

20700 NE Bond Rd, Bld 'B'  
 PO Box 1399  
 Poulsbo, WA 98370  
 P: 360.598.3141  
 F: 360.598.3431



Tax ID: 91-1886028  
 Group NPI: 1215990924  
 www.inhealthimaging.com  
 Billing Dept: 360.779.9657  
 Fax: 360.779.6405

**PRE AUTHORIZATION REQUIREMENT INFORMATION BY PAYER AS OF 1/10/14**

Plan	Contact Method	Est. Time Frame for Auth	Code RANGE or SPECIFIC	MRI	MRA	CT	Ultrasound	XRAY	Nuclear Med	**Injections Joint Facet Spine
*Aetna	MED SOLUTIONS 888.693.3211 medsolutionsonline.com	1 – 2 Days	Specific	Yes	Yes	Yes	No	No	Cardiac	**
Alaska Care	877.517.6370	24 Hrs	Specific	Spine Knee	No	No	No	No	No	**
APWU	MED SOLUTIONS 866.879.8317 medsolutionsonline.com	1 – 2 Days	Specific	Yes	Yes	Yes	No	No	No	**
Cigna	MED SOLUTIONS 888.693.3211 medsolutionsonline.com	2 Days	Specific	Yes	Yes	Yes/ 3D	No	No	Cardiac	**
CHPW	800.440.1561 or onehealthport.com	1 – 2 Days	Per auth	Yes	Yes	CTA	No	No	SPECT	**
DSHS	onehealthport.com	3- 5 Days	Specific	Yes	No	Yes	No	No		**
<sup>1</sup> Amerigroup	<a href="https://providers.amerigroup.com/pages/wa.aspx">https://providers.amerigroup.com/pages/wa.aspx</a>	1 – 3 Days	Specific	Yes	Yes	Yes	No	No	Yes	**
<sup>1</sup> Coordinated Care	877.644.4613 coordinatedcarehealth.com	Same Day	Specific	Yes	Yes	Yes	No	No	Yes	**
<sup>1</sup> Lifewise/WA	877-342-5258, option 3	1 Day	Specific	Yes	Yes	Yes	No	No	Cardiac	**
<sup>1</sup> Molina	800.869.7185 or molinahealthcare.com	1 – 2 Days	Per auth	Yes	Yes	CTA	No	No	SPECT	**
First Choice	800.231.6935 onehealthport.com	1-5 Days	Specific	Yes	Yes	Yes	No	No	Cardiac/ SPECT	**
GEHA	MED SOLUTIONS 866.879.8317 medsolutionsonline.com	1 Day	Specific	Yes	Yes	Yes	No	No	Cardiac	**
Great West	MED SOLUTIONS 888.693.3295 medsolutionsonline.com	2 Days	Specific	Yes	Yes	Yes	No	No	No	**
Group Health	onehealthport.com	1 Day	Range	Yes	Yes	Yes	Surgical	Surgical	cardiac	**
Health Net	888.802.7001	1-2 Days	Specific	Yes	Yes	Yes	No	No		**
Humana	800-448-6262 or www.humana.com/pro viders	3-5 Days		Yes	Yes	Yes	No	No	Yes	Yes
KPS	Fax online form to KPS Med Svcs.	1 Day	Specific	Yes for some	Yes	No	No	No	No	**
L&I (Self insured)	Contact claims manager	Same day	Specific	spine/ extrem	No	head/ brain	No	No	No	**
Lifewise/OR	See back of pt's ins card	1 Day	Specific	Yes	Yes	Yes	No	No	Cardiac	**

Plan	Contact Method	Est Time Frame for Auth	Code RANGE or SPECIFIC	MRI	MRA	CT	Ultrasound	X-RAY	Nuclear Med	**Injections Joint Facet Spine
Moda Health (formerly ODS)	800.258.2037 or AIM 877-291-0513 – (Depending on employer group)	1 -2 Days	Specific	Yes	Yes	Yes	No	No	Yes	**
NW Sheetmetal	MED SOLUTIONS 888.693.3211 cigna.medsolutionsonline.com	2 Days	Specific	Yes	Yes	Yes/3D	No	No	Cardiac	**
OWCP	See back of pt's ins card	Same day	Specific	Yes	No	No	No	No	No	**
Pacific Source	(AIM) 866.291.0510	1-2 days	Specific	Yes	Yes	Yes	No	No	Cardiac	**
Premera	(AIM) 866.666.0776 americanimaging.net/goweb Benefits Advisory # / Local Plans Only	Same Day	Range	Yes	Yes	Yes	No	No	Cardiac	**
Providence	(AIM) 800.920.1250	1-2 Days	Specific	Ye	Yes	Yes	No	No	Cardiac	**
Regence & Regence Med Advantage	(AIM)877.291.0509 americanimaging.net/goweb Order ID required	Same Day	Range	Yes	Yes	Yes	No	No	Cardiac	**
Sound Health	Aetna SHW 800.225.7620	2-3 Days	Specific	No	No	No	No	No	No	**
Starmark	(MED SOLUTIONS) 800.706.7427 medsolutionsonline.com	3-5 Days	Specific	Yes	Yes	Yes	No	No	No	**
UHC Comm & Medicare	866.889.8054 unitedhealthcareonline.com	5 Days	Specific	Yes	Yes	Yes	**	No	**	**
UHC Military/Vets	877.988.9378 www.uhcmilitarywest.com	5 Days	Specific	Yes	Yes	Yes/3D	No	No	Yes	**
WA State L&I (DOLI) (Prov # 0167040)	Qualis online or 800.541.2894	3-5 Days	Specific	spine/ extrem	No	head/ brain	No	No	No	Yes

\* Some Aetna plans (as secondary insurer) require preauth

\*\*Unknown - Check with insurance carrier

<sup>1</sup> Falls under DSHS

<sup>2</sup> Not as secondary insurance

NOTE: Please call insurer if not listed above

IHI / January 2014