Wellcare Georgia Interventional Pain Management (IPM)

Provider Training Presented by: Debbie Patterson Provider Relations Representative

Revised January 2024



National Imaging Associates, Inc. (NIA) 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



NIA Specialty Solutions

National Footprint / Medicaid Experience

National Footprint

- 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.
- 33.01M national lives –
 participating in an NIA Medical
 Specialty Solutions Program
 nationally.
- Diverse populations Medicaid, Exchanges, Medicare, Commercial, FEP, Provider Entities.





Medicaid/Medicare Expertise/Insights

- 55 Medicare plans/markets with NIA Medical Specialty Solutions in place.
- 2.89M Medicare lives in addition to 20M Medicaid and 2.89M 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



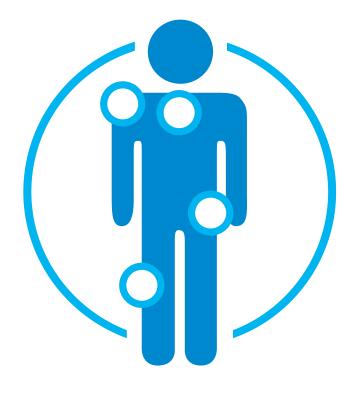
NIA's IPM Solution

Procedures Performed on or after July 1, 2023 Require Prior Authorization NIA's Call Center and RadMD will open July 1, 2023





- 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 (Effective 1/1/2024)





Excluded from the Program IPM Procedures Performed in the following Settings:

- Hospital Inpatient
- Emergency Room/Urgent Care Facility

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



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 RadMD.com.



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







Wellcare Georgia 2023 Utilization Review Matrix Outpatient Interventional Pain Management (IPM)

The matrix below contains all of the CPT 4 codes for which National Imaging Associates Inc. (NIA)¹ authorizes on behalf of Wellcare Georgia.

NIA 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, Intraoperatively, or as a Hospital Inpatient are not managed by NIA.

Procedure Name	Primary CPT Code	Allowable Billed Groupings
Sacroiliac Joint Injection	27096	27096, G0260
Cervical/Thoracic Interlaminar Epidural	62321	62320, 62321
Cervical/Thoracic Transforaminal Epidural	64479	64479, +64480
Lumbar/Sacral Interlaminar Epidural	62323	62322, 62323
Lumbar/Sacral Transforaminal Epidural	64483	62322, 62323
Cervical/Thoracic Facet Joint Block	64490	64490, + 64491, +64492, 0213T, +0214T, +0215T
Lumbar/Sacral Facet Joint Block	64493	64493, +64494, +64495, 0216T, +0217T, +0218T
Cervical/Thoracic Facet Joint	EVESS	EVESS TEVESV



Information for Authorization for IPM Injections

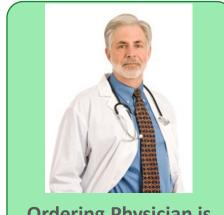


Special Information

- Every IPM procedure performed requires a prior authorization; NIA does not pre-approve 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 guidelines for potential restrictions)
- Add on codes do not require separate authorization and are to be used in conjunction with approved primary code for the service rendered.



Prior Authorization Process Overview



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

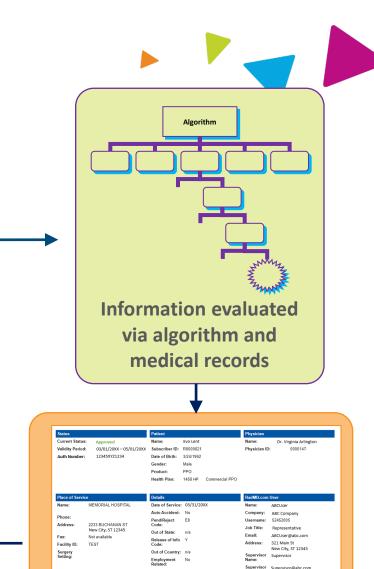


or by Phone





Rendering Provider
Performs Service and
ensures authorization was
obtained



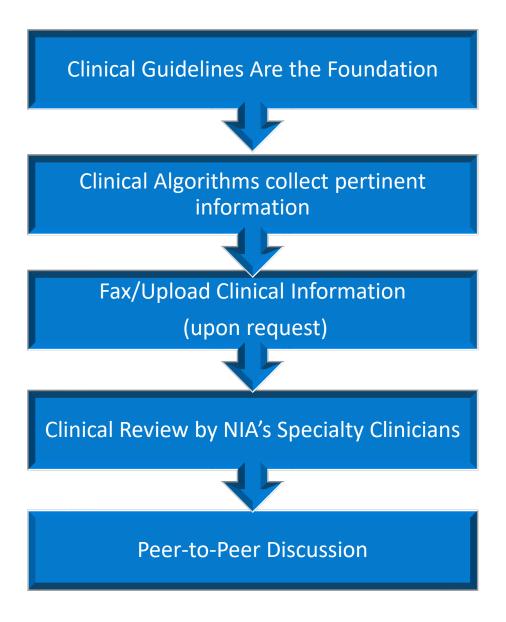


Service Authorized



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 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 focused on IPM.
- 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.



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).



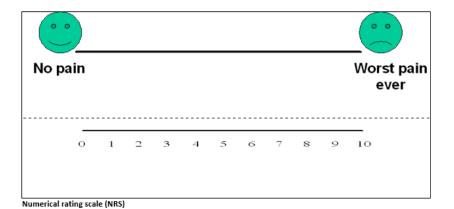
Follow Up To Prior Pain Management Procedures

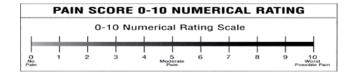
• For repeat treatments, follow up is required in regard to what procedure was completed, how much and for how long relief was obtained, active participation in ongoing conservative treatment, and to what level the pain has returned. A follow up office visit is not required; documentation of telephone encounters with the member are acceptable to satisfy this requirement.



Sample Pain Rating Scales

Visual analogue scale (VAS)





Faces rating scale (FRS)

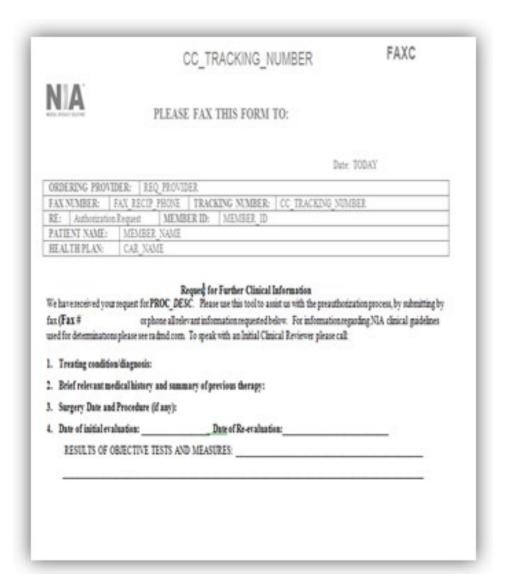
Wong Baker Face Scale





NIA 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.



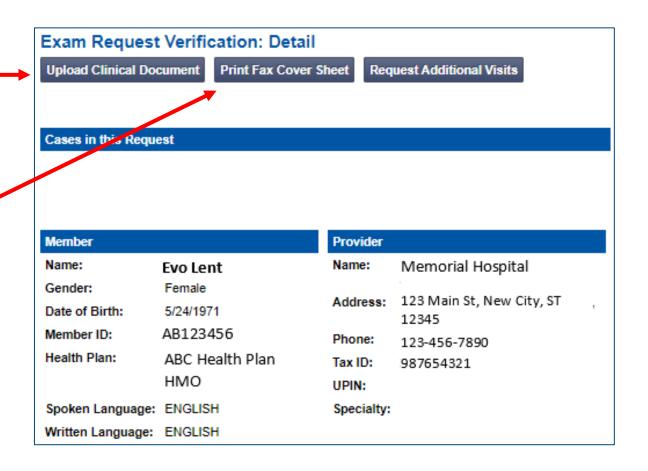
Failure to receive requested clinical information may result in non certification.



Submitting Additional Clinical Information



- Records may be submitted:
 - Upload to <u>https://www.RadMD.com</u>
 - Fax using that NIA coversheet
- Location of Fax Coversheets:
 - Can be printed from https://www.RadMD.com
 - Call 1-800-704-1484
- Use the case specific fax coversheets when faxing clinical information to NIA





Clinical Specialty Team: Focused on IPM





IPM Reviews

Initial clinical review performed by NIA IPM team nurses

The clinical specialties supporting our IPM program include anesthesiology and pain specialists



IPM Clinical Review Process



Physicians' Office Contacts NIA for Prior Authorization









NIA 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

System Evaluates Request Based on Information Entered by Physician & Physician Profile

Additional clinical information required



NIA Specialty Physician Reviewers

• NIA Physician approves case without peer-to-peer



Peer-to-peer outbound attempt made if case is not approvable

- NIA Physician approves case with peer-to-peer
- Ordering Physician withdraws case during peer-to-peer
- Physician denies case based on medical criteria

Key NIA
Differentiators

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 MSK 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 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 NIA call center at 1800-704-1484.
- Turnaround time is within 1 Business day not to exceed 72 Calendar Hours.



Notification of Determination



Authorization Notification

Validity Period - Authorizations are valid for:

IPM

- 60 days from date of service
- The date of service that is selected at the time of the prior authorization request, will be used to determine the validity period. If the date of service changes, please contact NIA to update.

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 instructions provided in their denial letter.
- 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 will review IPM requests



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 1-800-704-1484



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.
- IPM providers are typically both the ordering and the rendering provider.

Online Tools Accessed through https://www.RadMD.com:

- NIA's Clinical Guidelines
- Frequently Asked Questions
- Quick Reference Guides
- IPM 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 NIA-approved username and password.

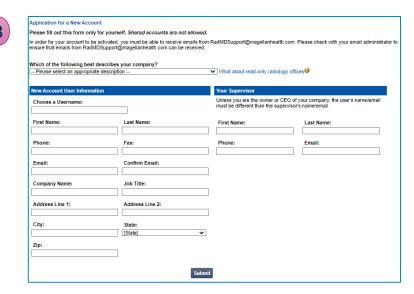
Offices that will be both ordering and rendering should request ordering provider access, this will allow your office to request authorizations on RadMD and see the status of those authorization requests.





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

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.)





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:

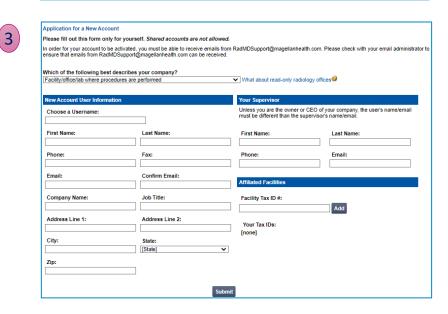
- 1. Click the "New User" button on the right side of the home page.
- 2. Select "Facility/office where procedures are performed"
- 3. Fill out the application and click the "Submit" button.
 - You must include your e-mail address in order for our Webmaster to respond to you with your NIA-approved username 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. The administrator will have the ability to approve rendering access for each employee. This will allow users to see all approved, pended and in review authorizations under your organization.



-- 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.)





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			

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 NIA



Providers:

Initiating or checking the status of an authorization request	 Website, https://www.RadMD.com Toll-free number 1-800-704-1484 - Interactive Voice Response (IVR) System 	
Initiating a Peer-to-Peer Consultation	Call 1-800-704-1484	
Provider Service Line	 RadMDSupport@magellanhealth.com Call 1-800-327-0641 	
Provider Education requests or questions specific to NIA	 Debbie Patterson Provider Relations Manager 1-800-450-7281 Ext. 74799 DLPatterson@magellanhealth.com 	



RadMD Demonstration





Confidentiality Statement



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Thanks

