Diagnostic Imaging Management
Frequently Asked Questions (FAQ) from Providers
Updated August 1, 2013

Program Overview

Q1. What is AIM Specialty Health℠ (AIM)?
A1. AIM Specialty Health℠ (AIM) is a leading specialty benefits management company with more than 20 years of experience and a growing presence in the management of radiology, cardiology, oncology, sleep medicine, and specialty pharmacy benefits. Their mission is to make healthcare services more clinically appropriate, safer and more affordable. As such, they promote the most appropriate use of specialty care services through the application of widely accepted clinical guidelines delivered via an innovative platform of technologies and services.

Q2. Are you using AIM for all members?
A2. Not at this time. While preauthorization is required for advanced diagnostic imaging for all members, some are managed by PacificSource directly. Please send requests for PacificSource Administrators members to PacificSource rather than AIM.

Q3. Why does PacificSource use a diagnostic imaging management program?
A3. PacificSource has developed this program to promote the most appropriate use of advanced imaging services provided to our members. We have offered this program to commercial members in Oregon, Idaho, and Washington since 2010 and to Medicare members since January 2013. In July 2013, we expanded this service to include members in Montana.

Q4. Why is PacificSource focusing on advanced diagnostic imaging?
A4: Advanced imaging remains one of the fastest growing clinical services in the healthcare system today. While the rapidly improving technology and clinical application of these services are the leading drivers of growth, it is widely accepted that some proportion of this growth is due to procedures that are unnecessary.

Given the potentially negative clinical implications of unnecessary testing, such as exposure to high doses of ionizing radiation, as well as the high costs of these tests, PacificSource is implementing this management program to promote the appropriate use of advanced imaging services.

Q5. What are the goals of the program?
A5. The PacificSource diagnostic imaging management program uses AIM’s Diagnostic Imaging Utilization Management Guidelines, which are designed to promote appropriate use of advanced diagnostic imaging services based on widely accepted clinical evidence of the use of these services. You may review AIM’s guidelines online at www.aimspecialtyhealth.com.

PacificSource has the following goals for this program:
• Promoting the selection of the most clinically appropriate diagnostic imaging services based upon the patient’s clinical needs
• Encouraging standardization of medical practice patterns and reducing variation in clinical evaluation through provider education and collaboration
• Curtailing the performance of inappropriate advanced diagnostic imaging studies
• Advocating bio-safety issues, including reduction of unnecessary radiation exposure
• Enhancing quality of healthcare for diagnostic imaging studies using evidence-based medicine and outcomes research from numerous resources

Program Design and Requirements

Q6. What are the requirements for this program?
A6. Ordering/referring nonradiological physicians must contact AIM to obtain an order number before scheduling elective outpatient diagnostic imaging services. In addition, servicing providers should confirm that an order number has been obtained prior to service delivery.

Q8. What types of diagnostic imaging exams are included under this program? What types are excluded?
A8. The program includes: outpatient (including hospital outpatient centers, free-standing imaging facilities and physician offices) places of service for elective CT scans (CT/CTA), MRI (MRA, MRM, MRM, fMRI), PET scans and Nuclear Cardiology studies. The program does not include low-tech studies such as mammography, ultrasound, x-ray exams.

The program excludes: imaging services provided in conjunction with emergency room visits, inpatient hospitalization, urgent care centers, or hospital observations.

Q9. How does a provider or physician office staff member know which procedures are included or excluded from the program?
A9. Our Preauthorization List includes this information. The list is available to providers in the Provider area of our website at:
   • PacificSource.com for commercial members
   • Medicare.PacificSource.com for Medicare members

Q10. How does a physician office staff member obtain an order number from AIM?
A10. There are two ways to obtain an order number for diagnostic imaging services:
   • By calling AIM at (877) 291-0510
   • By using AIM’s ProviderPortal at www.aimspecialtyhealth.com/goweb. Since many providers already use AIM’s ProviderPortal, there is no need to register again. If a provider is new to AIM, they will need to register at www.aimspecialtyhealth.com/goweb.

Q11. How does the diagnostic imaging management program work?
A11. Ordering physicians’ offices submit order requests through ProviderPortal – AIM’s interactive Internet application or through the AIM Call Center. Web users or callers will be required to provide the following information: member name and ID, physician name, servicing provider, exam
requested, suspected or confirmed diagnosis, current symptoms and previous recent exam results or treatment.

If the information provided meets AIM’s clinical criteria an order number will be issued.

If all criteria are not met or additional information or review is needed, the case is forwarded to a Registered Nurse (RN) who uses additional clinical experience and knowledge to evaluate the request against AIM clinical guidelines.

If an order number still cannot be issued by the nurse reviewer, the case is forwarded to an AIM Physician Reviewer (MD), who contacts the ordering physician directly to discuss the case and diagnostic imaging guidelines prior to issuing the order number. AIM’s Clinical Guidelines serve as a foundation for this collegial discussion. These Guidelines are available for download on AIM’s website, www.aimspecialtyhealth.com

The Physician Reviewer can approve the case based on a review of information collected or through their discussion with the ordering physician. In the event that the AIM Physician Reviewer cannot approve the case based on the information previously collected, is unable to reach the ordering physician to discuss the case, or is unable to approve the case based on the information supplied by the ordering physician during the peer-to-peer discussion, the Physician Reviewer will issue a denial for the request.

Q12. Does AIM need to know when the procedure is scheduled?
A12. No, although the order number should be issued prior to scheduling the study.

Q13. Can member contact AIM?
A13. Members should contact their provider if they have questions about an order request prior to their test. Members should contact PacificSource directly if they have any questions about the program, their benefits, or for appeals on radiology services that did not receive an order number.

Q14: What is the imaging providers’ role in the diagnostic imaging management program?
A14: Imaging facilities are strongly encouraged to verify that an order number has been obtained prior to scheduling the study. If an order number is not obtained, the facility may experience claims and noncompliance reporting impact.

Q15. Can providers obtain order numbers on a retrospective basis?
A15. AIM will conduct retrospective review for urgent requests made within two business days of the exam. If more than two business days have passed since the exam, please contact PacificSource Customer Service.

Q16. Are any physicians exempt from participating in this program?
A16. All ordering/referring physicians and imaging providers/facilities contracted with PacificSource are required to comply with the program.

Q17. I am a hospital-based imaging provider. Does this program apply to me?
A17. Non-radiology specialists are required to request an order number for outpatient elective advanced imaging services regardless of their affiliation with a facility or practice. Inpatient diagnostic imaging is not included in this program. Hospital-based radiologists who only provide professional services are not required to participate in the program.

Q18. I have radiology equipment in my office. Am I able to perform diagnostic exams in office, and am I required to obtain an order number to perform CTs, MRs, Nuclear Cardiology exams, and PETs on PacificSource members?

A18. An order number is required to perform any elective, outpatient advanced diagnostic service, even for ordering physicians with their own imaging equipment. Contact AIM and request an order number for imaging studies to be performed at your office or facility.

Q19. What online services does AIM offer? How do providers contact AIM after-hours?

A19. ProviderPortal—AIM's interactive internet application—is available 24 hours a day, 7 days a week, and helps ordering physicians and staff quickly and efficiently submit and verify order requests for PacificSource members at any time via the Web.

Q20. How long does it take to obtain a user password after registering on AIM’s website?

A20. If an email address is provided during the registration process, the approval will be sent immediately via email to the new user. Once the email is received, the user will need to follow the instructions in the email to complete the registration.

Q21. Is the ordering physician required to obtain an order number for an urgent case, and how is this done in the evening and on weekends?

A21. Emergency room services do not require an order number. Outpatient elective diagnostic imaging services are typically not urgent in nature. For those rare requests that are medically urgent, providers should contact AIM on the next business day at 877-291-0510.

Standards for Imaging Guidelines, Privileging, and Credentialing

Q22. Who develops the clinical criteria for the program?

A22: AIM’s Diagnostic Imaging Utilization Management Guidelines are updated at least once a year and are reviewed by:

- An independent Physician Review Board, including cardiologists, orthopedic surgeons, radiologists, neurologists, and neurosurgeons
- Client Medical Directors
- Local Imaging Advisory Council (representing local physician communities)
- Physician Review Panels

In addition, AIM’s guidelines are submitted as part of AIM’s accreditation process to the National Committee for Quality Assurance (NCQA) and URAC.

Q23: What methods and resources are used to develop the guidelines?
A23: Development of AIM’s Diagnostic Imaging Utilization Management Guidelines involves integration of medical information from multiple sources to support the reproducible use of high quality and state-of-the-art diagnostic imaging services. The process for criteria development is based on technology assessment, peer-reviewed medical literature, including clinical outcomes research, and consensus opinion in medical practice.

The primary resources used for the development of AIM’s Diagnostic Imaging Utilization Management Guidelines include:

- American College of Radiology (ACR) Appropriateness Criteria
- American College of Cardiology (ACC) Appropriateness Criteria
- American Heart Association (AHA)
- American Institute of Ultrasound in Medicine (AIUM)
- American Cancer Society
- American Academy of Neurology (AAN)
- American Academy of Pediatrics (AAP)
- Society of Interventional Radiology (SIR)
- Society of Nuclear Medicine (SNM)
- Agency for Healthcare Research and Quality (AHRQ)
- Centers for Medicare and Medicaid Services (CMS)
- National Guideline Clearinghouse