



Ambetter Health of Delaware Interventional Pain Management (IPM) Program Quick Reference Guide for Ordering Providers

Effective January 1, 2024

Ambetter Health of Delaware has entered into an agreement with Evolent* to provide utilization management for Interventional Pain Management (IPM) services on behalf of Ambetter Health of Delaware. This program includes prior authorization for non-emergent outpatient IPM procedures for Ambetter Health of Delaware members. This decision is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

Evolent will manage non-emergent outpatient IPM procedures through the existing contractual relationships with Ambetter Health of Delaware. Providers may begin contacting Evolent on January 1, 2024, to obtain prior authorization for procedures below scheduled on or after January 1, 2024.

Outpatient IPM Procedures Requiring Prior Authorization Include:

- Spinal Epidural Injections
- Paravertebral Facet Joint Injections or Blocks
- Paravertebral Facet Joint Denervation (Radiofrequency (RF) Neurolysis)
- Sacroiliac Joint Injections
- Sympathetic Nerve Blocks
- Spinal Cord Stimulators

If an urgent/emergent clinical situation exists outside of a hospital emergency room, please contact Evolent immediately with the appropriate clinical information for an expedited review.

Prior Authorization Process

The **preferred method** to submit prior authorization requests is through Evolent's website www.RadMD.com. Providers that are unable to submit their request through RadMD or for urgent requests needing expedited review, providers may contact our Call Center at 1-866-512-5148 for Ambetter Health of Delaware membership.

Please refer to Evolent's website www.RadMD.com to obtain the Ambetter Health of Delaware/Evolent Billable CPT® Codes Claim Resolution/Utilization Review Matrix for all of the CPT-4 codes that Evolent authorizes on behalf of Ambetter Health of Delaware.

As a provider of IPM services that require prior authorization, it is essential that you develop a process to ensure that the appropriate authorization number(s) has been obtained.

^{*} 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."

Payment will be denied for procedures performed without a prior authorization and the member cannot be balance-billed for such procedures.

IPM Important Notes:

- IPM procedures performed in the emergency room or on an inpatient basis do not require prior authorization through Evolent.
- All outpatient IPM procedures require a prior authorization through Evolent for each procedure performed.
- It is the responsibility of the ordering provider to obtain authorization for all IPM procedures outlined. Failure to do so may result in non-payment of your claim.
- Authorizations are valid for 60 calendar days from the date of request.

Information Needed to Submit Prior Authorization Requests

To expedite the prior authorization process, please have the appropriate information available before logging into Evolent's website, www.RadMD.com or calling Evolent's Call Center at 1-866-512-5148 for Ambetter Health of Delaware membership.

(*denotes required information):

- Name and office phone number of ordering physician*
- Member name, date of birth, and ID number*
- Requested procedure or CPT codes*
- Name of provider office or facility where the service will be performed*
- Anticipated date of service*
- Details justifying the pain procedure*:
 - Date of onset of pain or exacerbation
 - Physician exam findings and member symptoms (including findings applicable to the requested services)
 - o Clinical Diagnosis
 - o Date and results of prior IPM procedures.
 - o Diagnostic imaging results, where available.
 - Active/Inactive conservative treatment modalities specific to the pain region in question that have been completed, with dates and duration, results (e.g., physical therapy, chiropractic or osteopathic manipulation, physician-based home exercise plan, hot pads, massage, ice packs and medication)
 - Documentation of member's pain levels (on a scale of 0-10) or impact on functional abilities

Please be prepared to upload or fax the following information, if requested:

- Clinical notes outlining onset of pain, conservative care modalities, outcomes and physical exam findings
- Date and results of prior IPM procedures
- Effectiveness of prior procedures on reducing pain
- Diagnostic Imaging results

Member symptoms, past clinical history and prior treatment information will be required and should be available at the time of the contact.



Website Access

- To get started, go to <u>www.RadMD.com</u>, click the New User button and submit a RadMD Application for New Account by selecting "Physician's office that orders procedures." Your RadMD login information should not be shared.
- If a user already has access to RadMD to initiate authorizations, RadMD access will allow users to submit an authorization for any procedures/products managed by Evolent.
- You can request prior authorization at www.RadMD.com by clicking the "Request Pain Management or Minimally Invasive Procedure 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.
- **Pended requests**: If you are requesting prior authorizations through the Evolent 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 status: You can check on the status of prior authorizations 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 Evolent, users can view links to casespecific communication to include requests for additional information and determination
 letters.
- The "Track an Authorization" feature will allow 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.

Telephone Access

• Call center hours of operation are Monday through Friday, 8 a.m. to 8 p.m. EST. You may obtain a prior authorization request by calling Evolent at 1-866-512-5148.

Submitting Claims

Submit claims directly to Ambetter Health of Delaware. Please send your claims for services rendered to the following address:

Ambetter Health of Delaware Attn: Claims

P.O. Box 5010

Farmington, MO 63640-5010

Providers are encouraged to use EDI claims submission.

The Ambetter Health of Delaware payor ID number is 68069.

Frequently Asked Questions

In this section Evolent addresses commonly asked questions received from providers.

Where can I find Evolent's Guidelines for these IPM procedures?

Guidelines can be found on Evolent's website at www.RadMD.com.



Is prior authorization necessary if Ambetter Health of Delaware is not the member's primary insurance?

No. Authorization is not required if Ambetter Health of Delaware is secondary to another plan.

What does the Evolent authorization number look like?

The Evolent authorization number consists of alpha/numeric characters (e.g., 1234X567). In some cases, the ordering physician may instead receive an Evolent tracking number (not the same as an authorization number) if the physician's authorization request is not approved at the time of initial contact. Physicians can use either number to track the status of their request on the RadMD website or via our Interactive Voice Response telephone system.

Who can I contact at Evolent for questions, complaints, and appeals, etc.?

Please use the following Evolent contacts by type of issue:

- To educate your staff on Evolent procedures and to assist you with any provider issues or concerns, contact your Evolent Area Provider Relations Manager.
- Prior authorization and claims payment complaints/appeals: Follow the instructions on your non-authorization letter or Explanation of Benefit (EOB)/Explanation of Payment (EOP) notification.
- If you have questions or need more information about this IPM prior authorization program, you may contact the Evolent Provider Service Line at: 1-800-327-0641.

How will referring/ordering physicians know who Evolent is?

Ambetter Health of Delaware and Evolent are coordinating additional outreach and orientation activities.

What will the member ID card look like? Will it have both Evolent and Ambetter Health of Delaware information on the card? Or will there be two cards?

The Ambetter Health of Delaware member ID card will not have Evolent identifying information on it.

