

# RadMD Pain Management Quick Start Guide

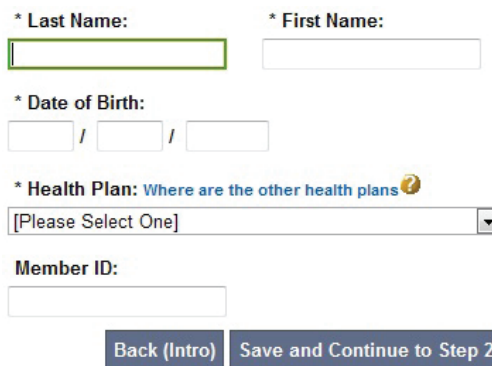
## Request Pain Management (Injection)

This Quick Start Guide is a tool to assist ordering physicians and staff in obtaining prior authorizations for Pain Management quickly and easily via the **RadMD website**. To start, open your Internet browser and visit **RadMD.com**. Click *Login* on the right side of the screen. Enter your *Account ID* and *Password*, then click *Login*. Click *Request Pain Management* or *Spine Surgery*.

### 1. Identify the Patient


Enter the patient's information.

Click *Save and Continue*.



\* Last Name:  \* First Name:

\* Date of Birth:  /  /

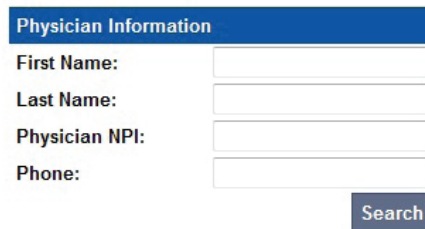
\* Health Plan: [Where are the other health plans](#)   
[Please Select One]

Member ID:

### 2. Identify the Physician

Enter physician search criteria.

Click *Search*.



**Physician Information**

First Name:

Last Name:

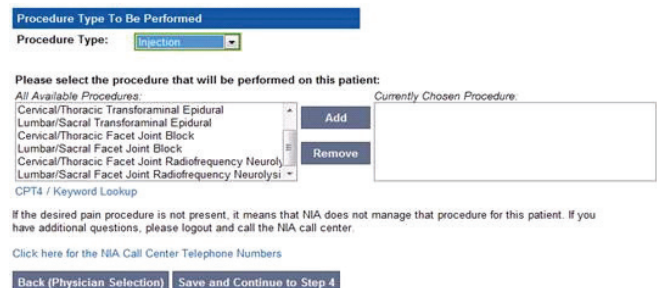
Physician NPI:

Phone:

### 3. Identify the Procedure

If *Injection* is selected then *Select the procedure* from the list on the left

Click *Save and Continue*.



**Procedure Type To Be Performed**

Procedure Type:

Please select the procedure that will be performed on this patient:

All Available Procedures:

Currently Chosen Procedure:

If the desired pain procedure is not present, it means that NIA does not manage that procedure for this patient. If you have additional questions, please logout and call the NIA call center.

[Click here for the NIA Call Center Telephone Numbers](#)

#### 4. Select the Place of Service

Enter search criteria for a provider location, click *Search*.

Select the location for the search results table.

Please select the exact location for the provider:

**Provider Location**

Search by Name:

Search by City:

Search by Zip:

#### 5. Reason for the Procedure(s)

Answer all of the following questions.

Click *Continue to Clinical Questions*.

\*ICD-10 Code:  [Add ICD-10](#) [ICD-10 Code Help](#)

\* Please provide the reason for this procedure:

\* Is the cause of the illness/injury related to a Motor Vehicle Accident?

\* Is Another Party Financially Responsible for the patient's illness/injury?

\* Is the cause of the illness/injury related to the Patient's Employment?

\* Date of Service

#### 6. Clinical Questions: Clinical Q/A

Answer questions specific to the procedure.

Click *Next* after answering each question.

Click *Finish* after all questions have been answered.

#### Pain Management Request: Clinical Q/A

Is this a request for a facet joint block/injection?

- Yes  
 No

Q/A History:

The member is 18 years of age or older.

#### 7. Request Complete

Final page confirms the request and displays the current status.

Click *Start New Exam* or *Back to Main Menu* or *Upload Additional Information*.

**Status**

Current Status: Pending

Validity Period: [Not Applicable]

Tracking Number: 0000000

For pended requests, providers can fax or upload clinical documents to Magellan Healthcare\*

Faxed clinical information should be accompanied by the OCR fax cover sheet. Files that can be uploaded include:

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

Files must be less than 10 MB in size.

#### Questions? Comments? Need help?

Send an email to [RadMDSupport@MagellanHealth.com](mailto:RadMDSupport@MagellanHealth.com). Or call toll-free 877-80-RADMD (877-807-2363).

RadMD is available 24/7, except when maintenance is performed once every other week after business hours.

\* National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.