to
code for primary procedure)

medications, if
applicable.

5. Evaluation for neuropsychiatric and behavioral symptoms, including depression, including use of standardized instrument(s).
6. Identification of caregiver(s), caregiver knowledge, caregiver needs, social supports, and willingness of caregiver to take on caregiving tasks.
7. Evaluation of safety, including motor vehicle operation, if applicable.
8. Address palliative care needs, if applicable and consistent with beneficiary preference.
9. Creation of a care plan, including initial plans to address any neuropsychiatric symptoms, neuro-cognitive symptoms, functional limitations, and referral to community resources as needed; care plan shared with the patient and /or caregiver with initial education and support.

For more information, see
<https://www.apa.org/monitor/2019/01/testing-codes> or
<https://www.cnsvs.com/Reimbursement.html>.

Provider Portal

Providers, are you registered for the Provider Portal? Don't wait! You can view member eligibility, claims and authorizations. Click the link below to save yourself time today.

https://physicians.utah.edu/request_pre.php

