# Wellcare of Delaware
# Interventional Pain Management (IPM) Program

Provider Training Presented by:
Name
Date

# Evolent* Program Agenda

Our IPM Program

Prior Authorization Process and Overview
- Clinical Foundation and Review
- Clinical Review Process
- Notification of Determination

Provider Tools and Contact Information

RadMD Demo

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."*

# MSK Prior Authorization Program
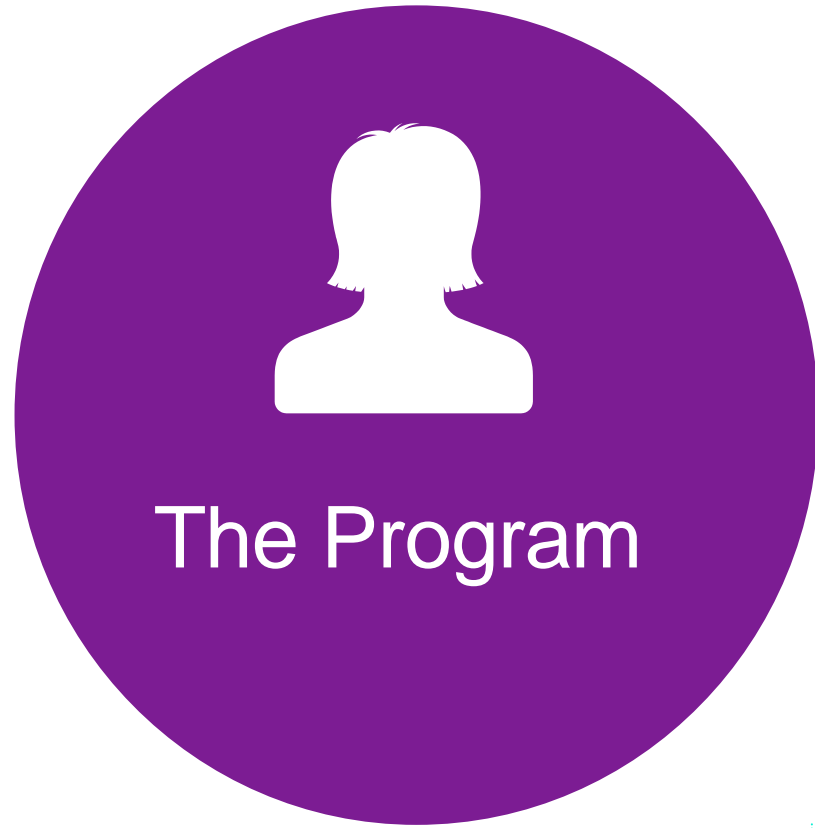
## The Program
- Wellcare of Delaware will begin a prior authorization program through Evolent for the management of MSK Services.

## Important Dates
- Program start date: January 1, 2024
- Begin obtaining authorizations from Evolent on January 1, 2024, for services rendered on or after January 1, 2024

## Procedures & Settings Included
- Outpatient, interventional spine pain management (IPM) services

- Surgery Center
- In Office
- Hospital

## Membership Included
- Medicare Programs

## Network
- Evolent will manage services through Wellcare of Delaware contractual relationships.

# Evolent's IPM Solution

**Procedures Performed on or after January 1, 2024, Require Prior Authorization**

**IPM Procedures Performed Outpatient or In-Office**

- 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
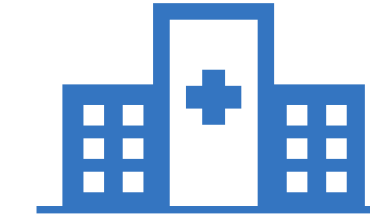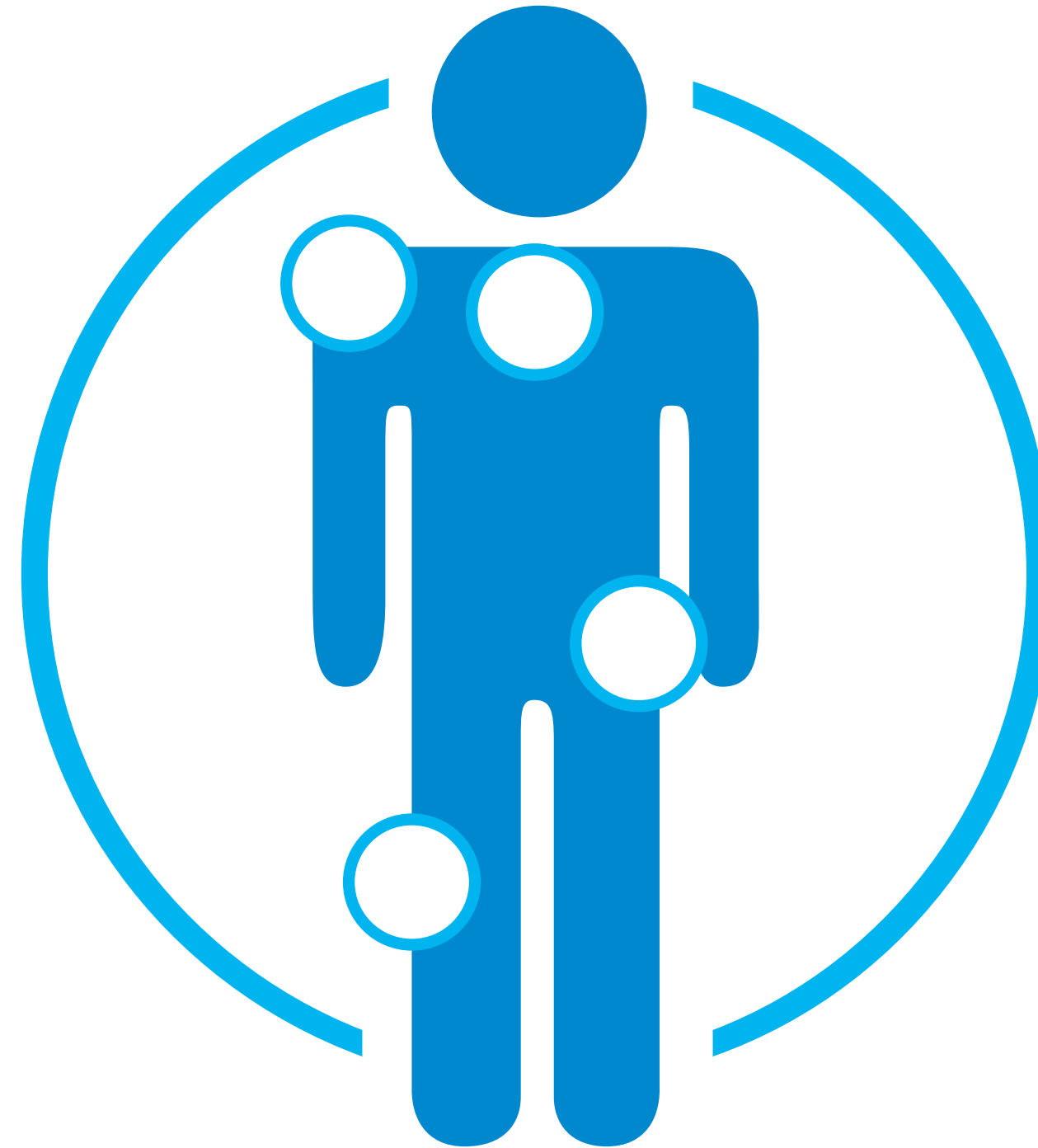
**IPM Procedures Performed in these Settings are Excluded:**

- Hospital Inpatient
- Observation Room
- Emergency Room/Urgent Care Facility

- Evolent will use the Wellcare of Delaware network of Pain Management Physicians, Hospitals and In-Office Providers as it's preferred providers for delivering Outpatient IPM Services to Wellcare of Delaware members throughout Delaware.

# CPT Codes Requiring Prior Authorization (IPM)

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

Includes CPT Codes and their Allowable Billable Groupings.

Located on RadMD.com.

Defer to Wellcare of Delaware Policies for Procedures not on Claims/Utilization Review Matrix.

**Wellcare of Delaware**
**Utilization Review Matrix 2024**
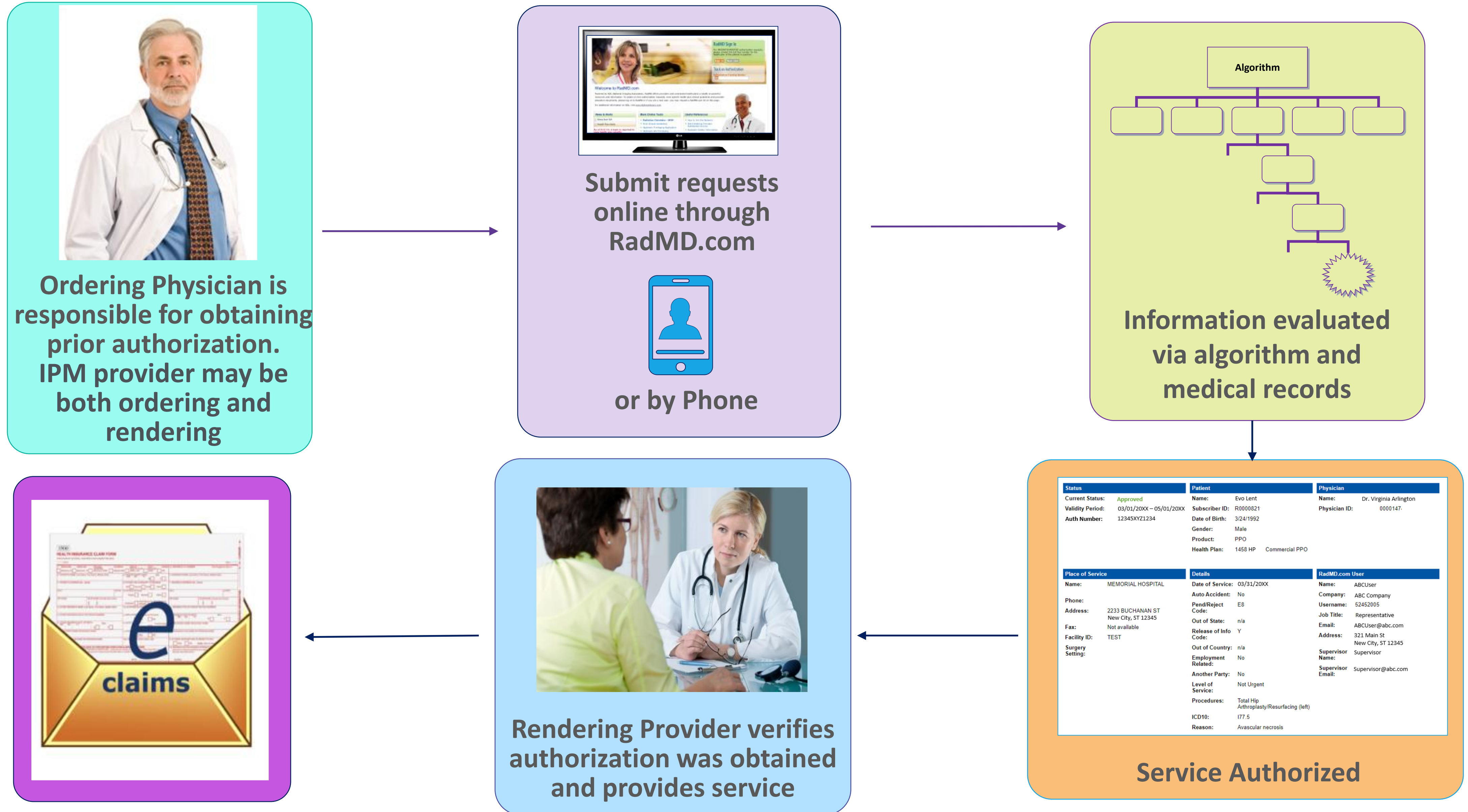**Outpatient Interventional Pain Management (IPM)**

The matrix below contains all of the CPT 4 codes for which Evolent* authorizes on behalf of Wellcare of Delaware. Evolent issues authorizations based on the primary CPT code and its allowable billed groupings. A procedure can be billed under any **one** of the given CPT codes for that allowable billed grouping as long as a valid authorization number has been issued within the validity period.

*Please note: IPM services rendered in an Emergency Room, Observation Room, Intraoperatively, or as a Hospital Inpatient are not managed by Evolent.

| IPM PROCEDURES | | | |
|---|---|---|---|
| Procedure Name | Primary CPT Code | Allowable Billed Groupings | Ancillary Procedures/Codes |

5

# Prior Authorization Process Overview



**Ordering Physician is responsible for obtaining prior authorization. IPM provider may be both ordering and rendering**

**Submit requests online through RadMD.com**

**or by Phone**

Algorithm

**Information evaluated via algorithm and medical records**

**Service Authorized**

**Rendering Provider verifies authorization was obtained and provides service**

claims

# Evolent's Clinical Foundation & Review

**Clinical Guidelines Are the Foundation**

↓

**Clinical Algorithms collect pertinent information**

↓

**Fax/Upload Clinical Information**
**(upon request)**

↓

**Clinical Review by Evolent's Specialty Clinicians**

↓

**Peer-to-Peer Discussion**
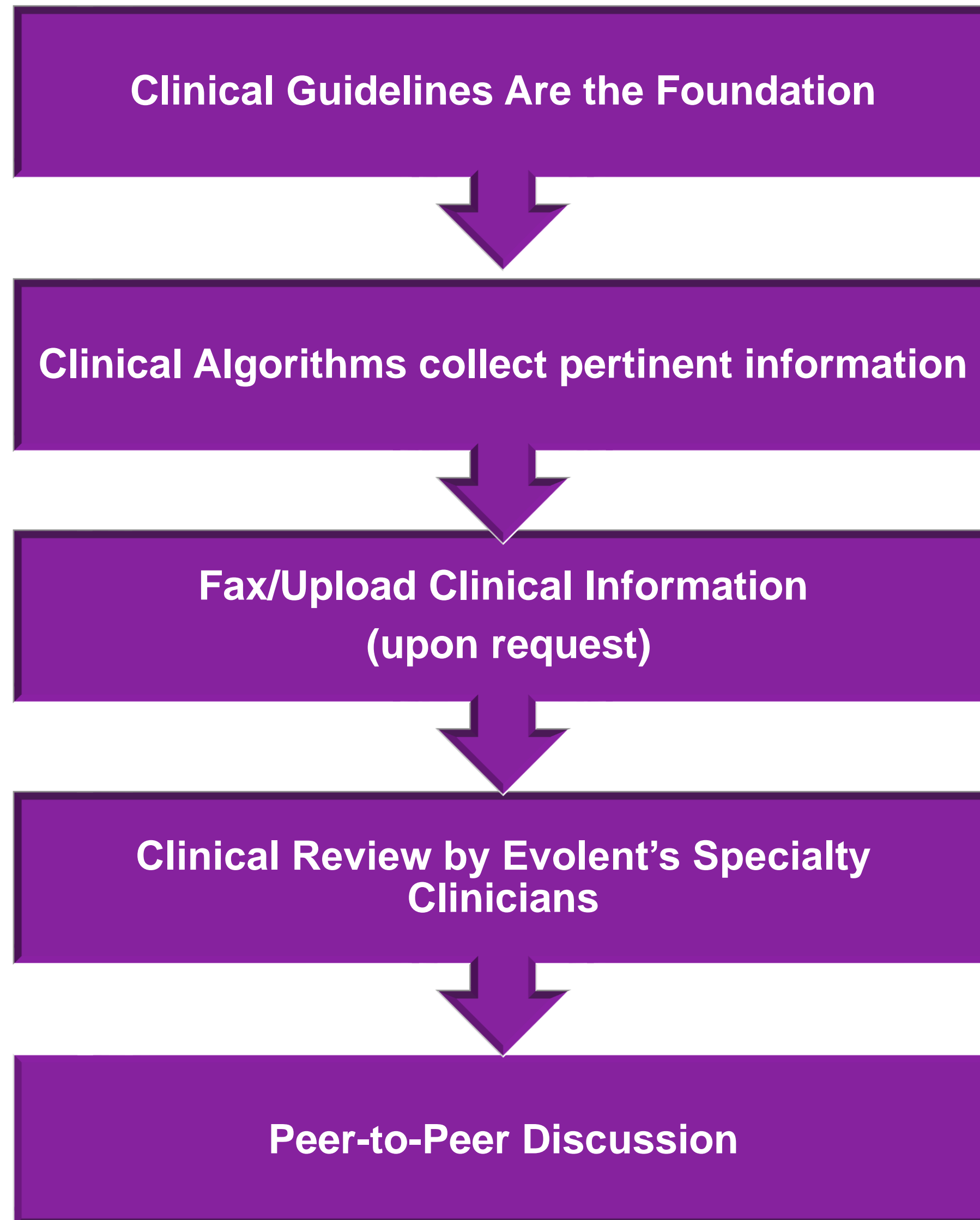
- **Clinical guidelines** were developed by practicing specialty physicians, through literature reviews and evidenced-based research. Guidelines are reviewed and mutually approved by Wellcare of Delaware and Evolent Medical Officers and clinical experts. **Clinical Guidelines are available on RadMD.com**

- 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.

- Evolent has a specialized clinical team focused on MSK.

- 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.**

# Authorization for IPM

**Special Information**

- Every IPM procedure performed requires a prior authorization; Evolent will not authorize a series of epidural injections.

- Bi-lateral IPM injections performed on the same date of service do not require a separate authorization. An authorization will cover bi-lateral as well as multiple levels on the same date of service. (Please refer to clinical guidelines for potential restrictions)

- Add on codes do not require separate authorization and are to be used in conjunction with the approved primary code for the service rendered.

# IPM Clinical Checklist Reminders

IPM Documentation:

**Conservative Treatment**
- Frequently, specifics of active conservative treatment/non-operative treatment are not present in office notes.  Details such as duration and frequency should be provided in order to ensure 6 weeks has been attempted within the past 6 months.  Official physical therapy records do not need to be obtained but the provider should supply a summary of these details.  Physical therapy is not the only means of active conservative treatment acceptable; physician directed home exercise programs as well as chiropractic care are among other examples of appropriate treatments.

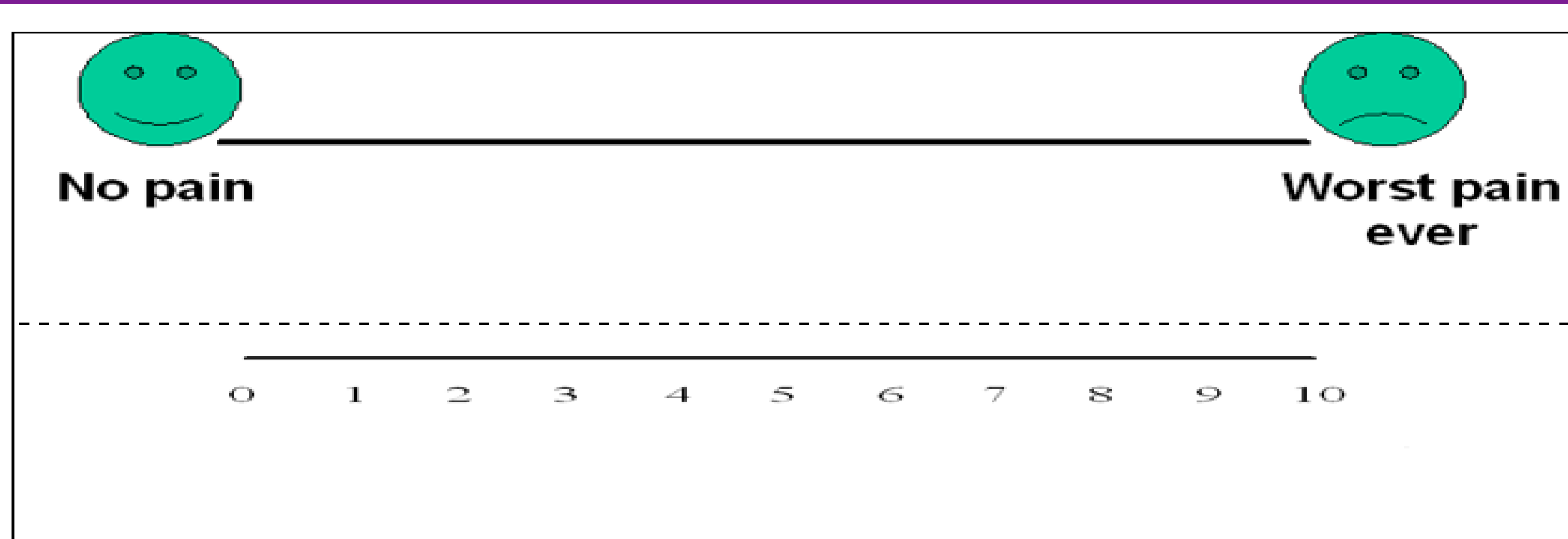**Visual Analog Scale (VAS) Score and/or Functional Disability**
- A VAS score is an acceptable method to relay intensity of pain.  However, a description of functional disability is also accepted as a means for measuring pain (ie - noting that the member is no longer able to perform work duties, daily care, etc).

**Follow Up To Prior Pain Management Procedures**
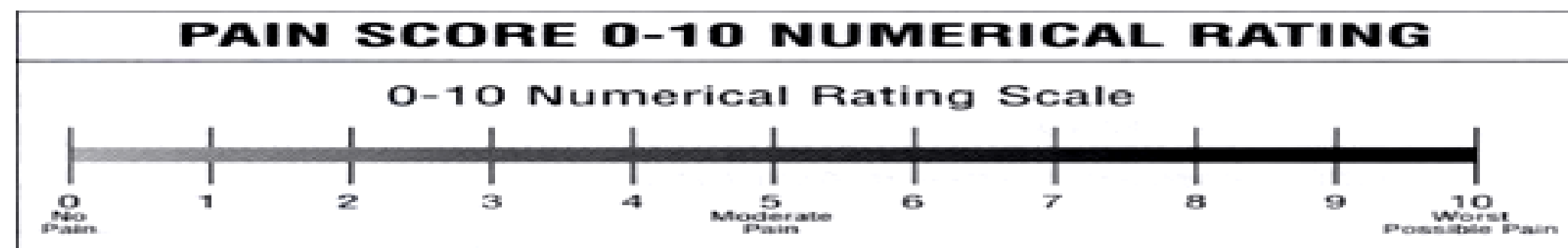- For repeat treatments, follow up is required in regard to what procedure was completed, how much and for how long relief was obtained, active participation in ongoing conservative treatment, and to what level the pain has returned.  A follow up office visit is not required; documentation of telephone encounters with the member are acceptable to satisfy this requirement.
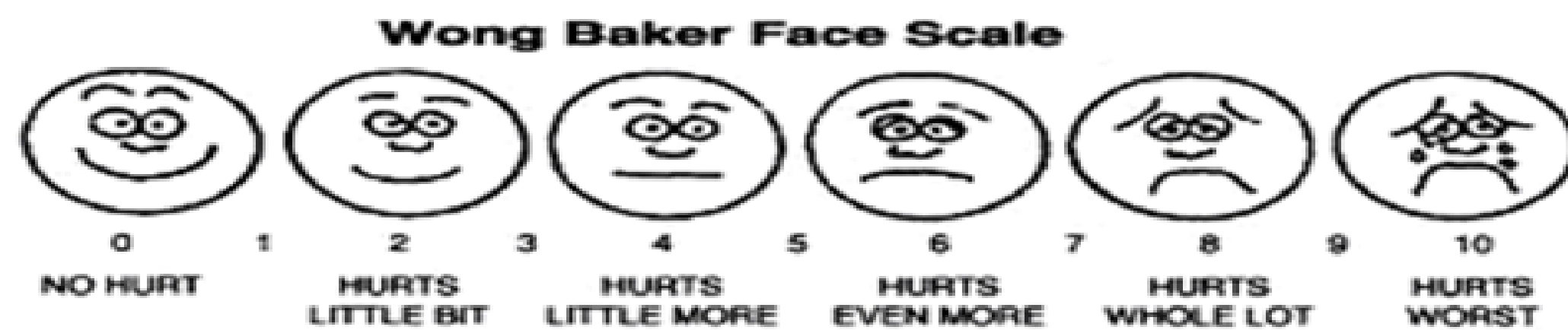
# Visual Analogue Scale (VAS) and Faces Rating Scale (FRS)



No pain — Worst pain ever

0  1  2  3  4  5  6  7  8  9  10

**Numerical rating scale (NRS)**

**PAIN SCORE 0-10 NUMERICAL RATING**

0-10 Numerical Rating Scale

0 No Pain   1   2   3   4   5 Moderate Pain   6   7   8   9   10 Worst Possible Pain

**Faces rating scale (FRS)**

**Wong Baker Face Scale**

| 0 NO HURT | 1 | 2 HURTS LITTLE BIT | 3 | 4 HURTS LITTLE MORE | 5 | 6 HURTS EVEN MORE | 7 | 8 HURTS WHOLE LOT | 9 | 10 HURTS WORST |

# Evolent to Physician: Request for Clinical Information



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

- Records may be submitted:
  - Upload to https://www.RadMD.com
  - Fax using Evolent coversheet
- Location of Fax Coversheets:
  - Can be printed from https://www.RadMD.com
  - Call
  - 1-866-512-5146
- Use the case specific fax coversheet when faxing clinical information to Evolent

## Exam Request Verification: Detail

| Upload Clinical Document | Print Fax Cover Sheet | Request Additional Visits |
|---|---|---|

### Cases in this Request

| Member | | Provider | |
|---|---|---|---|
| Name: | Evo Lent | Name: | Memorial Hospital |
| Gender: | Female | | |
| Date of Birth: | 5/24/1971 | Address: | 123 Main St, New City, ST 12345 |
| Member ID: | AB123456 | Phone: | 123-456-7890 |
| Health Plan: | ABC Health Plan HMO | Tax ID: | 987654321 |
| | | UPIN: | |
| Spoken Language: | ENGLISH | Specialty: | |
| Written Language: | ENGLISH | | |

# Clinical Specialty Team: Focused on IPM

## IPM Review

Initial clinical review performed by specially trained IPM nurses

Clinical review team will contact provider for additional clinical information

Anesthesiologists and pain management specialists conduct clinical reviews and peer-to-peer discussions on IPM requests

# MSK Clinical Review Process

**Physicians' Office Contacts
Evolent for Prior Authorization**

| ✓ RadMD | ✓ Telephone |



**Evolent Initial Clinical
Specialty Team Review**

- Additional clinical information submitted and reviewed – Procedure Approved
- Additional clinical not complete or inconclusive – Escalate to Physician Review

✓ *Designated & Specialized Clinical MSK Team interacts with Provider Community.*

**1** — **2** — **3** — **4** →

✓

*Key Evolent
Differentiators*

**Request Evaluated Based
on Information Entered**

- Additional clinical information required

**Evolent Specialty Physician Reviewers**

- Evolent Physician approves case *without* peer-to-peer

✓ *Peer-to-peer outbound attempt made if case is not approvable*
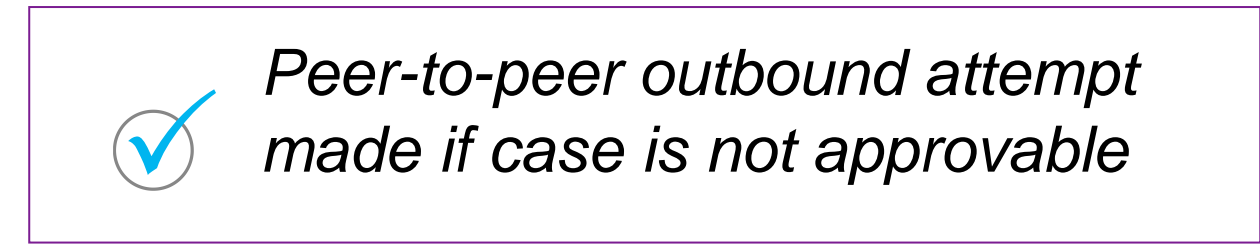
- Evolent Physician approves case with peer-to-peer
- Ordering Physician withdraws case during peer-to-peer
- Physician denies case based on medical criteria

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

14

# Urgent/Expedited Authorization Process

- If an urgent clinical situation exists (outside of a hospital emergency room) during business hours, please call Evolent immediately.

- The Evolent website https://www.RadMD.com cannot be used for medically urgent or expedited prior authorization requests during business hours. Those requests must be processed by calling the Evolent call center:
  - 1-866-512-5146
- Turnaround time is within 24 calendar hours not to exceed 72 calendar hours.

# Notification of Determination

| Authorization Notification | Denial Notification |
|---|---|
| ▪ Authorizations are valid for: 60 calendar days from date of request. | ▪ Notifications will include an explanation of what services have been denied and the clinical rationale for the denial<br><br>▪ A peer-to-peer discussion can be initiated once the adverse determination has been made.<br><br>▪ In the event of a denial, providers are asked to follow the appeal instructions provided in their denial letter.<br><br>▪ Medicare re-opens are not available |

# IPM Points

Injections in all regions of spine are managed

Date of Service is required for all requests

Each IPM procedure must be prior authorized

No series of epidural injections

Specialty Nurses and Physicians review IPM requests

# Provider Tools



## RadMD Website
## [RadMD.com](RadMD.com)

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

---

## Toll-Free Number

- 1-866-512-5146

**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

# Evolent Website
https://www.RadMD.com

## RadMD Functionality varies by user:

- **Ordering Provider's Office** – View and submit requests for authorization.

- **Rendering Provider** – View approved, pended and in review authorizations for their facility.
- IPM providers are typically both the ordering and the rendering provider.

## Online Tools Available on RadMD

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

# RadMD New User Application Process - Ordering

**Users are required to have their own separate usernames and passwords 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. Complete the application and click "Submit".

4. Open email from Evolent webmaster with new user password instructions

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

Offices that are both ordering and rendering procedures should request ordering provider access. This will allow you to request authorization on RadMD and see the status of requests.

# RadMD New User Application Process - Rendering

**IMPORTANT**

- **Users are required to have their own separate username and password due to HIPAA regulations.**

- **Designate an "Administrator" for the facility who manages access for users.**

**STEPS:**
1. Click the "New User" button on the right side of the home page.
2. Select "Facility/office where procedures are performed"
3. Complete the application and click "Submit".
4. Open email from Evolent webmaster with new user password instructions.
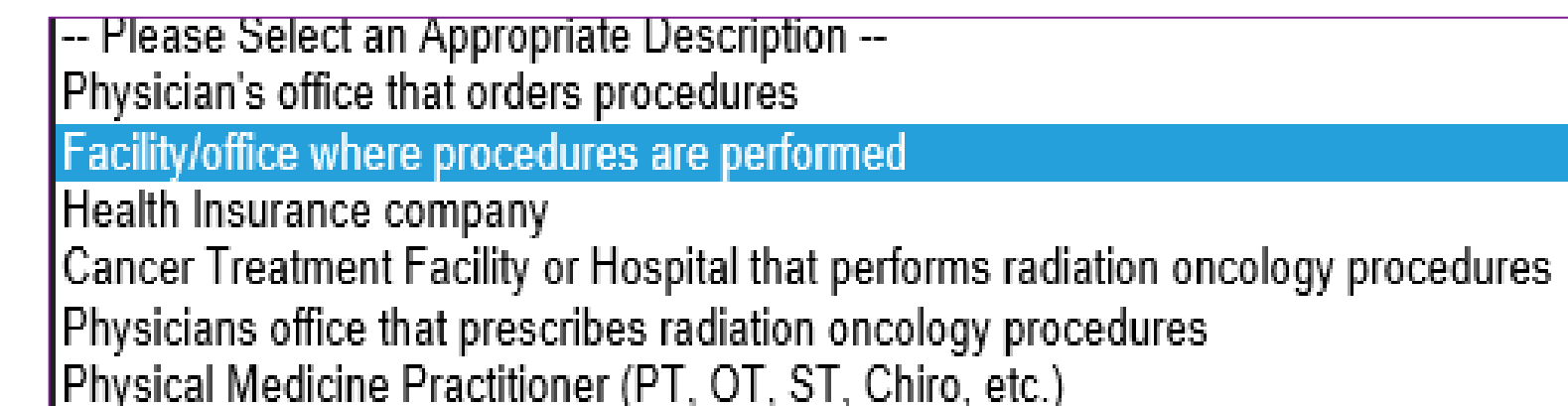
**NOTE:  On subsequent visits to RadMD, click the "Sign In" button to proceed.**

If multiple staff members entering authorizations need to view approved, pended, and in-review authorization requests, they will each need to complete and submit a new user application. The account administrator is responsible for granting rendering access for each employee.

**1**

RadMD Sign In
24/7 online access for imaging facilities and health plans to NIA's RadMD Web site.

Sign In    New User

Track an Authorization
Authorization Tracking Number
[            ]  Go

**2**

-- 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.)

**3**

Application for a New Account
Please fill out this form only for yourself. *Shared accounts are not allowed.*
In order for your account to be activated, you must be able to receive emails from RadMDSupport@magellanhealth.com. Please check with your email administrator to ensure that emails from RadMDSupport@magellanhealth.com can be received.

Which of the following best describes your company?
Facility/office/lab where procedures are performed ▼  What about read-only radiology offices?

New Account User Information | Your Supervisor
Choose a Username: | Unless you are the owner or CEO of your company, the user's name/email must be different than the supervisor's name/email.

First Name: | Last Name: | First Name: | Last Name:

Phone: | Fax: | Phone: | Email:

Email: | Confirm Email: | Affiliated Facilities

Company Name: | Job Title: | Facility Tax ID #:  [ ]  Add

Address Line 1: | Address Line 2: | Your Tax IDs: [none]

City: | State: [State] ▼

Zip:

Submit

# Shared Access

Evolent offers a **Shared Access** feature on our RadMD.com 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**
     or Minimally Invasive Procedure
   **Spine Surgery or Orthopedic Surgery**
   **Genetic Testing**

**Resources and Tools**
   Shared Access
   Clinical Guidelines
   Request access to Tax ID

**News and Updates**

Login As Username: [_____] [Login]

**Request Status**
   Search for Request
   View All My Requests

Tracking Number: [_____] [Search]
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 RadMD.com, allowing them to communicate with members and facilitate treatment.

# When to Contact Evolent

| | |
|---|---|
| **Initiating or checking the status of an authorization request** | ▪ Website, https://www.RadMD.com <br> ▪ Toll-free number: 1-866-512-5146 <br> ▪ Interactive Voice Response (IVR) System |
| **Initiating a Peer-to-Peer Consultation** | ▪ Call: 1-866-512-5146 |
| **Provider Service Line** | ▪ RadMDSupport@evolent.com <br> ▪ Call 1-800-327-0641 |
| **Provider Education requests or questions specific to Evolent** | ▪ Charmaine Everett <br> Senior Manager, Provider Relations <br> 410-953-2615 <br> CEverett@Evolent.com |

# 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 Wellcare of Delaware 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  Wellcare of Delaware and Evolent.*

# Thanks!