Independent Health Medical Specialty Solutions





National Imaging Associates, Inc. (NIA) Program Agenda 🔶



Introduction to NIA



Our Program

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





Questions and Answers



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.

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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

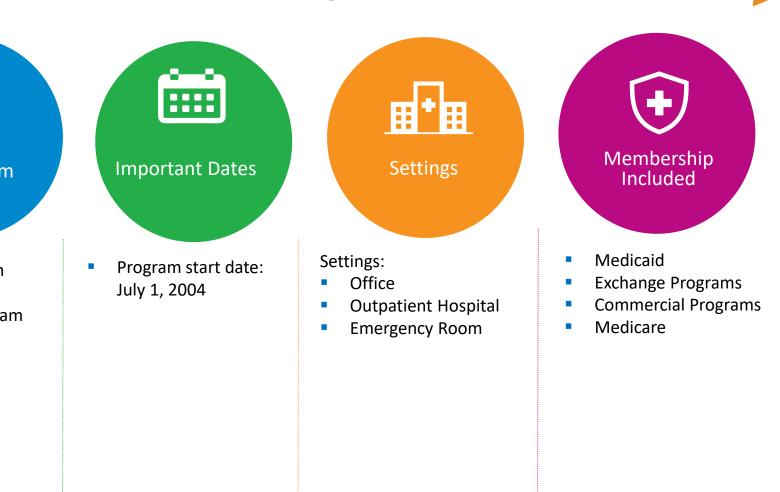
Specialized Physician Teams

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

NIA's Prior Authorization Program

The Program

 Independent Health began a prior authorization program through NIA for the management of outpatient imaging services.



NIA's Medical Specialty Solutions for nonemergent outpatient Medical Specialty Solutions services for Independent Health membership will be managed through Independent Health contractual relationships.

Network

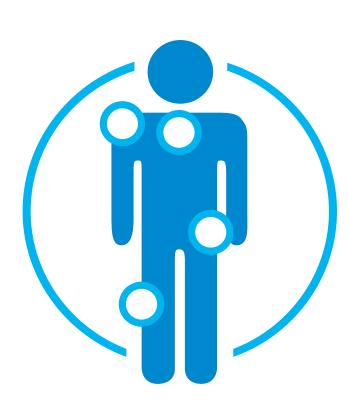


NIA's Prior Authorization Program

Effective July 1, 2004. Only non-emergent procedures performed in an outpatient setting require authorization with NIA.



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





Excluded from the Program Procedures Performed in the following Settings:

- Hospital Inpatient
- Observation
- Emergency Room

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 https://www.RadMD.com



Defer to Independent Health's Policies for Procedures not on Claims/Utilization Review Matrix.



Independent Health Utilization Review Matrix 2022

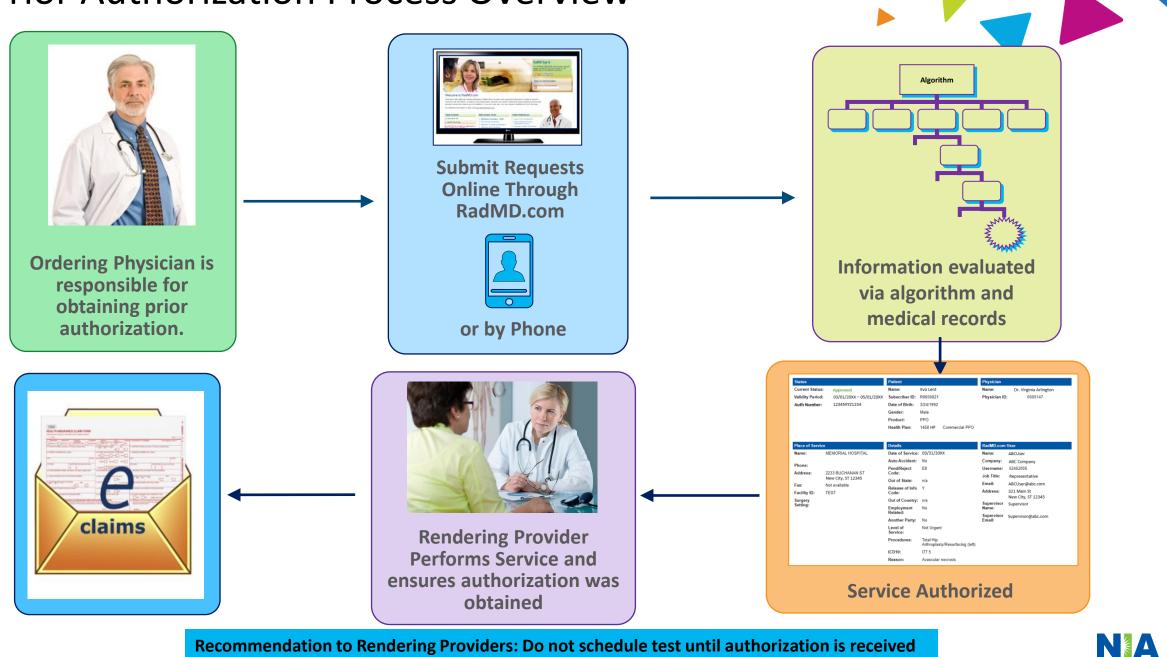
The matrix below contains all of the CPT 4 codes for which National Imaging Associates, Inc. (NIA) manages on behalf of Independent Health. This matrix is designed to assist in the resolution of claims adjudication and claims questions related to those services authorized by NIA. The "Allowable Billed 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, Surge	ry Center or
Hospital Inpatient setting are not managed by NIA.	-

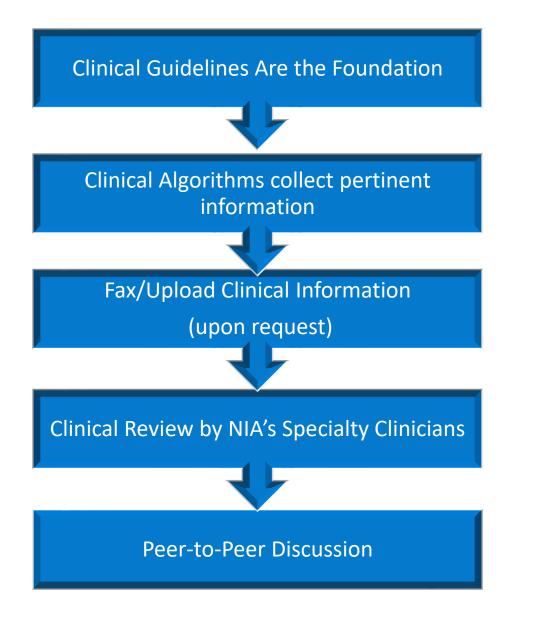
Authorized CPT Code	Description	Allowable Billed Groupings
70336	MRI Temporomandibular Joint	70336
70450	CT Head/Brain	70450, 70460, 70470, +0722T
70480	CT Orbit	70480, 70481, 70482, +0722T
70486	CT Maxillofacial/Sinus	70486, 70487, 70488, 76380, +0722T
70490	CT Soft Tissue Neck	70490, 70491, 70492, +0722T
70496	CT Anglography, Head	70496
70458	CT Anglography, Neck	70458
70540	MRI Orbit, Face, and/or Neck	70540, 70542, 70543, +0698T
		70551, 70552, 70553, 70540, 70542,
70551	MRI Internal Auditory Canal	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 Cheat	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
72145	MRI Thoracic Spine	72146, 72147, 72157, +0698T
72148	MRI Lumbar Spine	72148, 72149, 72158, +0698T
72159	MRA Spinal Canal	72159

Prior Authorization Process Overview



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 https://www.RadMD.com
- 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.

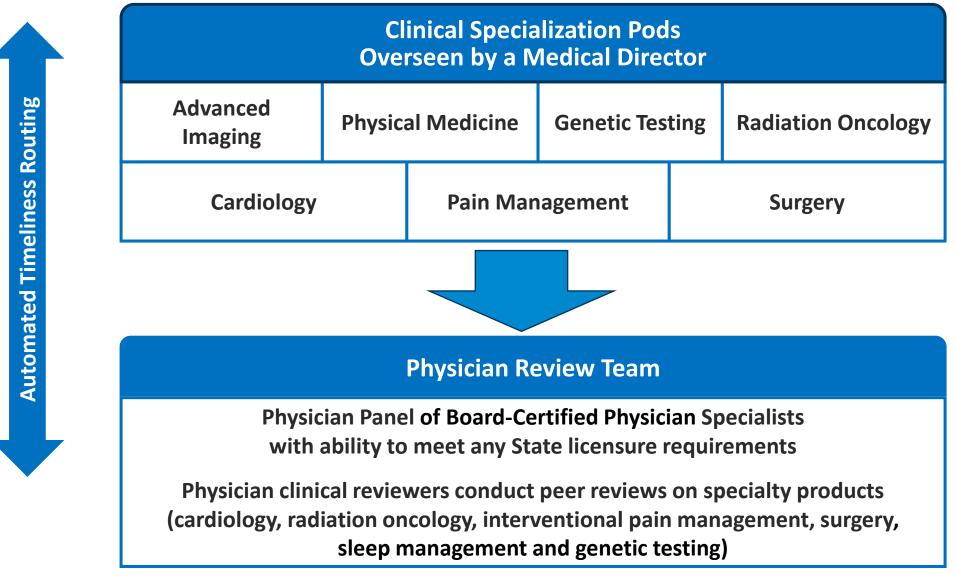
Clinical Information

- 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

	CC_TRAC	KING_NUMBER	FAXC
	n, İnc.		
	ABDOME: PLEASE FAX THIS F	N - PELVIS CT	0-784-6864
		010110.100	Date: TODAY
ORDERING PHYSICIAN	REQ_PROVIDER	1	
FAX NUMBER:	FAX_RECIP_PHONE	TRACKING NUMBER:	CC_TRACKING_NUMBER
RE:	Authorization Request	MEMBER ID:	MEMBER_ID
PATIENT NAME:	MEMBER_NAME		
HEALTH PLAN:	HEALTH_PLAN_DESC		pprove based on the information provid
	<u>VAYS PROVIDE:</u> at office visit note note since initial presentation		problem requiring imaging eports that corroborate abnormalit
on/change w/ bowel examination, includ	aluation:	medical history- bo diagnostic work-up-	
Provide the office v	on examination, imaging or la isit note(s) or lab/imaging repor elevance to the request for abdo	rt that documents the	e abnormality found and any needed ring
	isit/consultation notes indicatin stic/imaging reports indicating		cion of cancer, along with relevant imaging test in further evaluation of a
	History of cancer: Provide the office visit note describing the current symptoms or issue and the history; report of the biopsy and/or relevant treatment reports that will document the cell type of the cancer and treatment to date.		
Provide the office v indications. It is us	<u>Pre-operative evaluation</u> : Provide the office visit note/consultation by the surgical specialist indicating the operation planned and indications. It is usually expected that planned pre-operative evaluation will be ordered by the surgeon in conjunction with surgical scheduling so that the two coincide within a four week/30 day period.		
f) Post-operative eval	luation:		
FAXC			



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.

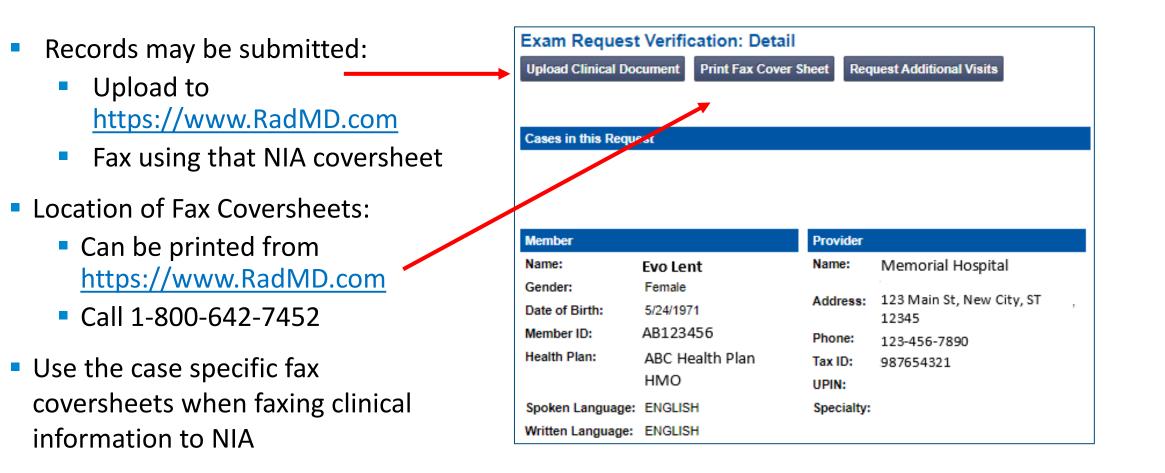


Failure to receive requested clinical information may result in non certification.

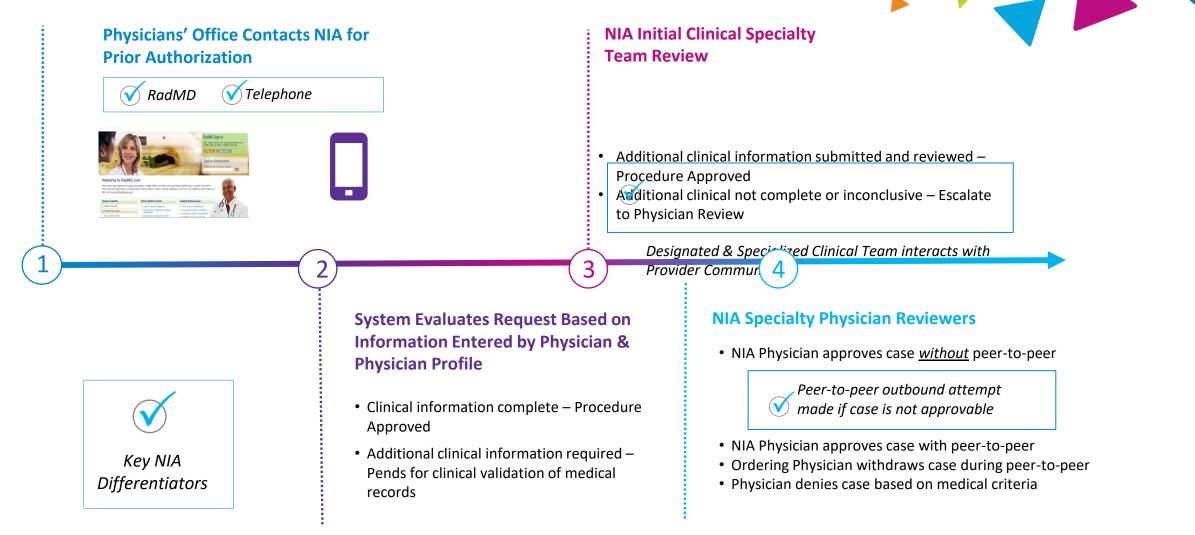


Submitting Additional Clinical Information





Clinical Review Process



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

NIA Urgent/Expedited Authorization Process



Urgent/Expedited 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 1-800-642-7452.
- Turnaround time is within 1 Business day not to exceed 72 Calendar Hours

Notification of Determination

Authorization Notification

- Validity Period Authorizations are valid for:
 - 60 days from the date of final determination

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
- In the event of a denial, providers are asked to follow the appeal instructions provided in their denial letter
- Reconsideration/re-review's and Reopens are not available.

Claims and Appeals

How Claims Should be Submitted

- Rendering providers/Imaging providers should continue to send their claims directly to Independent Health.
- Providers are strongly encouraged to use EDI claims submission.
- Check on claims status by logging on to the Independent Health website:

https://wnyhealthenet.com/

Claims Appeals Process

- In the event of a prior authorization or claims payment denial, providers may appeal the decision through Independent Health
- 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



Provider Tools





RadMD Website RadMD.com

Available



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



Toll-Free Number 1-800-642-7452 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.



-- Please Select an Appropriate Description --Physician's office that orders procedures

(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 Acco			
Please fill out this form onl	y for yourself. Shared accounts are no	t allowed.	
In order for your account to b ensure that emails from Rad	e activated, you must be able to receive e MDSupport@magellanhealth.com can be	emails from RadMDSupport@magellant received.	ealth.com. Please check with your email administr
Which of the following bes	t describes your company?		
Please select an appropri-	ate description	What about read-only ra	diology offices
New Account User Inform	ation	Your Supervisor	
Choose a Username:			r or CEO of your company, the user's name/email supervisor'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	
		Subint	

Allows Users the ability to view all approved, pended and in review authorizations for facility **RadMD Sign In** 1 **IMPORTANT** 24/7 online access for imaging facilities and health plans to NIA's RadMD Web site. Everyone in your organization is required to have their own separate username and password due to HIPAA regulations. Track an Authorization

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.
- Select "Facility/office where procedures are performed" 2.
- 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.
- New users will be granted immediate access. 4.

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.



-- Please Select an Appropriate Description --Physician's office that orders procedures 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.)

ication for a New Account

account to be activated, you must be able to receive emails from RadMDSupport@magellanhealth.com. Please check with your owing best describes your company 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: Emai

Email:	Confirm Email:	Affiliated Facilities
Company Name:	Job Title:	Facility Tax ID #:
Address Line 1:	Address Line 2:	Your Tax IDs: [none]
City:	State: [State]	
Zip:]	
	Submit	

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

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	 Website, <u>https://www.RadMD.com</u> Toll-free number 1-800-642-7452 - Interactive Voice Response (IVR) System
Initiating a Peer-to-Peer Consultation	 Call 1-800-642-7452
Provider Service Line	 <u>RadMDSupport@evolent.com</u> Call 1-800-327-0641
Provider Education requests or questions specific to NIA	 Lori A. Fink Provider Relations Manager 1-410-953-2621 <u>lfink@evolent.com</u>

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 Independent Health 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 Independent Health and Evolent Health,LLC.



Thank you!

