**BUCKS PHILADELPHIA MEDICAL CARE GROUP**

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**MRI Prior Authorization Policy**

To our Dear Valued Patients:

Our practice continues to upgrade our quality of care that we provide to our patients. As these advancements take place we will communicate such changes to you. As you may or may not be aware, certain tests ordered may not be covered by your insurance company without a prior authorization. Some of these are radiographic studies i.e. MRI’s, CT Scan, etc. For those who are not familiar with what a prior authorization is, it is a process set by which your insurance company (who quite honestly would rather not pay for the item requested). Perhaps my characterization of their intentions is not 100% correct but it sure as heck isn't 100% wrong. With this goal in mind, they require the doctor’s office to go through a lengthy and arduous process to explain to them why it is “medically necessary” for you to receive such testing. In all fairness, if we do a great job justifying it they will "do the right thing" 80% of the time and approve it-- obviously, some insurance companies are better than others. If Dr. Berkowitz orders a radiographic test, rest assured, that it is medically necessary and appropriate irrespective of what your insurance company may claim. Obviously, Dr. Berkowitz has your best interests at heart and the insurance company is quite frequently more invested in the financial spread sheet more than they are in your health.

To save money, insurance companies make this process unnecessarily complicated to give a profound disincentive to our ordering expensive appropriate testing. We've found the worse the insurance, the more expensive the test, the more time consuming and the more complicated the prior authorization process is.

Once your insurance company approves the prior authorization, they will provide our office with a unique identifier/confirmation number. Once we obtain this number we will inform the imaging facility performing the study of this confirmation number. Because the prior authorization process is quite time consuming, and since we're not your primary physician but a specialist, our office requests that, should you want us to do the precertification you pay us a nominal amount of money (**$20)** to carry out this process**.**We set this dollar amount at an amount, which will allow us to recoup our costs.

Please understand that this is not a guarantee of approval for the prior authorization. Some insurance companies will NOT do the right thing and we have ZERO leverage to force them to. Some insurance companies are basically saying— “don't confuse me with the facts, our minds are made up”. Rest assured that if we suggest an MRI to be done, it is indicated and appropriate. If an insurance company says it isn't then-- shame on them. The top ten healthcare CEOs all made 10 million or more for 2016-- the top

being 22 million. Now you know where your premiums are going.

As mentioned on several occasions previously, it is not in your insurance company’s best financial interest to approve the diagnostic test as it increases their expenses and in some sense, puts a damper on how much money their CEO will receive that year as his/her compensation. With that being said, our office will do what it takes to get the necessary authorization. We do care about our patients and will do all be possibly can to see them receive their necessary diagnostic test (our office’s track record for prior authorization approvals is over 80%).

Upon scheduling your appointment with the diagnostic test center for your MRI (or CT Scan), you will be notified at that time, from the facility whether the test requires a prior authorization. Should you require a prior authorization, contact our office immediately so we can obtain your prior authorization as soon as possible. After calling us, we will send you message indicating that your prior authorization was submitted to your insurance. There is no need for you to contact our office during the process of obtaining your authorization approval.  Should we need to contact you for additional information, we will do so.

Should you wish to discuss anything pertaining to your prior authorization, I ask that you direct your questions to Dr. Randy Phillips (Director and lead Physician for Quality Assurance and Medical Care). You can discuss it with him at the time of your visit or at another time should you have further questions about the process. Feel free to call him at 267-467-0046.

Keep it in mind that once your prior authorization is approved, it is only valid for a certain period of time and will require re-approval once expired.  This unfortunately is just another tactic by your insurance company to limit their expenses.  Be well.

Your eternal friend.

**Andrew Berkowitz**