



## Highmark Blue Cross Blue Shield Of Western New York<sup>1</sup> Radiation Oncologists and Cancer Treatment Facilities Quick Reference Guide Revised Program : November 1, 2019

Highmark Blue Cross Blue Shield of Western New York selected Magellan Healthcare<sup>2</sup> to provide radiation oncology benefit management services through its Radiation Oncology Solution program, for Highmark Blue Cross Blue Shield of Western New York membership, the Radiology Oncology Solutions Program will include all cancers and conditions.

The purpose of this program is to ensure that members receive the most appropriate radiation therapy treatment in accordance with their medical policy, evidence-based clinical guidelines and standards of care.

**The following radiation therapy treatment plans require prior-authorization based on medical necessity review:**

- Low-dose-rate (LDR) Brachytherapy
- High-dose-rate (HDR) Brachytherapy
- Two-dimensional Conventional Radiation Therapy (2D)
- Three-dimensional Conformal Radiation Therapy (3D-CRT)
- Intensity Modulated Radiation Therapy (IMRT)
- Stereotactic Radiosurgery (SRS)
- Stereotactic Body Radiation Therapy (SBRT)
- Proton Beam Radiation Therapy (PBT)
- Intra-Operative Radiation Therapy (IORT)
- Neutron Beam Therapy
- Hyperthermia

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

- Inpatient radiation therapy services

### **Important Notes Regarding Radiation Therapy Treatment Notification Transition of Care Guidelines**

- The Radiation Oncologist determining the treatment plan and providing the radiation therapy is responsible for obtaining prior-authorization. The Radiation Oncologist will be asked to provide a treatment plan related to the radiation therapy treatment planned for each patient.
- Fax a completed form for **each** patient to Magellan Healthcare at 1-888-656-1321.
- An administrative prior authorization for the course of treatment will be issued.

<sup>1</sup>National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.

## Medical Necessity Review Request Process

It is the responsibility of the Radiation Oncologist ordering the radiation therapy treatment to contact Magellan Healthcare 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 Magellan Healthcare's website or calling Magellan Healthcare to request prior-authorization:

*(Note: Magellan Healthcare recommends using [www.RadMD.com](http://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
- Disease site being treated
- Stage
- Treatment intent
- Requested radiation therapy modality (initial and/or boost stages). E.g.
  - Ports/angles
  - Total dose
  - Fractions
  - Brachytherapy insertions and fractions
- Name of treatment facility where procedures will be performed
- Anticipated treatment start date

For additional details, please refer to Magellan Healthcare's clinical guidelines and disease-specific treatment plan checklists, available at [www.RadMD.com](http://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 Magellan Healthcare's dedicated clinical fax line at 1-888-656-1321. 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, "Highmark Blue Cross Blue Shield of Western New York Utilization Review Matrix", for a list of CPT-4 codes that Magellan Healthcare authorizes for Highmark Blue Cross Blue Shield of Western New York. This matrix can be found on [www.RadMD.com](http://www.RadMD.com). Payment will be denied for procedures performed without a necessary authorization.

**Breast Surgeons:** The radiation oncologist is required to obtain a medical necessity review for **Accelerated Partial Breast Irradiation (APBI)**. The **breast surgeon** also requires a prior authorization and will receive approval for the insertion of the catheters if APBI is approved as medically necessary. The surgeon can request a review for approval at [www.RadMD.com](http://www.RadMD.com) or call Magellan Healthcare’s tollfree number at 1-800-642-7820.

## Website Access

- The Radiation Oncologist can request medical necessity review for radiation therapy treatment at [www.RadMD.com](http://www.RadMD.com). RadMD is available 24/7, except when maintenance is performed once every other week after business hours.
- A radiation therapy treatment facility or Radiation Oncologist can access information on approved radiation therapy treatment plans at [www.RadMD.com](http://www.RadMD.com). The radiation therapy facility may search based on the patient’s ID number, patient’s name or, if known, by the prior-authorization number.
- Radiation Oncologists and radiation therapy treatment facilities can obtain a unique user name and password for their office or facility. To begin, simply go to [www.RadMD.com](http://www.RadMD.com), click on the New User button and complete the application form.
- If the Radiation Oncologist requests a medical necessity review through Magellan Healthcare’s website and the request is pended, he/she will receive a tracking number. Magellan Healthcare will contact the Radiation Oncologist to either complete the process or notify him/her of the medical necessity determination.
- The Magellan Healthcare website cannot be used for expedited prior-authorization requests. Those requests must be processed through Magellan Healthcare’s toll-free phone number, 1-800-642-7820.

### Quick Contacts

- Website: [www.RadMD.com](http://www.RadMD.com)
- Highmark Blue Cross Blue Shield of Western New York website: [www.bcbswny.com](http://www.bcbswny.com)
- Magellan Healthcare toll-free prior authorization phone number: 1-800-642-7820
- Highmark Blue Cross Blue Shield provider service phone number: 1-800-950-0052

## Checking Medical Necessity Review Requests

- The Radiation Oncologist and the radiation therapy treatment facility can check on the status of a patient’s prior-authorization quickly and easily by going to the Magellan Healthcare website, [www.RadMD.com](http://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 Magellan Healthcare at 1-800-642-7820, Monday through Friday from 8 a.m. to 8 p.m. EST.

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

## Modifications to an Existing Treatment Plan

Please call Magellan Healthcare 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 Magellan Healthcare within one business day once all required information is received to complete your request.

### Claim Submissions

Continue your current practice of submitting Highmark Blue Cross Blue Shield of Western New York claims electronically.

If you are unable to bill electronically, paper claims for Highmark Blue Cross Blue Shield of Western New York should be submitted to:

Highmark Blue Cross Blue Shield of Western New York  
P.O. Box 80  
Buffalo, NY 14240-0080

## Magellan Healthcare Evidence-based Clinical Guidelines

Radiation oncology clinical guidelines can be found on Magellan Healthcare's website at [www.RadMD.com](http://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.

- A prior-authorization number is valid for 180 days from date of request. Magellan Healthcare will use the date of request as the starting point for the 180-day period in which the treatment must be completed. If the Radiation Oncologist needs to perform the initial simulation prior to the date of request, the validity period will be dated from the date of the initial simulation.
- The Magellan Healthcare authorization number consists of alpha-numeric characters.
- For physicians and cancer treatment facilities, only one authorization is needed for both the technical and professional components of each procedure.

If a patient began *inpatient* radiation therapy and continues *subsequent outpatient* treatment, *outpatient* radiation therapy will not require prior-authorization for medical necessity review. Providers should fax a completed Inpatient Radiation Therapy Notification Form for each patient to Magellan Healthcare at 1-888-656-1321.

- The Radiation Oncologist will receive a Magellan Healthcare 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](http://www.RadMD.com), or via the Magellan Healthcare Interactive Voice Response telephone system.
- For complaints/appeals, please follow the instructions on the denial letter or explanation of payments.

- Highmark Blue Cross Blue Shield of Western New York will retain ultimate responsibility and control over claims adjudication and all medical policies and procedures.

**Disclaimer:** A prior-authorization number is not a guarantee of payment.

<sup>1</sup> Highmark Blue Cross Blue Shield of Western New York is a trade name of Highmark Western and Northeastern New York Inc., an independent licensee of the Blue Cross Blue Shield Association. The Blue Cross®, Blue Shield®, Cross and Shield Symbols are registered service marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. Magellan Healthcare is a separate company.

<sup>2</sup> National Imaging Associates, Inc., is a subsidiary of Magellan Healthcare, Inc.