

Workers' Compensation Billing Guide

We put your practice first, so you can put your patients first.

Carisk Imaging is a national imaging and neuro-diagnostics management services organization. Specializing in workers' compensation, Carisk provides access to high quality diagnostic testing services. Established in 1998, Carisk Imaging is a Certified Diagnostic Testing Network (DTN) and Organized Delivery System (ODS).



Scheduling

Carisk utilizes a 3-way calling approach (patient-scheduler-provider) to schedule services at your location. To schedule MRI, CT, EMG, or other diagnostic testing service:





(844) 676-6532



Web Portal www.cariskimaging.com

Submitting Paper Bills and Medical Reports.

After a patient's exam, please submit medical reports to Carisk Imaging within 24 hours via fax at (844) 676-6532. Please submit paper claims to the following address:

Carisk Imaging 180 Park Ave Plaza Level. Suite LL103 Florham Park, NJ 07932

Bills and medical reports should be sent to Carisk Imaging for all patients insured by Carisk's contracted carriers, regardless of scheduling. Billing the carrier directly will result in denials, payment delays, and/or additional administrative follow-up.

Electronic Bill Submissions.

Providers contracted with Carisk Imaging receive complimentary access to our electronic bill processing platform, Carisk Intelligent Clearinghouse (CiC). Providers who implement CiC can electronically submit eligible diagnostic bills and supporting documentation at no charge for Carisk contracted carriers. Please contact a Carisk sales professional at (973) 795-1641 prompt #2 for more information.

If electing to participate with CiC, providers will obtain a United States Postal Service (USPS) tracking number for any and all claims submitted through the electronic billing system. This unique USPS number can be applied as legal documentation during arbitration and appeals.

Clean Claims

In order to process your claims efficiently, we request claims submissions be as complete and thorough as possible. A clean claim is a claim that can be processed without obtaining additional information from the provider of service or from a third party. A clean claim includes all the following information:

- Medical Report
- DOL (date of loss)
- DOS (date of service)
- Patient Demographics (full name, date of birth, address, phone, gender)
- Carrier & Carrier Billing Address
- Carrier Case Number
- Service Location (name, TIN, and address)
 - Service locations must be fully credentialed with Carisk Imaging
- · Referring Provider (name and NPI)
- Rendering Provider (name and NPI)
 - Rendering providers must be fully credentialed with Carisk Imaging
- Valid Diagnosis Code(s)
- Valid CPT Code(s) (including units and submitted charges)
- Specify Employment Injury (box 10)
- Patients account number (box 26)
- Workers' Compensation Board Number (if applicable in the state of service)

Please Note:

- Only radiology and neuro diagnostic CPT codes will be considered for processing.

 Non-diagnostic CPT codes such as evaluation and management codes will not be considered for processing
- All services must be billed on a global basis. CPT codes which are not global (i.e. modifier 26, etc.) will not be processed.





Please contact us for more information or with any additional questions.

Address 180 Park Ave Plaza Level, Suite LL103 Florham Park, NJ 07932

Phone (973) 451-9415 Billing: Prompt #4 Provider Relations: Prompt #6 Scheduling: Prompt #2

Email Provider Relations @ Carisk Partners.com