



# INSURANCE CARRIERS

INSURANCE CARRIER	PRE-CERTIFICATION REQUIRED
<p><b>Aetna Better Health Charter Oak Medicaid Plan</b> Call Plan @ 866-742-3120</p>	<p><b>PreCerts required:</b> MRA, MRI</p>
<p><b>AETNA Healthplans</b> Call MedSolutions @ 1-888-693-3211</p> <p>To verify precert/referral requirements for non-70000 CPT codes Call Aetna direct line for all plans 1-888-632-3862</p>	<p><b>PreCerts required:</b> CT Scan, MRA, MRI, Nuclear Cardiac Imaging, Pet Scan Referrals/Precert Needed per Group Contract: For NON 70000 CPT Series imaging procedures. (Cardiac Echo – 93306, venous US 93970 &amp; 93971, carotid arterial U/S 93880, Holter Monitor 93230) Limited Doppler 93976</p>
<p><b>ANTHEM Blue Cross &amp; Blue Shield</b> (all primary and secondary BCBS plans) CALL AIM @ 1-866-714-1107 Exceptions: Anthem MediBlue HMO (XGH prefix) and Empire BCBS plans stay with NIA Call NIA @ 1-888-864-7237</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Cardiology</p> <p>Echocardiogram 93306, Cardiac Scoring 75571 Call Anthem with the members Prefix ID to verify the Out of State plans that require a precert. Call Anthem direct @1-800-676-2583 Opt 5</p>
<p><b>AMERICHoice</b> 1-866-604-3267</p>	<p><b>PreCerts required:</b> MRI, MRA</p>
<p><b>CIGNA HMO &amp; Open Access Plans</b> Call AIM @ 1-800-859-5288</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Cardiology</p>
<p><b>CONNECTICARE</b> (Pre-cert # for each procedure) Call NIA @ 1-877-607-2363</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Cardiology</p>
<p><b>DEFINITY HEALTH</b> (Call for plan requirements) Call 1-866-333-4648 opt 3</p>	<p><b>PreCerts required:</b> CT, MRA, MRI</p>
<p><b>Diversified (North East Direct)</b> (Call to verify plan requirements) Call 1-800-423-5597 Opt 3</p>	<p><b>PreCerts required:</b> Cardiac Imaging, CT, MRA, MRI, Nuclear Medicine</p>
<p><b>GHI &amp; GHI HMO SELECT</b> (not required secondary to Medicare) Call CareCore @ 1-877-773-2884</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Medicine</p>
<p><b>GREAT WEST – all plans</b> Call Medsolutions @ 1-888-693-3211</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Cardiology</p>
<p><b>HEALTHNET</b> (all plans) Call CareCore @ 1-877-773-2884</p>	<p><b>PreCerts required:</b> Cardiac imaging, CT, MRA, MRI, Nuclear Medicine, OB Ultrasound (any additional after first)</p>



# INSURANCE CARRIERS

INSURANCE CARRIER	PRE-CERTIFICATION REQUIRED
<p><b>Loomis Company</b> (call for plan requirements) Call 1-800-647-2500</p>	<p><b>PreCerts required:</b> CT, MRA, MRI</p>
<p><b>Magna Care</b> (call for plan requirements) Call 1-877-335-4725</p>	<p><b>PreCerts required:</b> CT, MRA, MRI</p>
<p><b>MERITAIN HEALTH</b> (call for plan requirements) Call 1-800-242-1199 opt 3</p>	<p><b>PreCerts required:</b> CT, MRA, MRI</p>
<p><b>OXFORD Healthplans</b> (HMO &amp; Oxford Medicare Advantage Plan) Call CareCore @ 1-877-773-2884</p>	<p><b>PreCerts required:</b> Cardiac Imaging, CT, MRA, MRI, Nuclear Medicine</p> <p>Referrals/Precert Needed per Group Contract: For NON 70000 CPT Series imaging procedures. (Cardiac Echo – 93306, venous US 93970 &amp; 93971, carotid arterial U/S 93880, Holter Monitor 93230) Limited Doppler 93976 Call Oxford Direct @ 1-800-666-1353 OPTS 2-4-4-1-4</p>
<p><b>PEQUOT PLUS HEALTH</b> Call 1-888-557-1989</p>	<p><b>PreCerts required:</b> MRI, MRA, CT, Nuclear Cardiac Stress Study</p>
<p><b>POMCO</b> (call for plan requirements) Call 1-800-695-5170</p>	<p><b>PreCerts required:</b> CT, MRA, MRI</p>
<p><b>STIRLING BENEFITS/HMC Network</b> Primary plan only per Group Plan Call 1-866-739-0927</p>	<p><b>PreCerts required:</b> CT, MRA, MRI, Nuclear Medicine &amp; Cardiac Imaging</p>
<p><b>UNITED Healthcare – EMPIRE PLAN (only)</b> Call UHC: 1-877-769-7447</p>	<p><b>PreCerts required:</b> MRA and MRI only</p>
<p><b>WELLCARE OF CT – All Plans</b> Call 1-800-925-3606</p>	<p><b>PreCerts required:</b> Cardiac Imaging, CT, MRA, MRI, Nuclear Medicine</p>
<p><b>WORKERS COMPENSATION</b> (Date of Injury and Claim Number are required)</p>	<p><b>Information Required:</b></p> <ul style="list-style-type: none"> <li>- Name &amp; phone number of patient's workers compensation carrier.</li> <li>- Employer name and address.</li> <li>- Private insurance information</li> </ul>