



# **Radiation Therapy** Precertification Program Provider Orientation

September - October 2016

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## **Company highlights**

# 3,000<sup>+</sup> employees including 1,000 clinicians

#### Headquartered in Bluffton, S.C. Offices across the U.S. including:

- Lexington, MA
- Colorado Springs, CO Plainville, CT
- Franklin, TN
- Greenwich, CT

- Melbourne, FL
- Sacramento, CA •

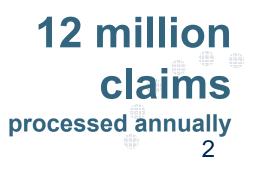
# SHARING **A VISION** AT THE CORE OF CHANGE.





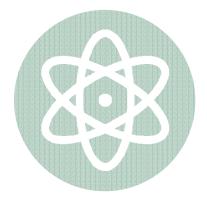






#### **Integrated solutions**





Radiation therapy solutions

covered services

#### **Utilization management**

- •External beam radiation therapy
- Brachytherapy
- •Intensity modulated radiation therapy
- •Image-guided radiation therapy
- Stereotactic radiosurgery
- Proton therapy
- •Hyperthermia
- Radiopharmaceuticals

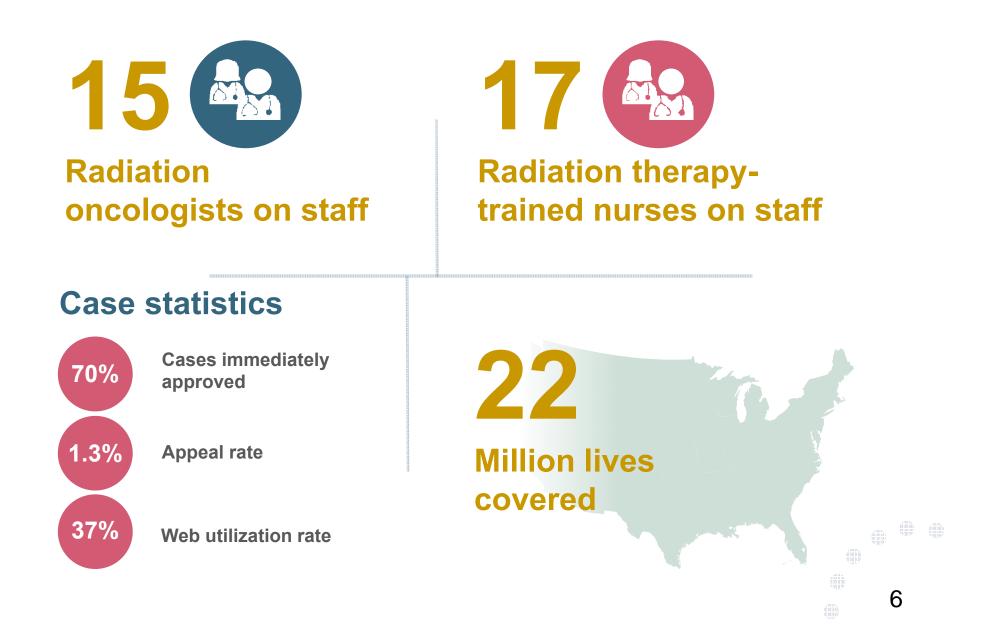
#### **Claims management**

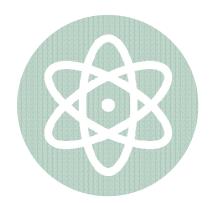
• Payment integrity through claims studio

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# **Our Clinical Approach**

#### **Radiation therapy by the numbers**





#### **Radiation therapy solution**

#### experience

- 7 years of experience since 2009
- 20 regional and national clients
- 22.7 million total membership
  - 15.7 million commercial membership
  - 3.7 million Medicare membership
  - 3.3 million Medicaid membership
- 200+ average cases built per day



Quality Improvement Organizations Sharing Knowledge. Improving Health Care. CENTERS FOR MEDICARE & MEDICARD SERVICES



#### **Evidence-based guidelines**

#### The foundation of our radiation therapy solution:



#### Aligned with national societies

- American Society for Therapeutic Radiology and Oncology
- American College of Radiology
- National Comprehensive Cancer Network
- Medicare Guidelines

#### Advisory board members

- Dr. Anthony Berson eviCore healthcare
- Memorial Sloan Kettering, N.Y.
- Stanford University Medical Center, CA
- Beth Israel Deaconess Medical Center; Harvard, MA
- Detroit Medical Center, Sinai Grace Hospital, MI



# **Service model**

#### **Client service delivery team**

The client service delivery team is responsible for high-level service delivery to our health plan clients as well as ordering and rendering providers nationwide



#### Why our service delivery model works

One centralized intake point allows for timely identification, tracking, trending and reporting of all issues. It also enables eviCore to quickly identify and respond to systemic issues affecting multiple providers.

## Complex issues are escalated to resources who are the

subject matter experts and can quickly coordinate with matrix partners to address issues at a root-cause level.

# Routine issues are handled by a team of representatives who

are cross-trained to respond to a variety of issues. There is no reliance on a single individual to respond to your needs.



# Radiation Therapy Precertification Program for Blue Cross

Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.

#### **Program overview**

eviCore will begin accepting requests on October 18, 2016, for dates of service November 1, 2016, and beyond

# **Prior authorization applies to services that are:**

- Outpatient
- Elective/non-emergent

Prior authorization does not apply to services that are performed in:

- Emergency room
- Inpatient
- 23-hour observation

It's the responsibility of the ordering provider to request prior authorization approval for services.



#### **Precertification required:**

#### **Clinical modalities**

- Complex, 3D Conformal
- IMRT
- Brachytherapy
- SRS/SBRT
- IORT
- Protons
- Neutrons
- Hyperthermia
- Radiopharmaceuticals

#### **Non-clinical modalities**

- SIM
- Planning
- Devices
- Imaging
- Physics healthoate
- Management

To find a list of CPT codes that require precertification through eviCore, please visit:

https://www.evicore.com/healthplan/BCBSM

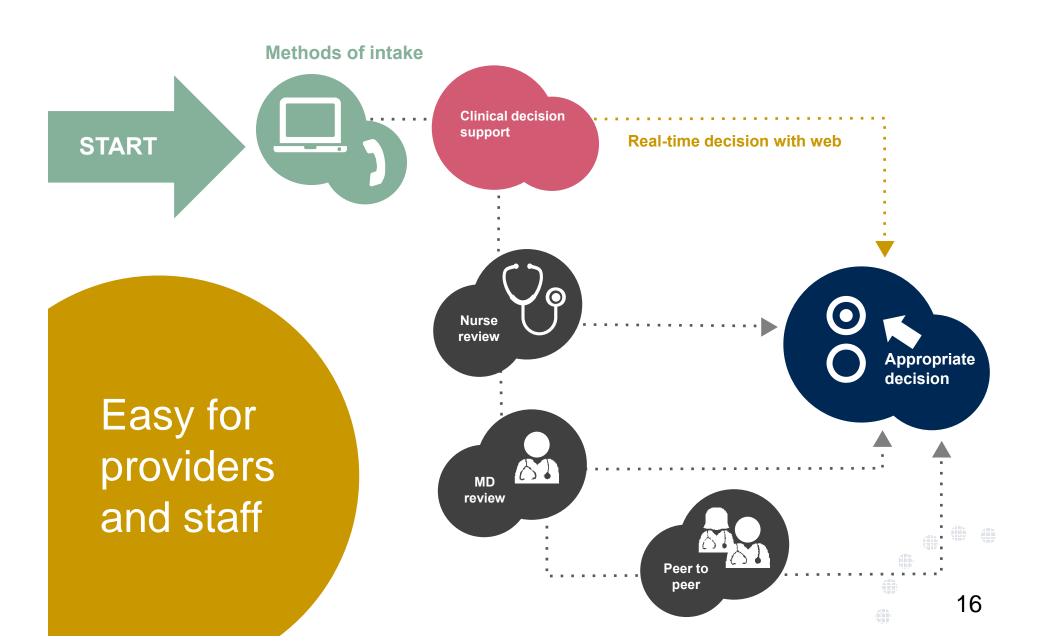
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# Applicable membership

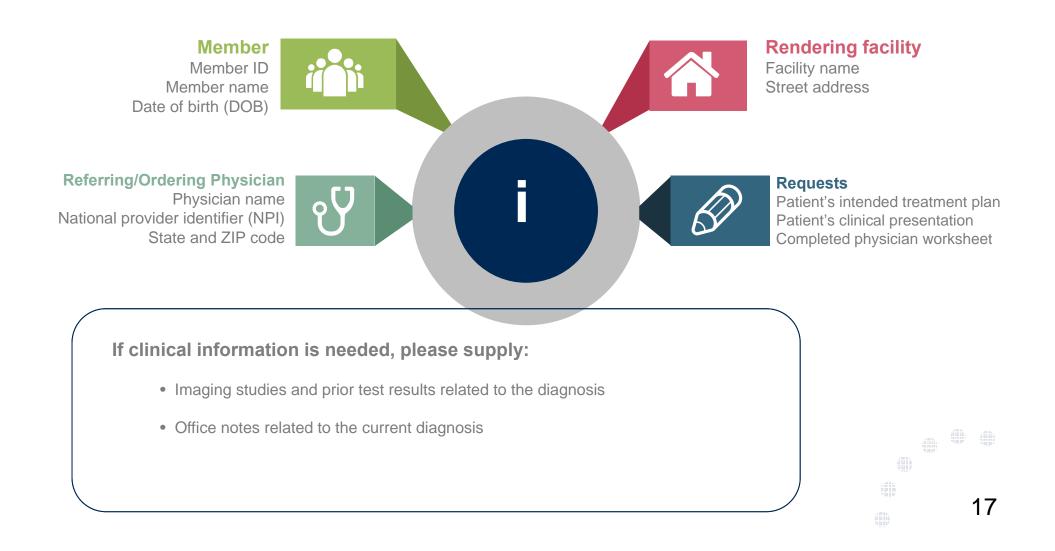
<u>Authorization is required</u> for Blue Cross Blue Shield of Michigan members enrolled in the following program:

• Medicare Advantage PPO

#### **Clinical review process – Easy for providers and staff**



#### **Needed information**



# Holistic treatment plan review

eviCore healthcare relies on information about the patient's unique presentation and physician's intended treatment plan to authorize all services from the initial simulation through the delivery of the last fraction of radiation.

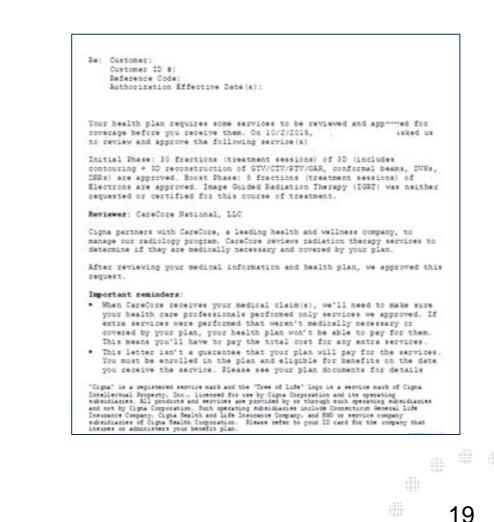
- Providers specify a diagnosis rather than request individual CPT codes
- Diagnosis and treatment plan compared to the evidence-based guidelines developed by our Medical Advisory Board
- If request is authorized/covered or partially authorized/covered, then the treatment technique and number of fractions will be provided
- For questions about specific CPT codes that are included with each episode of care, please reference the eviCore Radiation Therapy Coding Guidelines located online: eviCore Radiation Therapy Coding Guidelines, Effective 1-1-16, Revised 7-15-16
- Correct coding guidelines are based on ASTRO/ACR Radiation Therapy coding resources.



# Prior authorization outcomes

#### **Approved requests:**

- Processed within 14 business days after receipt of all necessary information.
- Decision is faxed to the ordering provider and the requested facility once medical necessity is met.
- Notification is sent to the member.
- Can be printed on demand from the eviCore web portal.
- Authorizations are typically good for at least 45 days from the treatment start date.



#### **Prior authorization outcomes**

# Approved requests:

- All requests are processed within **14 calendar days** after receipt of all necessary clinical information.
- Authorizations are typically good for 45 calendar days from the date of determination.



- Faxed to ordering provider
- Mailed to the member
- Information can be printed on demand from the eviCore healthcare web portal



#### **Prior Authorization outcomes**

### Denied requests:

- Communication of denial determination
- Communication of the rationale for the denial
- How to request a peer review

## Delivery:

- Faxed to the ordering provider and rendering facility
- Mailed to the member

### Appeals:

 eviCore healthcare is not delegated for appeals.
 Blue Cross will be delegated for first level member and provider appeals.



#### **Prior authorization outcomes – Medicare and Medicare Advantage**

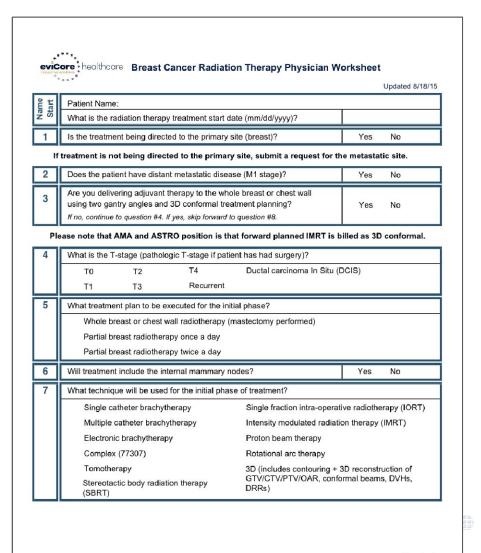


- If your case requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians prior to a decision being rendered.
- In certain instances, additional information provided during the predecision consultation is sufficient to satisfy the medical necessity criteria for approval.



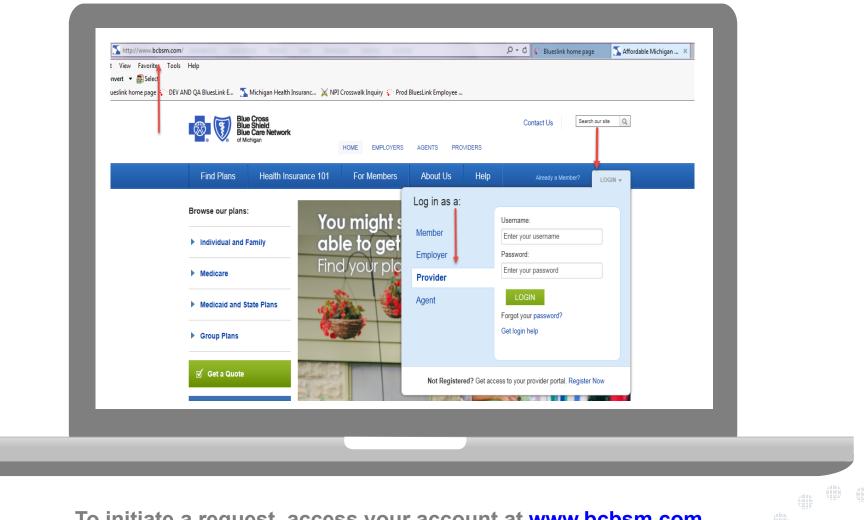
#### **Physician worksheet**

- The physician worksheet is best completed by the physician during the initial consultation with the patient.
- Inaccurate information causes authorized services to differ from those that are actually delivered and can lead to adverse determinations.
- You can access the physician worksheets online: <u>https://www.evicore.com/resources/pages/</u> providers.aspx?solution=Radiation%20The rapy#ReferenceGuidelines



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eviCore healthcare | www.eviCore.com | 400 Buckwalter Place Blvd • Bluffton, SC • 29910 | 800.918.8924

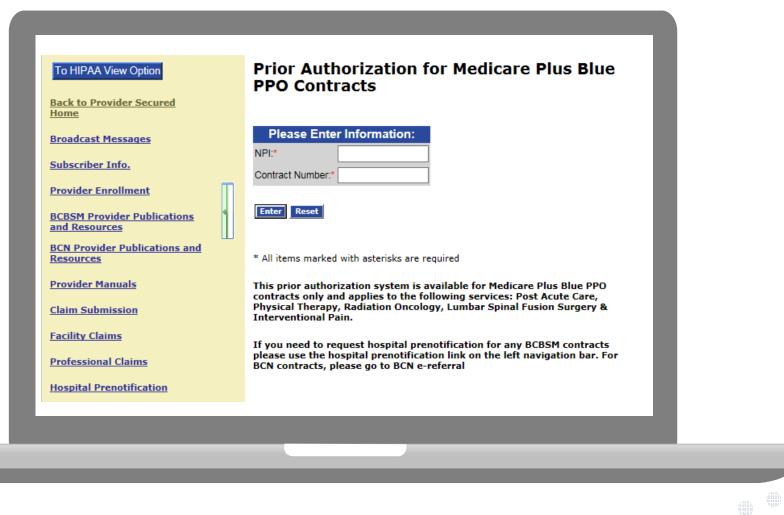


To initiate a request, access your account at <u>www.bcbsm.com</u>.

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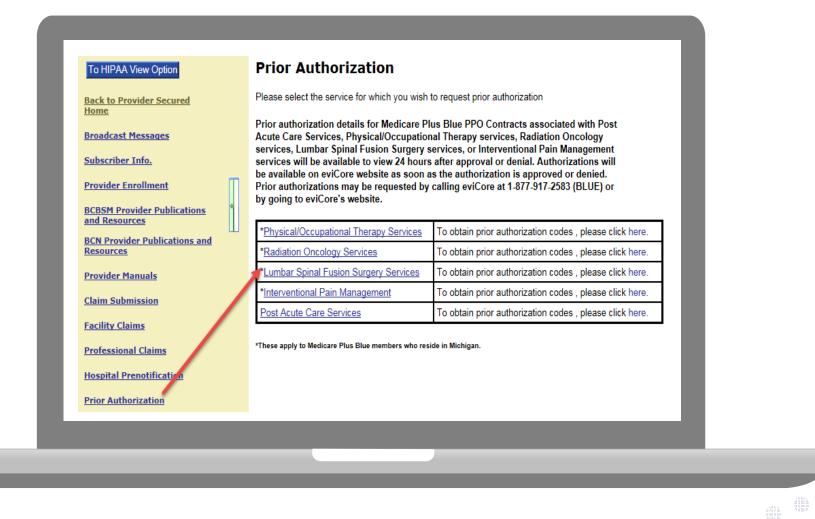


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Enter the NPI and Contract Number.



Select the service for which you wish to request prior authorization. For this program, select Radiation Oncology Services.

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To HIPAA View Option Back to Provider Secured Home Broadcast Messages Subscriber Info. Provider Enrollment	Prior Authorization Please select the service for which you wish to request prior authorization Prior authorization details for Medicare Plus Blue PPO Contracts associated with Post Acute Care Services, Physical/Occupational Therapy services, Radiation Oncology services, Lumbar Spinal Fusion Surgery services, or Interventional Pain Management services will be available to view 24 hours after approval or denial. Authorizations will be available on eviCore website as soon as the authorization is approved or denied. Prior authorizations may be requested by calling eviCore at 1.877-917-2583 (BLUE) or
BCBSM Provider Publications and Resources	by going to eviCore's website.  *Physical/Occupational Therapy Services To obtain prior authorization codes , please click here.
BCN Provider Publications and Resources	*Radiation Oncology Services To obtain prior authorization codes , please click here.
Provider Manuals	*Lumbar Spinal Fusion Surgery Services To obtain prior authorization codes , please click here.
Claim Submission	*Interventional Pain Management To obtain prior authorization codes , please click here.
	Post Acute Care Services To obtain prior authorization codes , please click here.
Facility Claims Professional Claims	*These apply to Medicare Plus Blue members who reside in Michigan.
Hospital Prenotification	Message from webpage
Prior Authorization	
BCBSM Contact Us.	You are leaving BCBSM.com and linking to the eviCore site for prior-authorization. This link is being made available so that you will
BCN Contact Us.	have oportunity to obtain information from eviCore. BCBSM.com is providing this link as a convinience and is not responsible for the
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Documentation	
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Logout	
	rvice, click OK to be re-directed to the eviCore

### eviCore web portal

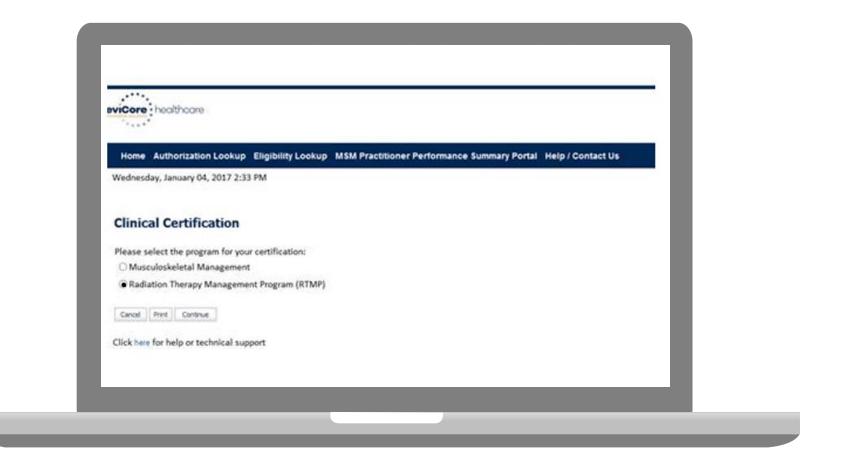
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Home Au	horization Lookup Eli	gibility Lookup	ISM Practitioner Performance Sum	nmary Portal He	lp / Contact Us		
Wednesday, J	anuary 04, 2017 9:01 AM	1					
		v	elcome to the CareCore National Web	b Portal. You are	ogged in as <b>SSO_BC</b>	BSMI_SomeUser.	
		Request	clinical certification/procedure >>				
		Request	clinical certification/procedure for Aetna Mus	sculoskeletal Manage	ment >>		
		Look up a	existing authorization >>				
		Charle m	nber eligibility >>				



Once redirected to the eviCore portal, you will land on the home page. Click *Request a clinical certification/procedure*.

3

### Select program





Select the Radiation Therapy Management Program (RTMP) for your certification.

### Select a provider

Home Authorization Lookup Wednesday, January 04, 2017 2:33	ligibility Lookup MSM Practitioner Performance Summary P M	Portal Help / Contact Us
10% Complete	Clinical Certification Identify a referring provider by name, location, and insurance Selected Physician: Provider SELECT Carcel Back Print Contrue	e carrier to proceed.



Select the practitioner or group for whom you want to build a case.

### **Contact information**

Home Authorization Lookup Wednesday, January 04, 2017 2:3	Eligibility Lookup MSM Practitioner Performance Summary Portal Help / Contact Us
	Clinical Certification
30% Complete Provider and NPI	Provider's Name [7]
	Who to Contact
	Fax [7]
	Phone [7]
	Ext. [7] Cell Phone
	Email someone@evicore.com
	someone@excore.com
10	Cancel Back Print Continue
L	Cancel Back Print Continue

Enter the Provider's Name and appropriate information for the point of contact person.

### **Member information**

Wednesday, January 04, 2017 2:33	Eligibility Lookup MSM Practitioner Performance Summary Portal Help / Contact Us
40% Complete Provider and NPI	Clinical Certification Patient ID: Date Of Birth: MMM/DD/YYYY Patient Last Name Only: ELIGIBILITY LOOKUP Cancel Back Print Click here for help or technical support

Enter the member information, including the Patient ID, Date Of Birth and Patient Last
Name Only. Click ELIGIBILITY LOOKUP.

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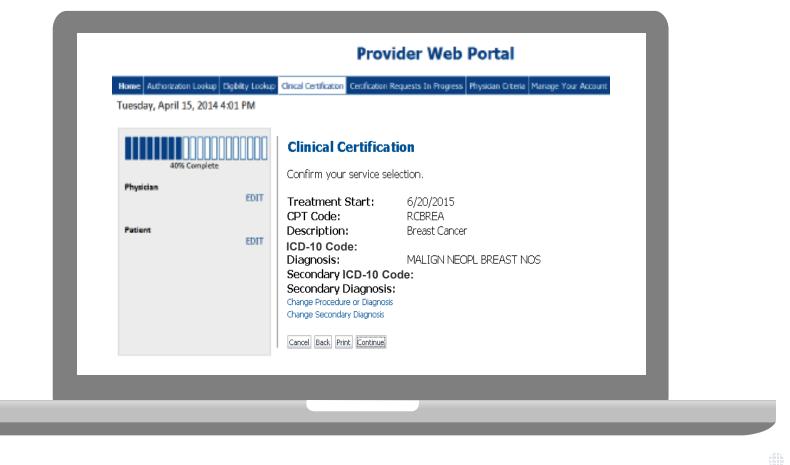
## **Clinical details**

This procedure will be performed on 7/1/2016. CHANGE		
Radiation Therapy Procedures		
Select a Procedure by CPT Code[?] or Description[?]           RCBREA         Breast Cancer		
Diagnosis		
Diagnosis Code: <b>C50.412</b> Description: <b>Malignant neoplasm of upper-outer quadrant of left female breast</b> Change Diagnosis		
Select a secondary Diagnosis Code (Lookup by Code or Description) Secondary diagnosis is optional for Radiation Therapy		
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Secondary diagnosis is optional for Radiation Therapy	1	

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## **Verify service selection**



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## **Site selection**

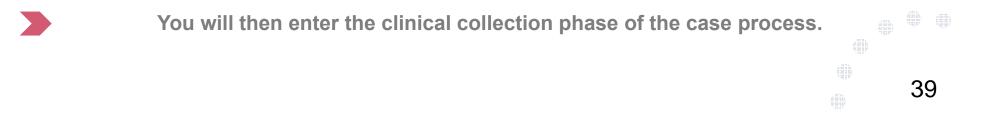
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- Verify all information entered and make any needed changes before moving into the clinical collection phase of the prior authorization process.
- You will not have the opportunity to make changes after that point.



## **Clinical collection**

Home Authorization Lookup Eligibility Lookup	Clinical Certification Certification Requests In P	rogress MSM Practitioner Performar	
'hursday, June 18, 2015 4:38 PM			
<b>Clinical Certification</b>			
) Is the treatment being directed to th	e primary site (breast)?		
⊖Yes ⊖No			
SUBMIT			
Cancel Print			



## **Medical review**

Clinical Certification Is there any additional information specific to the member's condition you would like to provide?	
C I would like to upload a document	
<ul> <li>I would like to enter additional notes in the space provided</li> </ul>	
CI would like to upload a document and enter additional notes	
O I have no additional information to provide at this time	
Enter text in the space provided below or both.	
OAdditional Information - Notes:	
<u>×</u>	
/ Vou may upload a document from your computer (PDF or Word less than 5MB)	
Additional Upload Document:	
Browse	
SUBMIT	
Finish Later	
L Finish Later	

If additional information is required, you will have the option to either upload documentation, enter information into the text field or contact us via phone.

## Approval

Provider Name: Provider Address:		Contact: Phone Number: Fax Number:	
Patient Name: Insurance Carrier:		Patient Id:	
Site Name:		Site ID:	
Site Address:			
Diagnosis/ICD-10		Description:	MALIGN NEOPL
Code: Secondary		Description:	BREAST NOS
Diagnosis: Date of Service: CPT Code: Authorization	6/20/2015 RCBREA	Description:	Breast Cancer
Number: Review Date:	6/18/2015 4:38:37 PM		
Expiration Date: Status:	10/16/2015 Your case has been	Approved.	
REQUESTED Phase 1: Electrons: "	Technique: Electrons;	8 Fractions (trea	atment sessions)
	Technique: Electrons; Special radiation dosir 00)		
DENIED			
DENIAL RATIONALE			

Once the clinical pathway questions are completed and the answers have met the clinical criteria, an approval will be issued.

Print the screen and store in the patient's file.

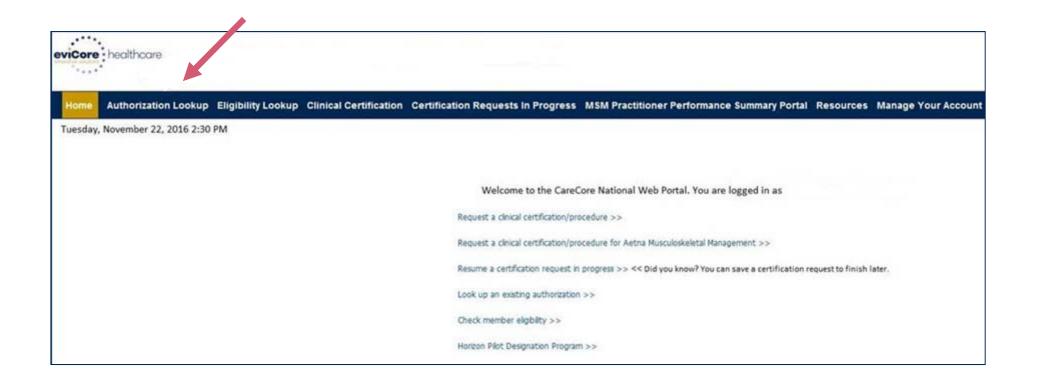
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## **Building additional cases**

		Certification Requests in Progra	IS MSM Practitioner Performance Summary Portal Resources Manage Your Ac	count	
Thursday, March 05, 2015 10:15 A	м				
<b>Clinical Certification</b>					
Thank you for submitting a reque	at for clinical certification	n. Would you like to:			
Return to the main menu					
Start a new request					
You can also start a new request	using some of the same	information.			
Start a new request using the	same:				
C Program					
C Provider (					
C Program and Provider					
@ Program and Health Plan					
is this request also for the sam					
Provider	Member -	Procedure	🗆 Same Program and Health Plan only (new provider, membe	r, and procedure)	

Once a case has been submitted for clinical certification, you can return to the Main Menu or start a new request. You're even able to indicate if any of the previous case information will be needed for the new request.

# **Authorization look-up**





When logged in to your web portal account, select Authorization Lookup from the menu options at the top.

## **Authorization look-up**

Home Authorization Lookup	Eligibility Lookup	<b>Clinical Certification</b>	Certification Requests In Progress	MSM Practitioner Performance S	ummary Portal Resources	Manage Your Accou
Tuesday, November 22, 2016 2:30	PM					
Authorization Looku	þ					
New Security Features Implem	ented					
Search by Member Informa	tion			Saarah hy Author	ization Number/ NPI	
REQUIRED FIELDS				REQUIRED FIELDS	Ization Number/ NFI	
Healthplan:			$\checkmark$			Г
Provider NPI:				Provider NPI:	×	
				Auth/Case Number:		
Patient ID:				Search		
Patient Date of Birth:	MM/DD/Y	~~~				
OPTIONAL FIELDS						
Case Number:						
or						
Authorization Number:		×				

Select Search by Authorization Number/NPI. Enter the provider's NPI and authorization or case number. Select Search.

You can also search for an authorization by Member Information. Enter the health plan, 4 provider NPI, patient's ID number and patient's date of birth.

# **Authorization status**

Tuesday, November 2	2, 2016 2:31 PM	
Authorization		_
Authorization Numbe		
Case Number: Status: Approval Date: Service Code:	107xxxxxxx Approved 11/22/2016 8:45:41 AM	
Service Description: Site Name: Expiration Date: Date Last Updated: Correspondence:	1/6/2017 11/22/2016 8:50:36 AM VIEW CORRESPONDENCE	
Print Done Search	Igain	
horization will the	n be accessible to review.	To print authorization

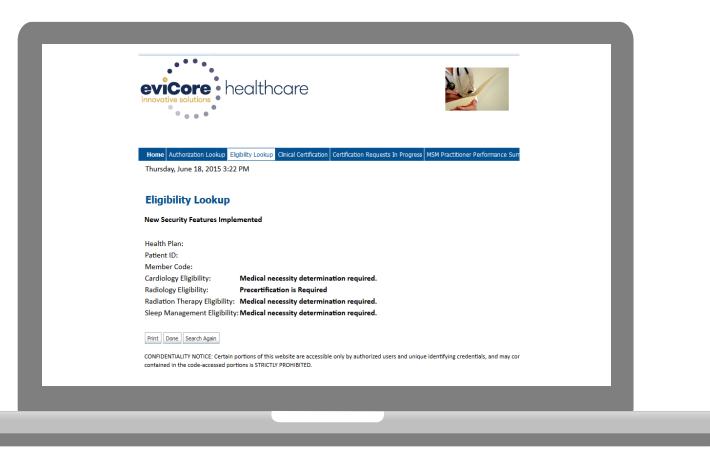
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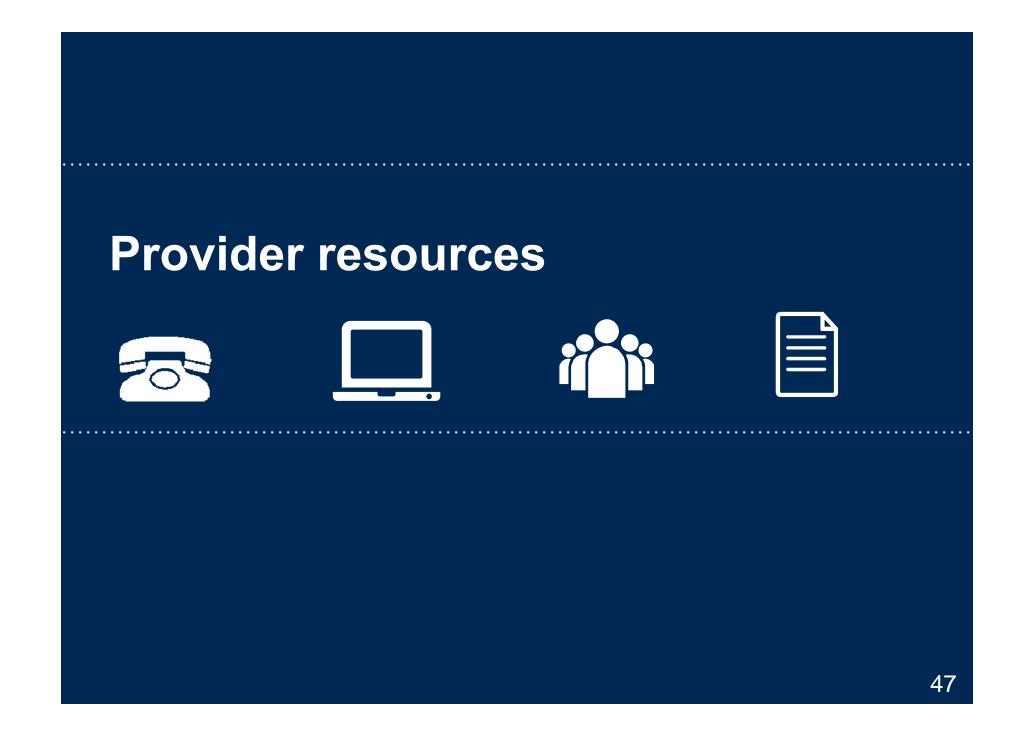
## **Eligibility look-up**

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# **Radiation Therapy Resources**

Clinical Guidelines, Physician Worksheets, and other resources can be accessed online:

- <u>https://www.evicore.com/resources/pages/providers.aspx?solution=Radiation%20Therapy#</u> <u>ReferenceGuidelines</u>
  - Click the "View More Physician Worksheets" button to access specific worksheets.

	APPROACH	SOLUTIONS 🗸	RESOURCES 🛩	MEDIA	CAREERS		
	Overview Clin	nical Guidelines Online F	orms & Resources   Soluti	ions   Video Tutorial			
		Clinical	Guidelines				
Please selec	t clinical guidelines by firs	t selecting the appropriate	solution. Adobe PDF Read	er is required to view	guideline docu	ments.	
Benefits, cov		lity issues pertaining to eac e view more option to acces			pre's guidelines.	Select	
			1 1 5				
		Radiation Therapy	· · ·				
		y Clinical Guidelines - Effec					
		y Coding Guidelines (Revis					
e	viCore Radiation Therapy	y Clinical Documentation R	Requirements (Revised 7.15	5.16) - Effective 1/1/20	016		
			10 11 11 11	uidelines			
	+ Vie	ew more for health plan spe	ecific radiation therapy g				

## **Provider resources: Pre-certification call center**





Services



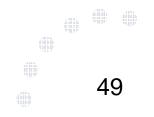


#### 7 a.m. to 8 p.m. Eastern time 1-877-917-BLUE (2583)

- Obtain pre-certification or check the status of an existing case
- Discuss questions regarding authorizations and case decisions

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• Change facility or CPT code on an existing case



## **Provider resources: Web-based services**









#### www.evicore.com

To speak with a web specialist, call **1-800-646-0418 (Option #2) or** email portal.support@evicore.com

• Request authorizations and check case status online – 24/7

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- Auto save no data lost
- Upload electronic PDF/word clinical documents



## **Provider resources: Provider relations department**







Do	cume	ents

### providerrelations@evicore.com

To speak with a Provider Relations representative, call 1-800-646-0418 (Option #3)

• Eligibility issues (member, rendering facility or ordering physician)

- Issues experienced during case creation
- Request for an authorization to be resent to the health plan
- Request for education/training on program processes

## **Provider resources: Implementation document**



Pre-Certification Call Center







If you have provider enrollment questions, contact Blue Cross at 1-877-917-2583.

#### **Blue Cross implementation site:**

#### https://www.evicore.com/healthplan/BCBSM

- CPT code list of the procedures that require prior authorization
- Blue Cross quick reference guide
- Blue Cross FAQ document
- eviCore clinical guidelines

#### Coding guidelines and program criteria:

https://www.evicore.com/resources/pages/providers.aspx?solution=Radia tion%20Therapy#ReferenceGuidelines

To obtain a copy of this presentation, please contact the Client Services department at providerrelations@evicore.com.

# **Questions?**

# Thank you!

