







Radiation Oncology Solutions Program For Radiation Oncologists and Cancer Treatment Facilities Quick Reference Guide

Effective January 1, 2016 Revised June 1, 2023

ConnectiCare has entered into an agreement with National Imaging Associates, Inc. (NIA) to provide Radiation Oncology Solutions services for ConnectiCare membership. This program is consistent with industry-wide efforts to ensure members receive the most appropriate radiation therapy treatment in accordance with evidence-based clinical guidelines and standards of care.

The NIA program is managed through ConnectiCare's contractual relationships with providers who deliver Radiation Oncology Solutions services. NIA conducts medical necessity reviews of requested services only.

Preauthorization Requirements:

- All Cancers as well as All Other Conditions for Proton Beam and Stereotactic Radiation Therapy for ConnectiCare's Commercial/Exchange and Medicare membership.
- Preauthorization will be required for all radiation therapy treatment modalities and the number of treatments/fractions for the course of treatments in an outpatient setting for procedures listed below based on Medical Necessity Review:
- Brachytherapy (Low-dose rate (LDR), High-dose rate (HDR) and Electronic
- 2D conventional radiation therapy (2D)
- 3D conformal radiation therapy (3D-CRT)
- Intensity modulated radiation therapy (IMRT)
- Stereotactic Radiation Therapy (SRS and SBRT)
- Proton beam radiation therapy (PBT)
- Intraoperative Radiation Therapy (IORT)
- Neutron Beam
- Hyperthermia

- Treatment planning and management procedures such as simulations, guidance, dosimetry and isodose plans does not require an authorization.
- NIA does not manage the authorization for drugs associated with these services.

Important Notes Regarding Radiation Therapy Treatment Notification Transition of Care Guidelines:

- Inpatient radiation therapy services will NOT be impacted by this program.
- 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.

Obtaining Authorizations

 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 planned for each member.

For additional details, please refer to NIA's clinical guidelines and disease-specific treatment plan checklists, available at 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 uploaded to RadMD.com or faxed to NIA'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 generally 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, "ConnectiCare Utilization Review Matrix" for a list of CPT codes that NIA authorizes for ConnectiCare. This matrix can be found on RadMD.com. Payment will be denied for procedures performed without a necessary authorization.

Prior Authorization Process

There are two ways to obtain authorizations – either through NIA's Website at https://www.RadMD.com (preferred method) or by calling NIA at: 1-877-607-2363.

Information Needed to Obtain Preauthorization

To expedite the preauthorization process, please have the appropriate information ready before logging into NIA's website, RadMD.com, or calling NIA's Call Center.

- Name and office phone number of Radiation Oncologist planning and delivering radiation therapy
- Member 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). E.g.
 - Total dose
 - Fractions
- Name of treatment facility where procedures will be performed
- Anticipated treatment and/or simulation date

Website Access

- To get started, go to https://www.RadMD.com, click the New User button and submit a RadMD Application for New Account by selecting "Physician's Office that Prescribes Radiation Oncology Procedures"
- You can request preauthorization at <u>RadMD.com</u> by clicking the "Request a therapy treatment plan" link which is a part of your main menu options. RadMD is available 24/7, except when maintenance is performed every third Thursday of the month from 9 pm midnight PST.
- The Radiation Oncologist can request medical necessity review for radiation therapy treatment at RadMD.com. RadMD is available 24/7, except when maintenance is performed every third Thursday of the
- maintenance is performed every third Thursday of the month from 9 pm midnight PST.
- The NIA website cannot be used for expedited prior-authorization requests during business hours. Those requests must be processed through NIA's toll-free phone number 1-877-607-2363.
- If the Radiation Oncologist requests a medical necessity review through NIA's website and the request is pended, the provider will receive a tracking number. NIA will contact the Radiation Oncologist to either complete the process or notify the provider of the medical necessity determination.
- Pended requests: If you are requesting preauthorization's through the NIA website and your request pends, you will receive a tracking number. You will then be required to submit additional clinical information to complete the process.
- Authorization's status: You can check on the status of a radiation treatment plan quickly
 and easily by using the "View Request Status" link on RadMD's main menu. In addition to
 the ability to view clinical documentation received by NIA, users can view links to casespecific communication to include requests for additional information and determination
 letters.
- The "Track an Authorization" feature allows users who did not submit the original request to view the status of an authorization, as well as upload clinical information. This option is also available as a part of your main menu options using the "Search by Tracking Number" feature. A tracking number is required with this feature.

Radiation Therapy Treatment Facilities

 Have the ability to view approved authorizations quickly and easily by going to the NIA website, <u>RadMD.com</u>. After sign-in, visit the **My Treatment Requests** tab to view all outstanding authorizations.

Quick Contacts

- Website: https://www.RadMD.com
- ConnectiCare website: www.ConnectiCare.com
- NIA toll-free preauthorization phone number: 1-877-607-2363
- ConnectiCare Provider Services:
 - o 1-800-828-3407 (Commercial plans)
 - o 1-877-224-8230 (Medicare plans)



Telephone Access

- The Radiation Oncologist may request medical necessity review by calling NIA at 1-877-607-2363, Monday through Friday from 8 a.m. to 8 p.m. EST.
- The NIA Call Center can accept multiple requests during one phone call.
- If you have questions and need more information about this Radiation Oncology Solutions program, you may contact the NIA Provider Service line at 1-800-327-0641.

Modifications to an Existing Treatment Plan

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

Submitting Claims

Please continue to submit claims to ConnectiCare as you currently do today.

NIA Evidence-based Clinical Guidelines

Radiation oncology clinical guidelines can be found on NIA's website at <u>RadMD.com</u>. 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 preauthorization number is valid for 180 days from date of request. NIA 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 NIA 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 member began *inpatient* radiation therapy and continues *subsequent outpatient* treatment *or if a member began radiation therapy prior to coverage by ConnectiCare, outpatient* radiation therapy will not require preauthorization for medical necessity review. Providers should fax a completed Inpatient Radiation Therapy Notification Form for each Commercial/Exchange member to ConnectiCare at 1-800-923-2882 and for Medicare VIP members at 1-866-706-6929.

- The Radiation Oncologist will receive an NIA 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 RadMD.com, or via the NIA 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.

