



Radiation Oncologists and Cancer Treatment Facilities Quick Reference Guide

Effective Jan. 1, 2016

NIA Magellan¹ currently provides outpatient radiation oncology benefit management services for primary cancers of the Breast, Prostate, Lung, Colon and Rectal and all conditions for Proton Beam and Stereotactic Radiation Therapy for ConnectiCare's Commercial/Exchange and Medicare VIP members.

Effective with dates of service beginning **Jan. 1, 2016, this Radiation Oncology Solution program** will be modified to include:

- **All cancers** as well as **all conditions** for Proton Beam and Stereotactic Radiation Therapy for ConnectiCare's Commercial/Exchange and Medicare VIP membership.
- Preauthorization is required for the treatment modality and number of treatments/fractions for the course of treatments.
- Treatment planning and management procedures such as simulations, guidance, dosimetry and isodose plans will no longer require authorization.

The Following Radiation Therapy Treatment Plans Will Require Preauthorization Based on Medical Necessity Review:

- Brachytherapy
- Two-dimensional Conventional Radiation Therapy (2D)
- Three-dimensional Conformal Radiation Therapy (3D-CRT)
- Intensity Modulated Radiation Therapy (IMRT)
- Image Guided Radiation Therapy (IGRT)
- Stereotactic Radiosurgery (SRS)
- Stereotactic Body Radiation Therapy (SBRT)
- Proton Beam Radiation Therapy (PBT)
- Intra-Operative Radiation Therapy (IORT)
- Neutron Beam Therapy

¹ NIA Magellan refers to National Imaging Associates, Inc.

The following services will **not** be impacted by this transition:

- *Inpatient* radiation therapy services

Important Things to Know Regarding Radiation Therapy Treatment Notification Transition of Care Guidelines

- All radiation therapy treatments require preauthorization.
- The Radiation Oncologist determining the treatment plan and providing the radiation therapy is responsible for obtaining preauthorization. The Radiation Oncologist will be asked to provide a treatment plan related to the radiation therapy treatment **proposed** for each patient.
- For patients whose radiation therapy started for cancer conditions outside of breast, lung, prostate, colon and rectal before Jan. 1, 2016, and is expected to continue beyond this date, a **Radiation Therapy Treatment Notification Form** will need to be completed to ensure accurate claims payment for claims submitted after Jan. 1, 2016.
- If a patient began *inpatient* radiation therapy and continues *subsequent outpatient* treatment **or** if a patient began radiation therapy prior to coverage by ConnectiCare, *outpatient* radiation therapy will not require preauthorization for medical necessity review.
- Providers should submit a completed Radiation Therapy Treatment Notification Form for each Commercial/Exchange patient to ConnectiCare by fax at: 1-800-923-2882 and for Medicare VIP members by fax at: 1-866-706-6929.
- ConnectiCare will confirm receipt of notification within 48 hours. An administrative preauthorization for the course of treatment will be issued.

Medical Necessity Review Request Process

It is the responsibility of the Radiation Oncologist ordering the radiation therapy treatment to contact NIA Magellan for medical necessity determination. You will receive notification within two business days of either approval or of the need for additional information required to complete a medical necessity review.

To expedite the process, the Radiation Oncologist should have the following information available before logging in to NIA Magellan's website or calling NIA Magellan to request preauthorization: (*Note: NIA Magellan recommends using www.RadMD.com for the most efficient processing of requests*).

- Name and office phone number of Radiation Oncologist planning and delivering radiation therapy
- Patient name and ID number

- Primary disease site being treated
- Stage (T,N,M stage)
- Treatment intent
- Requested radiation therapy modality (initial and/or boost stages)
 - Total dose
 - Fractions
- Name of treatment facility where procedures will be performed
- Anticipated treatment start date

For additional details, please refer to NIA Magellan’s clinical guidelines and disease-specific treatment plan checklists, available at www.RadMD.com. Since each medical necessity review request is performed specifically to the disease sites managed by the program, the information needed to complete the request will be specific to the diagnosis.

If additional information is requested, it can be faxed to NIA Magellan’s dedicated clinical fax line at 1-800-784-6864. After all required clinical information is received to complete the medical necessity review, a determination will be provided within two business days.

It is the responsibility of the Radiation Oncologist and cancer treatment facility to ensure that radiation therapy treatment plan procedures are authorized before services are rendered. Reimbursement is based on approved treatment plans and techniques. Please refer to the document titled, “Outpatient Radiation Therapy Billable CPT® Codes Claim Resolution Matrix,” for a list of CPT-4 codes that NIA Magellan authorizes for ConnectiCare. This matrix can be found on www.RadMD.com. Payment will be denied for procedures performed without a necessary authorization.

Website Access

- The Radiation Oncologist can request medical necessity review for radiation therapy treatment at www.RadMD.com, 7 days a week/24 hours, except during maintenance.
- A radiation therapy treatment facility or Radiation Oncologist can access information on approved radiation therapy treatment plans at www.RadMD.com. The radiation therapy facility may search based on the patient’s ID number, patient’s name or, if known, by the preauthorization number.
- Radiation Oncologists and radiation therapy treatment facilities can obtain a unique username and password for their office or facility. To begin, simply go to www.RadMD.com, click on the New User button and complete the application form.

- If the Radiation Oncologist requests a medical necessity review through NIA Magellan’s website and the request is pended, he/she will receive a tracking number. NIA Magellan will contact the Radiation Oncologist to either complete the process or notify him/her of the medical necessity determination.
- The NIA Magellan website cannot be used for expedited preauthorization requests. Those requests must be processed through NIA Magellan’s toll-free phone number, 1-877-607-2363.

Checking Medical Necessity Review Requests

- The Radiation Oncologist and the radiation therapy treatment facility can check on the status of a patient’s preauthorization quickly and easily by going to the NIA Magellan’s web site, www.RadMD.com. After sign-in, visit the **My Treatment Requests** tab to view all outstanding authorizations.
- Please check the member’s identification card carefully to determine whether a medical necessity review is required.

Telephone Access

The Radiation Oncologist may request medical necessity review by calling NIA Magellan at 1-877-607-2363, Monday through Friday, from 8 a.m. to 8 p.m. EST.

- The NIA Magellan Call Center can accept multiple requests during one phone call.

Quick Contacts	
▪ Website:	www.RadMD.com
▪ ConnectiCare website:	www.ConnectiCare.com
▪ NIA Magellan toll-free preauthorization phone number:	1-877-607-2363
▪ ConnectiCare Provider Services:	
○	1-800-828-3407 (commercial plans)
○	1-877-224-8230 (Medicare plans)

Modifications to an Existing Treatment Plan

Please call NIA Magellan to speak with a representative who will process your request for modification. Your request will be reviewed for medical necessity and you will receive notification from NIA Magellan within one business day once all required information is received to complete your request.

Claim Submissions

Continue your current practice of submitting claims electronically.

New claims for ConnectiCare should be submitted to:

ConnectiCare
P.O. Box 546
Farmington, CT 06034-0546

NIA Magellan Evidence-based Clinical Guidelines

Radiation oncology clinical guidelines can be found on NIA Magellan's website, www.RadMD.com. These clinical guidelines for the use of radiation therapy treatment have been developed from practice experience, literature review, specialty criteria sets and empirical data.

Other Important Information

- A preauthorization number is valid for 180 days from date of request. NIA Magellan will use the date of request as the starting point for the 180-day period in which the treatment must be completed.
- The NIA Magellan authorization number consists of 8 or 9 alpha-numeric characters.
- For physicians and cancer treatment facilities, only one authorization is needed for both the technical and professional components of each procedure. The Radiation Oncologist will receive an NIA Magellan tracking number (not the same as an authorization number) for tracking the request while it is in the process of medical necessity review. The tracking number can be used to either track the status of the request on www.RadMD.com, or via the NIA Magellan Interactive Voice Response telephone system.
- For complaints/appeals, please follow the instructions on the denial letter or explanation of payments.
- ConnectiCare will retain ultimate responsibility and control over claims adjudication and all medical policies and procedures.

Disclaimer: A preauthorization number is not a guarantee of payment.