# Ambetter of North Carolina Inc. Medical Specialty Solutions

Provider Training Presented by: Priscilla W. Singleton





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National Imaging Associates, Inc. (NIA) Program Agenda



Introduction to NIA\*



Our Program

- Authorization Process
- Other Program Components
- Provider Tools and Contact Information





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Questions and Answers

\*Effective 1/20/2023, National Imaging Associates, Inc. is now a subsidiary of Evolent Health. Evolent Health and its affiliates and subsidiaries collectively referred to as "Evolent." © 2023 Ambetter of North Carolina Inc. All rights reserved



# **NIA Specialty Solutions**

National Footprint / Medicaid Experience



Since 1995 – delivering Medical Specialty Solutions; one of the *goto* care partners in industry.

#### **91 health plans/markets** – partnering with NIA for management of Medical Specialty Solutions.

**33.69M national lives – participating** in an NIA Medical Specialty Solutions Program nationally.

 $\bigtriangledown$ 

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**Diverse populations** – Medicaid, Exchanges, Medicare, Commercial, FEP, Provider Entities.

#### Medicaid/Medicare Expertise/Insights



**54 Medicaid plans/markets** with NIA Medical Specialty Solutions in place.

**18.65M Medicaid lives** – in addition to 2.15M Medicare Advantage lives participating in an NIA Medical Specialty Solutions program nationally.

#### Intensive Clinical Specialization & Breadth

#### Specialized Physician Teams

- 160+ actively practicing, licensed, board-certified physicians
- 28 specialties and sub-specialties

**URAC Accreditation & NCQA Certified** 

# NIA's Prior Authorization Program

 Ambetter of North Carolina Inc. entered a prior authorization program through NIA for the management of outpatient imaging services.

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The Program



NIA's Medical Specialty Solutions for non-emergent outpatient Medical Specialty Solutions services for Ambetter of North Carolina Inc. membership will be managed through Ambetter of North Carolina Inc. contractual relationships.

Network

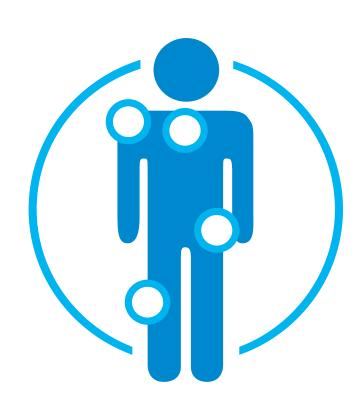
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# **NIA's Prior Authorization Program**

Any services rendered on and after **February 1, 2019** performed in an outpatient setting for non emergent procedures, requires an authorization with NIA.



- CT/CTA
- CCTA
- MRI/MRA
- PET Scan
- Myocardial Perfusion Imaging (MPI)
- Stress Echocardiography
- Echocardiography





Excluded from the Program Procedures Performed in the following Settings:

- Hospital Inpatient
- Observation
- Emergency Room

\*Please see specific educational documents on RadMD for each Medical Specialty Solutions Program Services

# List of CPT Procedure Codes Requiring Prior Authorization



Review Claims/Utilization Review Matrix to determine CPT codes managed by NIA.



CPT Codes and their Allowable Billable Groupings.



Located on <u>RadMD.com</u>.



Defer to Ambetter of North Carolina Inc.'s Policies for Procedures not on Claims/Utilization Review Matrix. Ambetter of North Carolina Utilization Review Matrix 2023

The matrix below contains all of the CPT 4 codes for which National Imaging Associates, Inc. (NIA) manages on behalf of Ambetter of North Carolina. This matrix is designed to assist in the resolution of claims adjudication and claims questions related to those services authorized by NIA. The "Allowable Billed Groupings" is meant to outline that if a given procedure is authorized, that any one of the listed procedure codes could be submitted on a claim representing that service. This assumes that the member is eligible at the time of the service, that appropriate rebundling rules are applied, that the claim includes an appropriate diagnosis code for the CPT code and that the service is performed within the validity period.

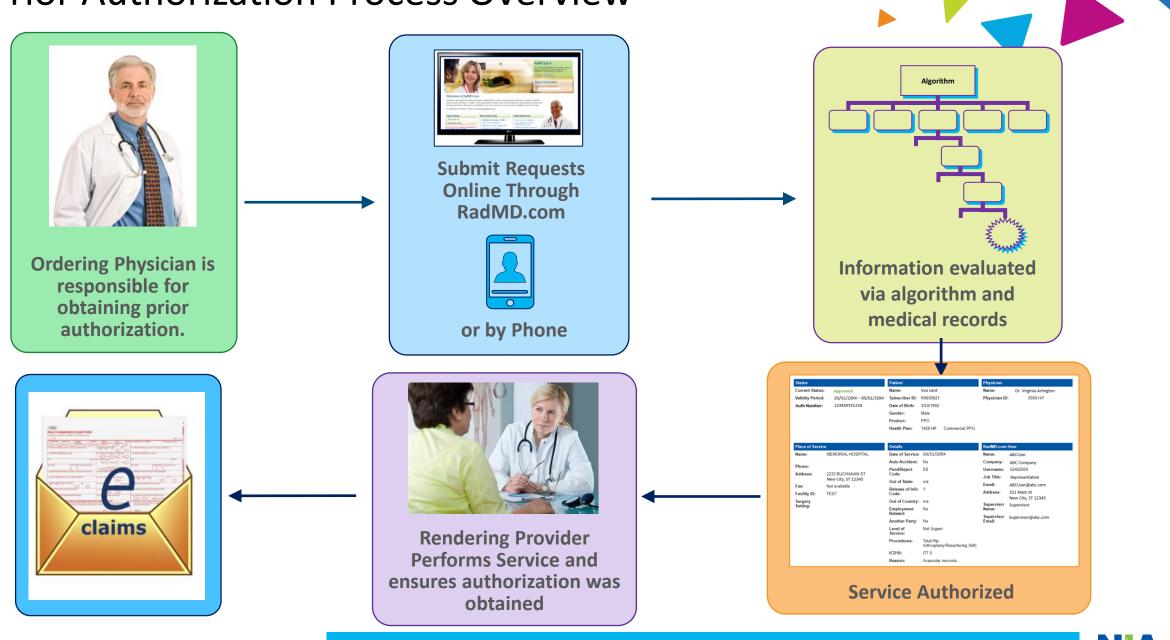
If a family of CPT codes is not listed in this matrix, an exact match is required between the authorized CPT code and the billed CPT code. If the exact match does not occur, the charge should be adjudicated accordingly.

#### \*Please note: Services rendered in an Emergency Room, Observation Room, Surgery Center or Hospital Inpatient setting are not managed by NIA.

Authorized CPT Code	Description	Allowable Billed Groupings
70336	MRI Temporomandibular Joint	70336
70450	CT Head/Brain	70450, 70460, 70470, +0722T
70480	CT Orbit	70480, 70481, 70482, +0722T
70486	CT Maxillofacial/Sinus	70486, 70487, 70488, 76380, +0722T
70490	CT Soft Tissue Neck	70490, 70491, 70492, +0722T
70496	CT Anglography, Head	70496
70498	CT Anglography, Neck	70498
70540	MRI Orbit, Face, and/or Neck	70540, 70542, 70543, +0698T
70551	MRI Internal Auditory Canal	70551, 70552, 70553, 70540,
	-	70542, 70543, +0698T
70544	MRA Head	70544, 70545, 70546
70547	MRA Neck	70547, 70548, 70549
70551	MRI Brain	70551, 70552, 70553, +0698T
70554	Functional MRI Brain	70554, 70555
71250	CT Chest	71250, 71260, 71270, 71271, +0722T
71271	Low Dose CT for Lung Cancer Screening	71271
71275	CT Anglography, Chest (non-coronary)	71275
71550	MRI Chest	71550, 71551, 71552, +0698T
71555	MRA Chest (excluding myocardium)	71555
72125	CT Cervical Spine	72125, 72126, 72127, +0722T
72128	CT Thoracic Spine	72128, 72129, 72130, +0722T
72131	CT Lumbar Spine	72131, 72132, 72133, +0722T
72141	MRI Cervical Spine	72141, 72142, 72156, +0698T

1— Ambetter of North Carolina Utilization Review Matrix 2023

### **Prior Authorization Process Overview**

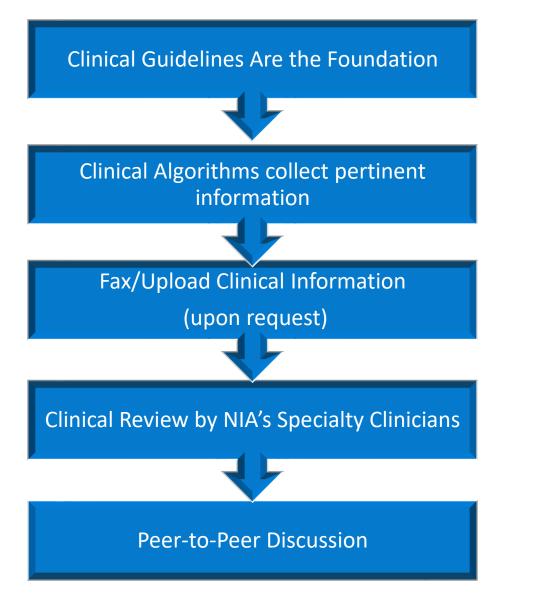


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Recommendation to Rendering Providers: Do not schedule test until authorization is received



# NIA's Clinical Foundation & Review



- Clinical guidelines were developed by practicing specialty physicians, through literature reviews and evidenced-based research. Guidelines are reviewed and mutually approved by the Plan and NIA Medical Officers and clinical experts. Clinical Guidelines are available on <u>RadMD.com</u>
- Algorithms are a branching structure that changes depending upon the answer to each question.
- The member's clinical information/medical record will be required for validation of clinical criteria before an approval can be made.
- NIA has a specialized clinical team.
- Peer-to-peer discussions are offered for any request that does not meet medical necessity guidelines.
- Our goal ensure that members are receiving appropriate care.



# Member and Clinical Information Required for Authorization

### General

 Includes: ordering physician information, member information, rendering provider information, requested examination, etc.

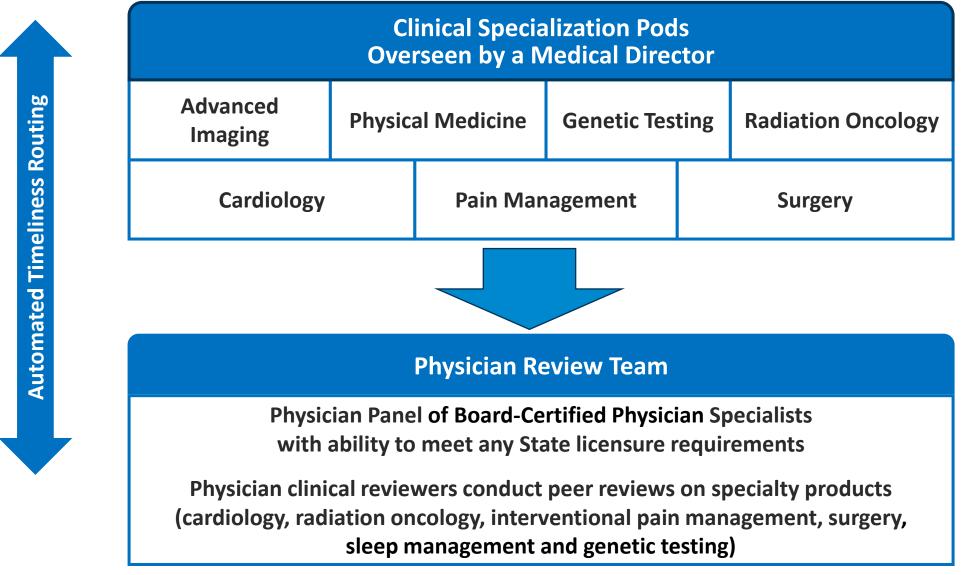
### **Clinical Information**

- Includes clinical information that will justify examination, symptoms and their duration, physical exam findings
- Preliminary procedures already completed (e.g., x-rays, CTs, lab work, ultrasound reports, scoped procedures, referrals to specialist, specialist evaluation)
- Reason the study is being requested (e.g., further evaluation, rule out a disorder)

Refer to the Prior Authorization Checklists on RadMD for more specific information.

# **Clinical Specialty Team Review**







### **Document Review**





NIA may request member's medical records/additional clinical information.



When requested, validation of clinical criteria within the member's medical records is required before an approval can be made.



Ensures that clinical criteria that supports the requested test are clearly documented in medical records.



Helps ensure that members receive the most appropriate, effective care.





# NIA to Ordering Physician: Request for Additional Clinical Information

	NUA.			
	National Imaging Associates, Inc.			
	1	ABDOME PLEASE FAX THIS F	N - PELVIS CT ORM TO: 1-80	-784-6864
				Date: TODAY
ORD!	ERING PHYSICIAN:	REQ_PROVIDER		
FAX	NUMBER:	FAX_RECIP_PHONE	TRACKING NUMBER:	CC_TRACKING_NUMBER
RE:	RE: Authorization Request MEMBER ID: MEMBER_ID			
	ATTENT NAME: MEMBER_NAME IEALTH PLAN: HEALTH PLAN DESC			
			s we are unable to an	prove based on the information provided
	e, please respond to this			•
FA aali a)	on/change w/ bowel or examination, including abnormalities; prior tre <u>Abnormal finding on</u> Provide the office visit	L <u>ation:</u> ag history of abdominal pain urinary habits, relevant past pelvic/rectal examinations; atment/consultation, if any). <u>examination, imaging or la</u> note(g) or lab/imaging repor	medical history- bor diagnostic work-up- boratory test:	submit reports demonstrating
		ance to the request for abdor		
c)		consultation notes indicating	men/pelvis CT imag g rationale for suspic	
	Provide the office visit examination, diagnostic possible malignancy <u>History of cancer:</u> Provide the office visit	'consultation notes indicating c/imaging reports indicating note describing the current s	men/pelvis CT imag g rationale for suspic the relevance of an i ymptoms or issue ar	ing ion of cancer, along with relevant
d)	Provide the office visit examination, diagnosti possible malignancy History of cancer: Provide the office visit and/or relevant treatme <u>Pre-operative evaluat</u> Provide the office visit indications. It is usual	consultation notes indicating finaging reports indicating note describing the current s at reports that will document ion: note/consultation by the sur	men/pelvis CT imag g rationale for suspic the relevance of an i ymptoms or issue an the cell type of the gical specialist indic operative evaluation	ing ion of cancer, along with relevant maging test in further evaluation of a ad the history; report of the biopsy cancer and treatment to date. ating the operation planned and will be ordered by the surgeon in
d) e)	Provide the office visit examination, diagnosti possible malignancy History of cancer: Provide the office visit and/or relevant treatme <u>Pre-operative evaluat</u> Provide the office visit indications. It is usual	consultation notes indicating /imaging reports indicating note describing the current s at reports that will document ion: note/consultation by the surn y expected that planned pre- al scheduling so that the two	men/pelvis CT imag g rationale for suspic the relevance of an i ymptoms or issue an the cell type of the gical specialist indic operative evaluation	ing ion of cancer, along with relevant maging test in further evaluation of a ad the history; report of the biopsy cancer and treatment to date. ating the operation planned and will be ordered by the surgeon in



A fax is sent to the provider detailing what clinical information that is needed, along with a Fax Coversheet.



We stress the need to provide the clinical information as quickly as possible so we can make a determination.



Determination timeframe begins after receipt of clinical information.

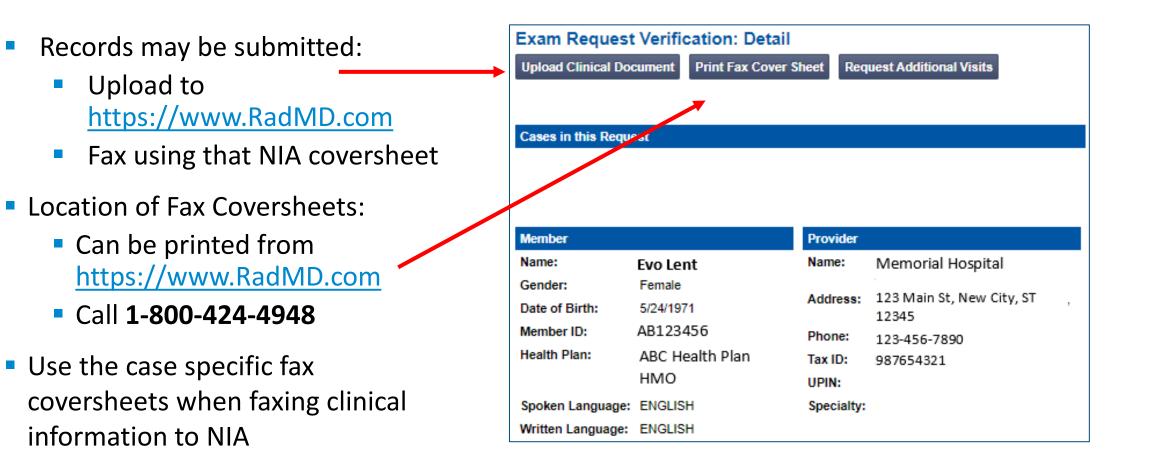


Failure to receive requested clinical information may result in non certification.

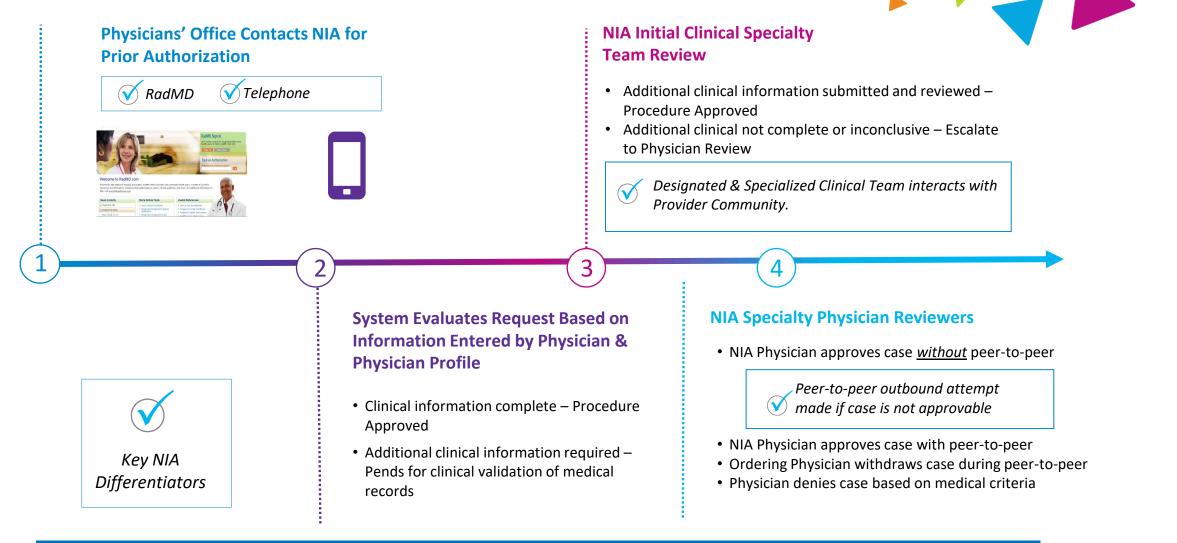


# Submitting Additional Clinical Information





# **Clinical Review Process**



Generally the turnaround time for completion of these requests is within two business days upon receipt of sufficient clinical information.

# NIA Urgent/Expedited Authorization Process



### **Urgent/Expedited MSK Authorization Process**

- If an urgent clinical situation exists (outside of a hospital emergency room) during business hours, please call NIA immediately.
- The NIA website <u>https://www.RadMD.com</u> cannot be used for medically urgent or expedited prior authorization requests during business hours. Those requests must be processed by calling the NIA call center at 1-800-424-4948.
- Turnaround time is within 1 Business day not to exceed 72 Business Calendar Hours.

# Notification of Determination

#### **Authorization Notification**

- Validity Period Authorizations are valid for:
- Ambetter of North Carolina Inc.
  - 30 days from date of request

#### **Denial Notification**

- Notifications will include an explanation of what services have been denied and the clinical rationale for the denial
- A peer-to-peer discussion can be initiated once the adverse determination has been made.
- A reconsideration is available with new or additional information.
- Timeframe for reconsideration is 5 business days from date of denial.
- In the event of a denial, providers are asked to follow the appeal instructions provided in their denial letter.

# **Claims and Appeals**

#### **How Claims Should be Submitted**

- Rendering providers/Imaging providers should continue to send their claims directly to Ambetter of North Carolina Inc.
- Providers are strongly encouraged to use EDI claims submission.
- Check on claims status by logging on to the Ambetter of North Carolina Inc. Provider Portal at <u>http://www.ambetterofnorthcar</u> <u>olina.com</u>

#### **Claims Appeals Process**

- In the event of a prior authorization or claims payment denial, providers may appeal the decision through Ambetter of North Carolina Inc.
- Providers should follow the instructions on their nonauthorization letter or Explanation of Payment (EOP) notification.

# **Radiation Safety and Awareness**





Studies suggest a significant increase in cancer in dose estimates in excess of 50 mSv



CT scans and nuclear studies are the largest contributors to increased medical radiation exposure





According to the 2019 NCRP Report, a dramatic decrease in average radiation dose per person by as much as 15 – 20% has been demonstrated due to radiation safety and technological advances.

NIA has developed a Radiation Awareness Program designed to create member and physician awareness of radiation concerns





# **Radiation Awareness Program**



Identification of High Exposure Members



Point of Service Provider Notification and Opportunities for Provider Education



Promote Member Awareness and Education



### **Provider Tools**





Available 24/7 (except during maintenance, performed every third Thursday of the month from 9 pm –

midnight PST)



Toll-Free Number 1-800-424-4948 Available Monday - Friday 8:00 AM – 8:00 PM EST

- Request Authorization
- View Authorization Status
- View and manage Authorization Requests with other users
- Upload Additional Clinical Information
- View Requests for additional Information and Determination Letters
- View Clinical Guidelines
- View Frequently Asked Questions (FAQs)
- View Other Educational Documents

Interactive Voice Response (IVR)
 System for authorization tracking

### NIA's Website https://www.RadMD.com

#### **RadMD Functionality varies by user:**

- Ordering Provider's Office View and submit requests for authorization.
- Rendering Provider Views approved, pended and in review authorizations for their facility. Ability to submit outpatient imaging requests on behalf of ordering provider.

Online Tools Accessed through <u>https://www.RadMD.com</u>:

- NIA's Clinical Guidelines
- Frequently Asked Questions
- Quick Reference Guides
- Checklist
- RadMD Quick Start Guide
- Claims/Utilization Matrices





# Registering on RadMD.com To Initiate Authorizations

Everyone in your organization is required to have their own separate username and password due to HIPAA regulations.

#### STEPS:

- 1. Click the "New User" button on the right side of the home page.
- 2. Select "Physician's office that orders procedures"
- 3. Fill out the application and click the "Submit" button.
  - You must include your e-mail address in order for our Webmaster to respond to you with your NIAapproved username and password.

NOTE: On subsequent visits to the site, click the "Sign In" button to proceed.

Offices that will be both ordering and rendering should request ordering provider access, this will allow your office to request authorizations on RadMD and see the status of those authorization requests.



(2)

3

Facility/office where procedures are performed Health Insurance company Cancer Treatment Facility or Hospital that performs radiation oncology procedures Physicians office that prescribes radiation oncology procedures Physical Medicine Practitioner (PT, OT, ST, Chiro, etc.)

Application for a New Account			
Please fill out this form only for your	self. Shared accounts are not allowed.		
In order for your account to be activated ensure that emails from RadMDSupport	I, you must be able to receive emails from it @mageilanhealth.com can be received.	RadMDSupport@magellanhealth.com.	Please check with your email administrator to
Which of the following best describes		What about read-only radiology offic	ces 🕗
New Account User Information		Your Supervisor	
Choose a Username:		Unless you are the owner or CEO of must be different than the supervisor	your company, the user's name/email 's name/email.
First Name:	Last Name:	First Name:	Last Name:
Phone:	Fax:	Phone:	Email:
Email:	Confirm Email:		
Company Name:	Job Title:		
Address Line 1:	Address Line 2:		
City:	State:		
	[State]		
Zip:			
	]		
	Submit		



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# Allows Users the ability to view all approved, pended and in review authorizations for facility

#### IMPORTANT

- Everyone in your organization is required to have their own separate username and password due to HIPAA regulations.
- Designate an "Administrator" for the facility who manages the access for the entire facility.

#### STEPS:

- 1. Click the "New User" button on the right side of the home page.
- 2. Select "Facility/office where procedures are performed"
- 3. Fill out the application and click the "Submit" button.
  - You must include your e-mail address in order for our Webmaster to respond to you with your NIA-approved username and password.
- 4. New users will be granted immediate access.

NOTE: On subsequent visits to the site, click the "Sign In" button to proceed.

If you have multiple staff members entering authorizations and you want each person to be able to see all approved, pended and in review authorizations, they will need to register for a rendering username and password. Each user will need to complete an application on RadMD. This will allow users to see all approved, pended and in review authorizations under your Tax ID Number. Rendering access will also allow facility to submit outpatient imaging requests on behalf of ordering provider.



2

1

-- Please Select an Appropriate Description --Physician's office that orders procedures Facility/office where procedures are performed

Address Line 2

ſState

Health Insurance company Cancer Treatment Facility or Hospital that performs radiation oncology procedures Physicians office that prescribes radiation oncology procedures Physical Medicine Practitioner (PT, OT, ST, Chiro, etc.)

#### Application for a New Account Please fill out this form only for yourself. Shar

Address Line 1

City:

your account to be activated, you must be able to receive emails from RadMDSupport@magellanhealth.com. Please check with your of the following best describes your compan What about read-only radiology offices Your Superviso Unless you are the owner or CEO of your company, the user's name/emai must be different than the supervisor's name/email. Choose a Usernam First Name Last Name First Name Last Nam Phone: Eax: Email: Confirm Emai Company Name Job Title

Sub

	Facility Tax ID #: Add	
	Your Tax IDs: [none]	
•		
mit		



# RadMD Enhancements

NIA offers a **Shared Access** feature on our <u>RadMD.com</u> website. Shared Access allows ordering providers to view authorization requests initiated by other RadMD users within their practice.

		Provider Resources	User	▼
Request Exam or specialty procedure (including Cardiac, Ultrasound, Sleep Assessment) Physical Medicine Initiate a Subsequent Request Radiation Treatment Plan Pain Management	Resources and Tools Shared Access Clinical Guidelines Request access to Tax ID News and Updates			
or Minimally Invasive Procedure Spine Surgery or Orthopedic Surgery Genetic Testing				
	Login As Username:	Login		
Request Status Search for Request View All My Requests	Tracking Number: Forgot Tracking N	Search		

If practice staff is unavailable for a period of time, access can be shared with other users in the practice. They will be able to view and manage the authorization requests initiated on <u>RadMD.com</u>, allowing them to communicate with members and facilitate treatment.



# When to Contact NIA

Providers:



Initiating or checking the status of an authorization request	<ul> <li>Website, <u>https://www.RadMD.com</u></li> <li>Toll-free number 1-800-424-4948 Interactive Voice Response (IVR) System</li> </ul>
Initiating a Peer-to-Peer Consultation	<ul> <li>Call 1-800-424-4948</li> </ul>
<b>Provider Service Line</b>	<ul> <li><u>RadMDSupport@Evolent.com</u></li> <li>Call 1-800-327-0641</li> </ul>
Provider Education requests or questions specific to NIA	<ul> <li>Priscilla W. Singleton Provider Relations Manager 1-800-450-7281 Ext. (75023) psingleton@Evolent.com</li> </ul>



### **RadMD** Demonstration





### **Confidentiality Statement**



The information presented in this presentation is confidential and expected to be used solely in support of the delivery of services to Ambetter of North Carolina Inc. members. By receipt of this presentation, each recipient agrees that the information contained herein will be kept confidential and that the information will not be photocopied, reproduced, or distributed to or disclosed to others at any time without the prior written consent of Ambetter of North Carolina Inc. and Evolent Health, LLC.



# Thanks

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