







Wellcare Medicare of Mississippi Interventional Pain Management (IPM) Program

Provider Training Presented by:
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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

** 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."*

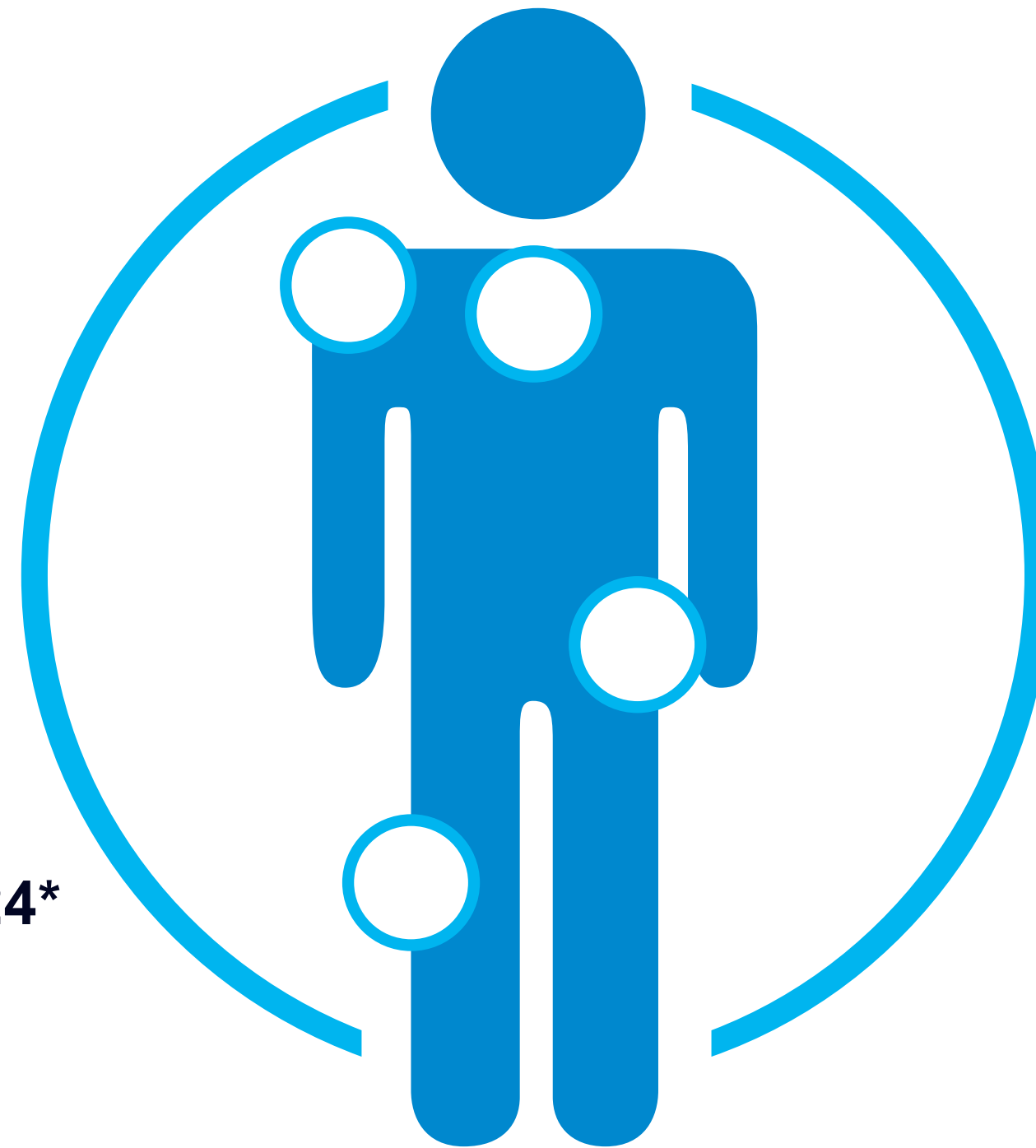
NIA's IPM Solution

Procedures Performed on or after February 1, 2024, Require Prior Authorization. NIA's Call Center and RadMD will open February 1, 2024.



IPM Procedures Performed Outpatient or In-Office

- Epidural Injections
- Facet Joint Injections or Blocks
- Facet Neurolysis
- Sacroiliac Joint Injections
- Spinal Cord Stimulators - ***New Service – 03.01.2024***
- Sympathetic Nerve Block




IPM Procedures Performed in these Settings are Excluded:

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


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

CPT Codes Requiring Prior Authorization (IPM)

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

 Includes CPT Codes and their Allowable Billable Groupings.

 Located on [RadMD.com](https://www.RadMD.com).

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



Wellcare Medicare of Mississippi Management Utilization Review Matrix 2024 Outpatient Interventional Pain Management (IPM)

The matrix below contains the CPT 4 codes for which National Imaging Associates (NIA)* authorizes on behalf of Wellcare Medicare of Mississippi.

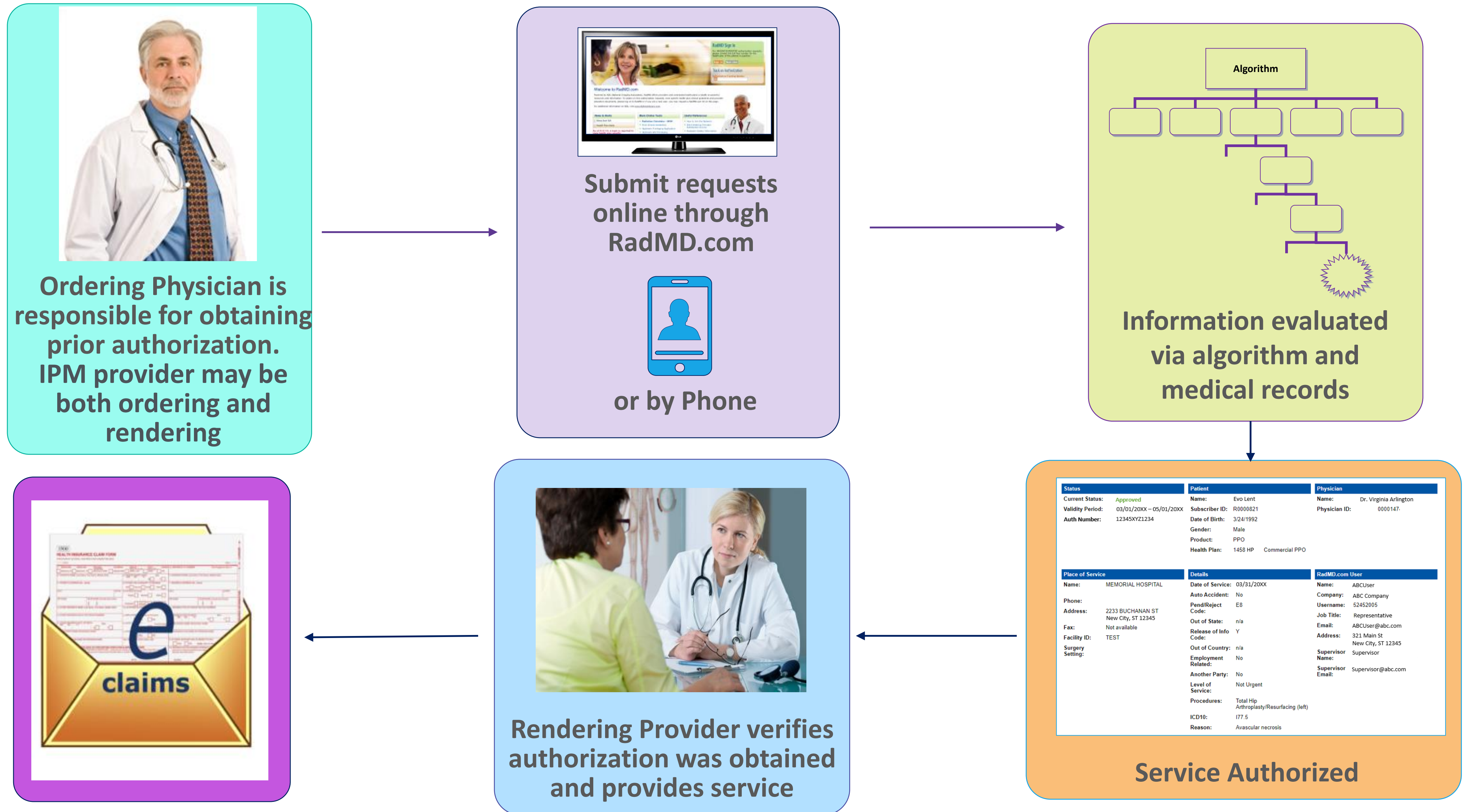
NIA issues authorizations based on the primary CPT code and its allowable billed groupings. A procedure can be billed under any one of the given CPT codes for that allowable billed grouping as long as a valid authorization number has been issued within the validity period.

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

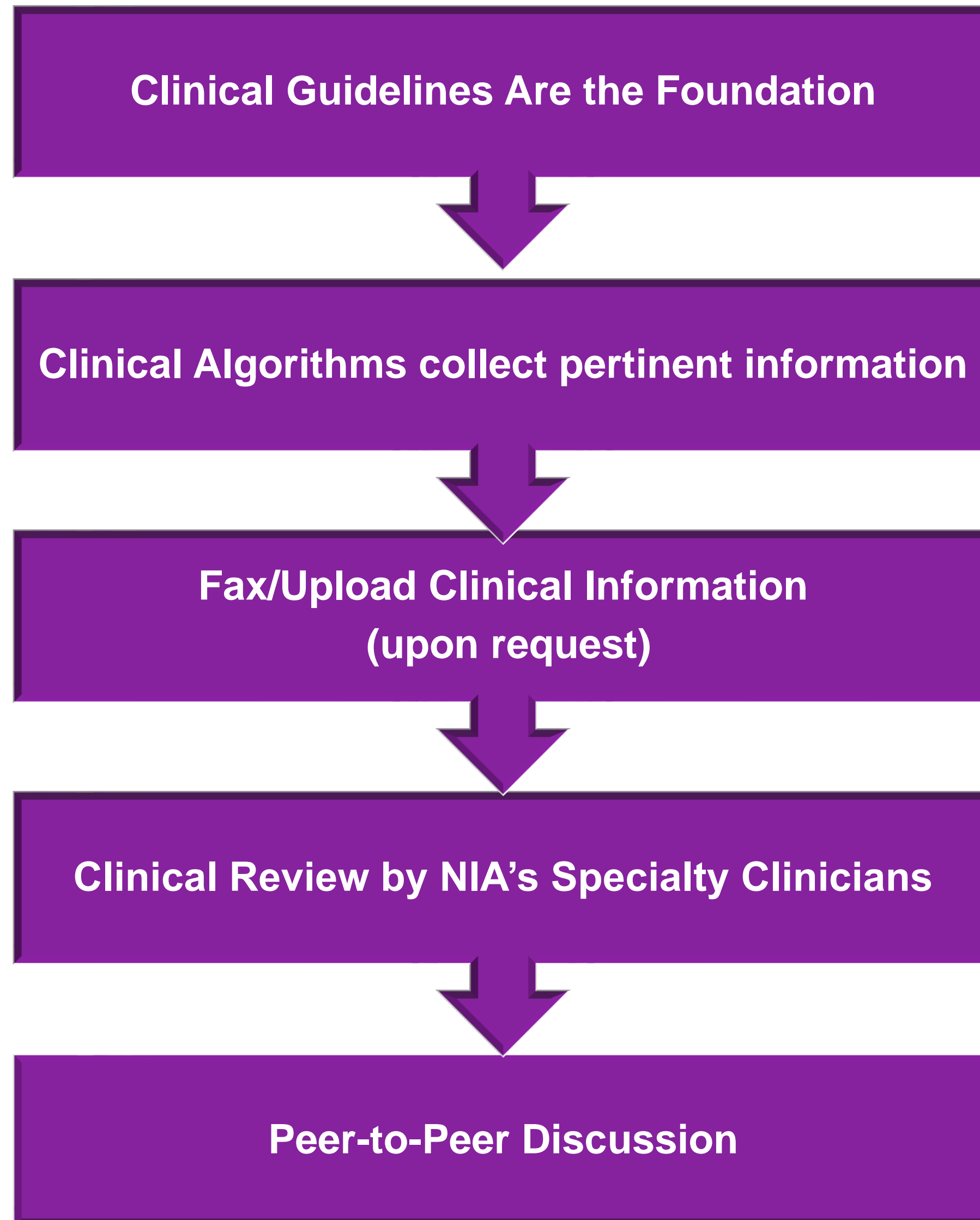
Procedure Name	Primary CPT Code	Allowable Billed Groupings
Cervical/Thoracic Interlaminar Epidural	62321	62320, 62321
Cervical/Thoracic Transforaminal Epidural	64479	64479, +64480
Lumbar/Sacral Interlaminar Epidural	62323	62322, 62323
Lumbar/Sacral Transforaminal Epidural	64483	64483, +64484
Cervical/Thoracic 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 Radiofrequency Neurolysis	64633	64633, +64634
Lumbar/Sacral Facet Joint Radiofrequency Neurolysis	64635	64635, +64636
Sacroiliac Joint Injection	27096	27096, G0260
Spinal Cord Stimulator Trial	63650	63650, 63655
Spinal Cord Stimulator	63655	63650, 63655, 63661, 63662, 63663, 63664, 63685, 63688
Sympathetic Nerve Block	64510	64510, 64517, 64520, 64530

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Prior Authorization Process Overview



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 Wellcare Medicare of Mississippi 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 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; NIA 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

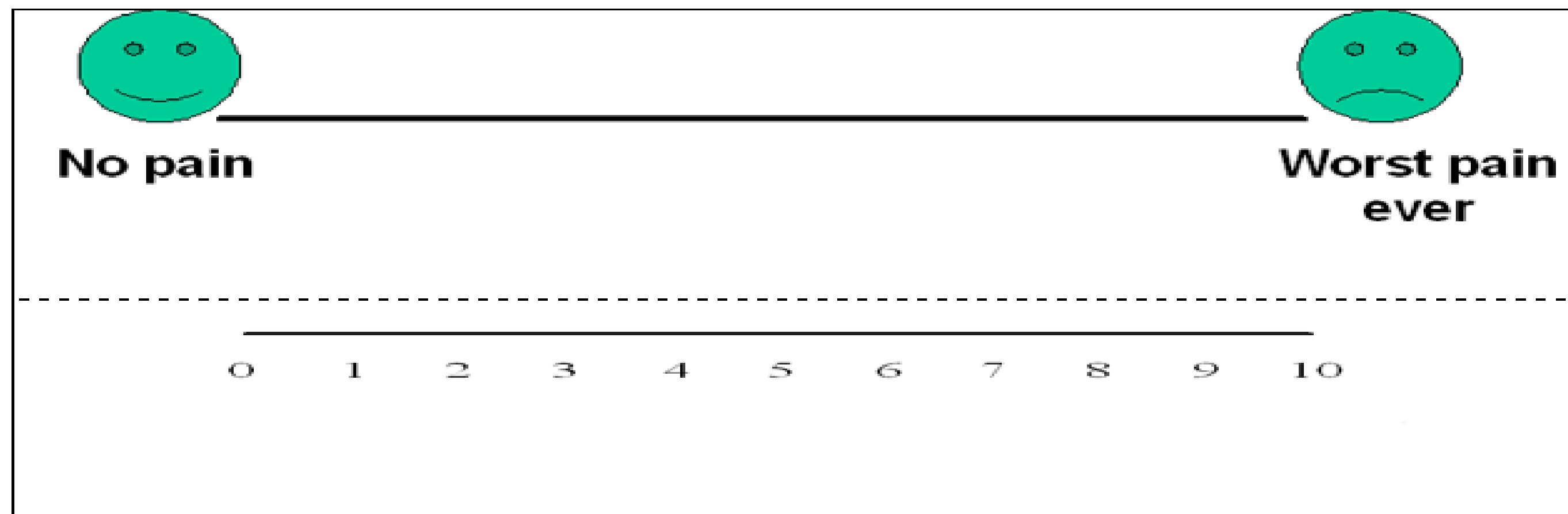
- A VAS score is an acceptable method to relay intensity of pain. However, a description of functional disability is also accepted as a means for measuring pain (ie - noting that the member is no longer able to perform work duties, daily care, etc).



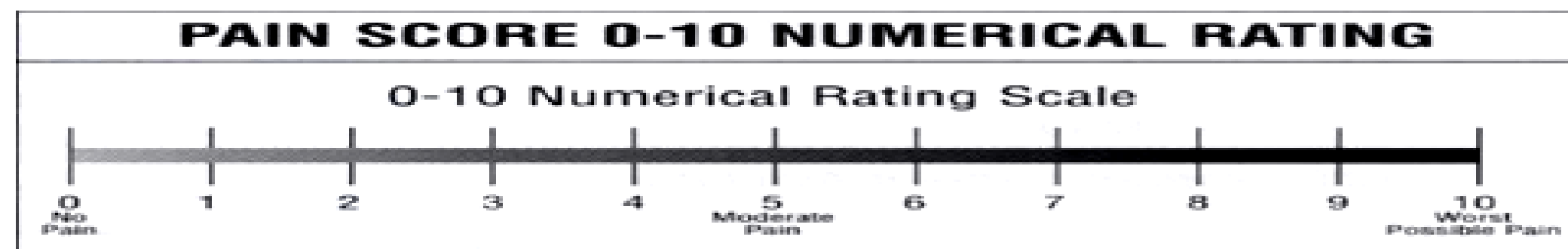
Follow Up To Prior Pain Management Procedures

- 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.

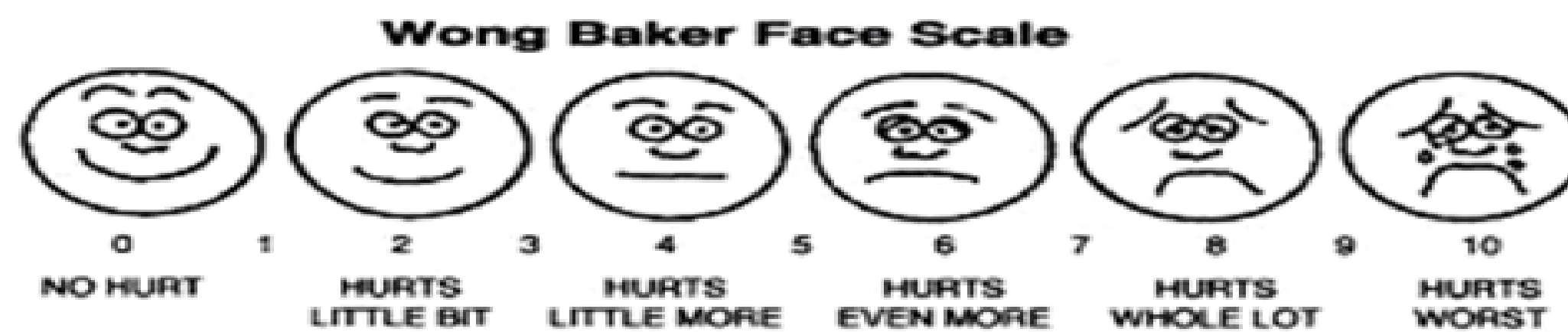
Visual Analogue Scale (VAS) and Faces Rating Scale (FRS)



Numerical rating scale (NRS)



Faces rating scale (FRS)



NIA to Physician: Request for Clinical Information

CC_TRACKING_NUMBER FAXC

NIA
NIA Health Plans

PLEASE FAX THIS FORM TO:

Date: TODAY

ORDERING PROVIDER:	REQ PROVIDER:		
FAX NUMBER:	FAX RECIP PHONE:	TRACKING NUMBER:	CC TRACKING NUMBER:
RE: Authorization Request	MEMBER ID:	MEMBER ID:	
PATIENT NAME:	MEMBER NAME:		
HEALTH PLAN:	CAR NAME:		

Request for Further Clinical Information

We have received your request for PROC_DESC. Please use this tool to assist us with the preauthorization process, by submitting by fax (FAX # _____) or phone all relevant information requested below. For information regarding NIA clinical guidelines used for determinations please see radind.com. To speak with an Initial Clinical Reviewer please call _____

1. Treating condition/diagnosis: _____
2. Brief relevant medical history and summary of previous therapy: _____
3. Surgery Date and Procedure (if any): _____
4. Date of initial evaluation: _____ Date of Re-evaluation: _____

RESULTS OF OBJECTIVE TESTS AND MEASURES: _____



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 NIA coversheet
- Location of Fax Coversheets:
 - Can be printed from <https://www.RadMD.com>
 - Call 1-800-424-5388
- Use the case specific fax coversheet when faxing clinical information to NIA

Exam Request Verification: Detail

Upload Clinical Document

Print Fax Cover Sheet

Request Additional Visits

Cases in this Request

Member

Name: Evo Lent
Gender: Female
Date of Birth: 5/24/1971
Member ID: AB123456
Health Plan: ABC Health Plan
HMO
Spoken Language: ENGLISH
Written Language: ENGLISH

Provider

Name: Memorial Hospital
Address: 123 Main St, New City, ST
12345
Phone: 123-456-7890
Tax ID: 987654321
UPIN:
Specialty:

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 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.*



✓
Key NIA Differentiators

Request Evaluated Based on Information Entered

- 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

Generally, the turnaround time for completion of these requests is within 2 to 3 business days upon receipt of sufficient clinical information

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 <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 1-800-424-5388.
- Turnaround time is within 1 business day not to exceed 72 calendar hours.

Notification of Determination

Authorization Notification

- Authorizations are valid for:

IPM

- 90 days from date of request.

Denial Notification

- Notifications include an explanation of services denied and the clinical rationale.
- 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 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 1-800-424-5388

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 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

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



RadMD New User Application Process - Ordering

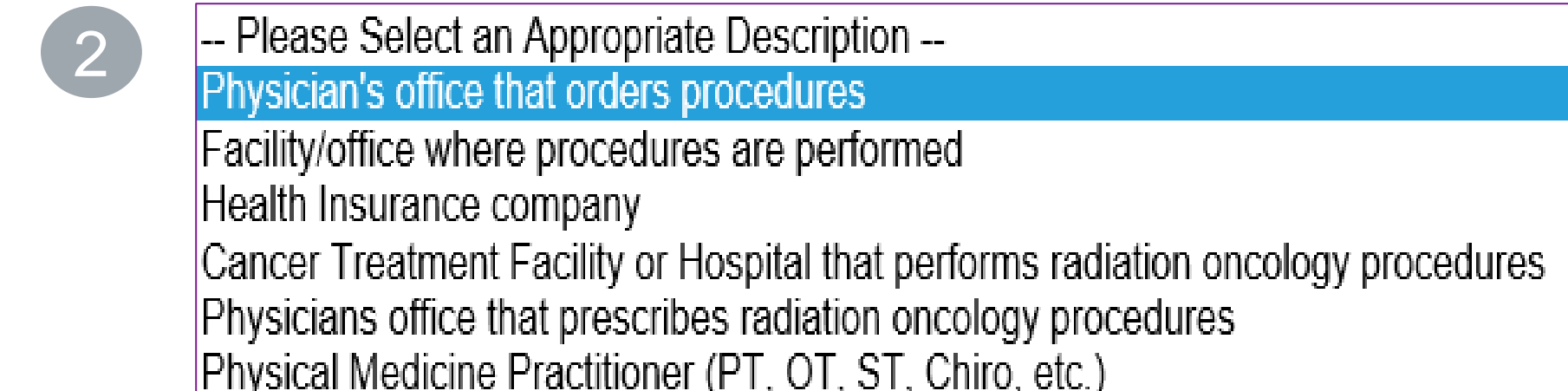
Users are required to have their own separate usernames and passwords due to HIPAA regulations.

STEPS:

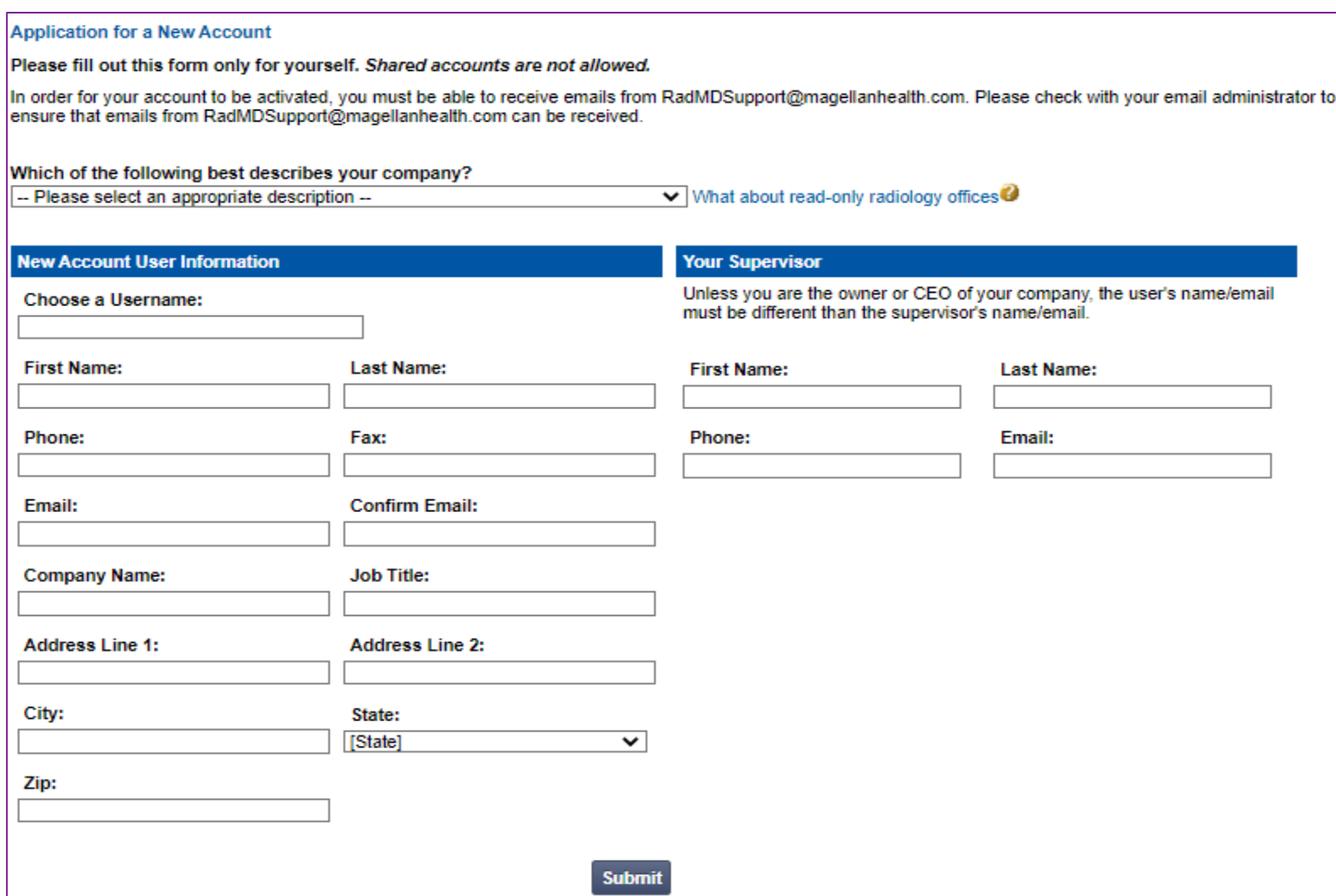
1. Click the “New User” button on the right side of the home page.
2. Select “Physician’s office that orders procedures”
3. Complete the application and click “Submit”.
4. Open email from NIA webmaster with new user password instructions

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.



3



The screenshot shows the "Application for a New Account" form. It includes a dropdown menu for company description, a "What about read-only radiology offices?" link, and two columns of input fields: "New Account User Information" and "Your Supervisor". The "New Account User Information" section includes fields for Username, First Name, Last Name, Phone, Fax, Email, Confirm Email, Company Name, Job Title, Address Line 1, Address Line 2, City, State, and Zip. The "Your Supervisor" section includes fields for First Name, Last Name, Phone, and Email. A "Submit" button is at the bottom right.

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 NIA webmaster with new user password instructions.

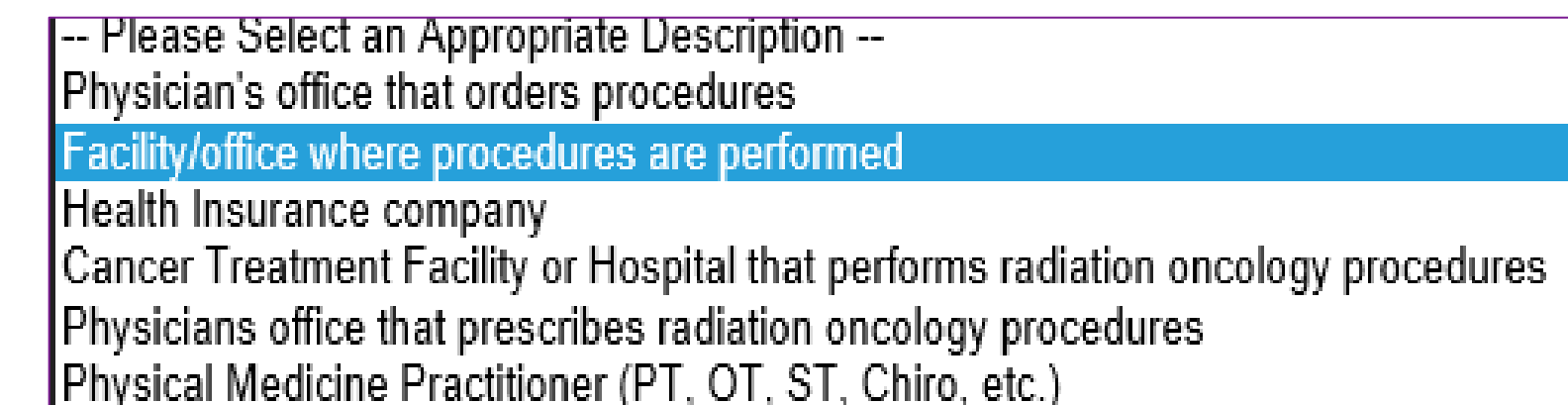
NOTE: On subsequent visits to RadMD, click the “Sign In” button to proceed.

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



2



3

The screenshot shows the "Application for a New Account" form. It includes a dropdown menu for "Which of the following best describes your company?" with "Facility/office/lab where procedures are performed" selected. The form is divided into several sections: "New Account User Information" (with fields for Username, First Name, Last Name, Phone, Fax, Email, Confirm Email, Company Name, Job Title, Address Line 1, Address Line 2, City, State, and Zip), "Your Supervisor" (with fields for First Name, Last Name, Phone, and Email), and "Affiliated Facilities" (with fields for Facility Tax ID # and Your Tax IDs). A "Submit" button is at the bottom.

Shared Access

NIA offers a **Shared Access** feature on our [RadMD.com](https://www.radmd.com) website. Shared Access allows ordering providers to view authorization requests initiated by other RadMD users within their practice.

The screenshot shows the RadMD.com website interface. At the top right, there are links for "Provider Resources" and "User" with a dropdown arrow. The main content area is divided into two columns. The left column has a "Request" section with links for "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", and "Genetic Testing". The right column has a "Resources and Tools" section with links for "Shared Access", "Clinical Guidelines", and "Request access to Tax ID", and a "News and Updates" section. Below these sections, there are two search forms: "Login As Username:" with a text input field and a "Login" button, and "Tracking Number:" with a text input field, a "Search" button, and a link for "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](https://www.radmd.com), allowing them to communicate with members and facilitate treatment.

When to Contact NIA

<p>Initiating or checking the status of an authorization request</p>	<ul style="list-style-type: none">■ Website, https://www.RadMD.com■ Toll-free numbers: 1-800-424-5388■ Interactive Voice Response (IVR) System
<p>Initiating a Peer-to-Peer Consultation</p>	<ul style="list-style-type: none">■ Call: 1-800-424-5388
<p>Provider Service Line</p>	<ul style="list-style-type: none">■ RadMDSupport@Evolent.com■ Call 1-800-327-0641
<p>Provider Education requests or questions specific to NIA</p>	<ul style="list-style-type: none">■ Priscilla Singleton Manager, Provider Relations 314-387-5023 psingleton@evolent.com

RadMD Demonstration

Confidentiality Statement

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Thank You!

