

RadMD Quick Start Guide

Request a genetic test

This quick start guide assists ordering providers and their staff in obtaining prior authorizations for genetic tests quickly and easily via RadMD. To start, visit **RadMD.com**. Click Sign In on the right-hand side of the screen. Enter your username and password, then click Login.

1. Request a genetic test

From the main menu under Request, then click *Genetic Testing*

2. Identify the patient

Enter the patient's information, then click *Save and Continue* to Step 2

3. Identify the ordering provider

Enter ordering provider search criteria, then click *Search*

4. Identify the test and lab

Search test name, laboratory or GTU, then click *Search*

Request	
Exam or specialty procedure	
(including Cardiac, Ultrasound, Sleep Assessmer	nt)
Physical Medicine	
Initiate a Subsequent Request	
Radiation Treatment Plan	
Pain Management	
or Minimally Invasive Procedure	
Spine Surgery or Orthopedic Surgery	
→ Genetic Testing	

* Last Name:	* First Name:
Requires first two letters	Requires first letter
* Date of Birth:	
* Health Plan: Where are the	other health plans
[Please Select One]	•
Member ID:	
Optional	
Back (Menu)	Save and Continue to Step 2

	ring Provider search term. To narrow results,	enter additional criteri	a.
Last Name:	Requires two letters	Address:	Requires three characters
First Name:	Requires two letters	Zip:	Must be five digits
Phone:		Provider ID:	
NPI:	Must be ten digits	Tax ID:	Requires nine digits
	Searc	ch	

Search Test/Lab			
To make your selection, search by te least one field is required Note: you may only select one test po Not able to find a test? Click here t	er request.	 _	
Test Name	Laboratory	GTU	
Back (Step 2) Search			

5. Identify the rendering provider location

Enter search criteria for a rendering provider, then click *Search*

6. Reason for the test

Enter at least one ICD-10 code. Provide a reason in the text box. Answer all questions. Enter the date the test was performed if it is known. Click *Save and Continue* to Confirmation.

7. Confirm the ordering provider's phone and fax numbers

Enter the ordering provider's phone number, name and fax number along with the member's phone number. Click *Continue to Final Confirmation*.

8. Clinical questions: clinical Q/A

Answer questions specific to the procedure. Click *Next* after answering each question.

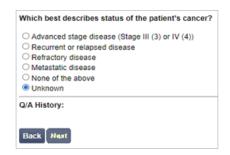
9. Request Complete

Final page confirms the request and displays current status. Click *Upload Clinical Document* to upload medical records/ additional clinical information.



Please answer some questions about the patient and the reason for the test:
* ICD10 Code: Add ICD10 ICD10 Code Help
*Please provide the reason for this test:
the state of the illumination of the illumination of the Mater Vehicle & address?
*Is the cause of the illness/injury related to a Motor Vehicle Accident? No V
*Is Another Party Financially Responsible for the patient's illness/injury? No V
*Is the cause of the illness/injury related to the Patient's Employment? No
Date of Service mm/dd/yyyy
Back (Step 4) Save and Continue to Confirmation

	e Physician's Phone and Fax Numbers Associates may need to contact the ordering physician in regards to this request.	
Phone Number:		
Contact Name:		
Fax Number:		
Confirm Fax Nu	nber:	
Member's Phon	Number:	
Paperless (Option	
service request a link to RadMD	nimize our impact on the environment, NIA is defaulting communications, including notifications, to paperless/electronic. Notifications will be sent to your e-mail addres where you can retirieve correspondence electronically. If you prefer to continue rec- dence, please change the selection below to No.	
a Yes No		





FOR PENDED REQUESTS, PROVIDERS CAN UPLOAD OR FAX CLINICAL DOCUMENTS.

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

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

Files must be less than 100 MB in size.

Questions? Comments?

For assistance, please contact the provider support team at: radmdsupport@evolent.com or call 1.800.327.0641.

RadMD is available 24/7, except when maintenance is performed every third Thursday of the month from 9 p.m.–12 a.m. PST.

