

## Evolent (Formerly National Imaging Associates, Inc.) and Blue Cross and Blue Shield of Nebraska (BCBSNE) Interventional Pain Management Program Frequently Asked Questions

Question	Answer
<b>GENERAL</b>	
<p><b>Why did BCBSNE implement a spine management program focused on interventional pain management procedures?</b></p>	<p>BCBSNE implemented this program to improve quality and manage the utilization of non-emergent spine care, including interventional pain management (IPM) procedures for our members. Evolent is the vendor manager for BCBSNE’s advanced imaging program and these new spine modalities are an extension of that management program.</p> <p>Interventional pain procedures include:</p> <ul style="list-style-type: none"> <li>• Spinal epidural injections</li> <li>• Paravertebral facet joint injections or blocks</li> <li>• Paravertebral facet joint denervation (radiofrequency neurolysis)</li> </ul>
<p><b>Why did BCBSNE select Evolent?</b></p>	<p>An affiliate of Evolent Health, Evolent was selected to partner with us because of its clinically driven program designed to effectively manage the quality, patient safety and ensure appropriate utilization of resources for BCBSNE members.</p>
<p><b>Which BCBSNE members are covered under this relationship and what networks are used?</b></p>	<p>Effective <b>Sept. 1, 2015</b>, Evolent began managing the prior authorization process for non-emergent, outpatient interventional pain management spine procedures through BCBSNE’s provider relationships.</p> <p>This program applies to all BCBSNE members, excluding those covered by the following groups or products:</p> <ul style="list-style-type: none"> <li>• Federal Employee Program <ul style="list-style-type: none"> <li>○ Basic plan with no out-of-network coverage</li> <li>○ Standard plan with out-of-network coverage</li> </ul> </li> <li>• Medicare Supplemental and Medicare Primary</li> <li>• Nebraska Department of Correctional Services</li> <li>• Nebraska Department of Health and Human Services</li> <li>• University of Nebraska student athletes</li> </ul>

<b>PRIOR AUTHORIZATION</b>	
<b>What spine management services require a provider to obtain a prior authorization?</b>	<p>The following procedures require prior authorization through Evolent:</p> <ul style="list-style-type: none"> <li>• Spinal epidural injections</li> <li>• Paravertebral facet joint injections or blocks</li> <li>• Paravertebral facet joint denervation (radiofrequency neurolysis)</li> </ul>
<b>When is prior authorization required?</b>	<p>Prior authorization is required for outpatient, non-emergent interventional pain procedures. Ordering providers must obtain prior authorization of these procedures prior to the service being performed.</p> <p><b>Note:</b> Only outpatient procedures are within the program scope. All interventional pain management procedures performed in the emergency room or as part of inpatient care do not require prior authorization.</p>
<b>Who orders the spine interventional pain management procedures?</b>	<p>Interventional pain procedures requiring medical necessity review are usually ordered by one of the following specialties:</p> <ul style="list-style-type: none"> <li>• Anesthesiologists</li> <li>• Neurologists</li> <li>• Pain specialists</li> <li>• Orthopedic spine surgeons</li> <li>• Neurosurgeon</li> <li>• Other physicians with appropriate pain procedure training and certification</li> </ul>
<b>Are inpatient IPM procedures included in this program?</b>	<p>Inpatient interventional pain management procedures are not included in this program.</p>
<b>How does the ordering provider obtain a prior authorization from Evolent for an outpatient interventional pain management procedure?</b>	<p>Providers are able to request prior authorization via the Evolent website at <b>www.RadMD.com</b> or by calling the Evolent toll-free number <b>(866) 972-9642</b>.</p>
<b>What information does Evolent require in order to receive prior authorization?</b>	<p>To expedite the process, please have the following information ready before logging on to the website or calling the Evolent call center staff:</p> <p><b>Interventional pain management procedures:</b></p> <ul style="list-style-type: none"> <li>• Name and office phone number of ordering physician*</li> </ul>

	<ul style="list-style-type: none"> <li>• Member name and ID number*</li> <li>• Requested procedure*</li> <li>• Name of provider office or facility where the service will be performed*</li> <li>• Anticipated date of service*</li> <li>• Details justifying the pain procedure*: <ul style="list-style-type: none"> <li>○ Date of onset of pain or exacerbation</li> <li>○ Physician exam findings and patient symptoms (including findings applicable to the requested services)</li> <li>○ Clinical diagnosis</li> <li>○ Date and results of prior interventional pain management procedures.</li> <li>○ Diagnostic imaging results, where available. Conservative treatment modalities completed, duration, and results (e.g., physical therapy, chiropractic or osteopathic manipulation, hot pads, massage, ice packs and medication)</li> </ul> </li> </ul> <p style="text-align: right;"><b>(continued)</b></p> <p>Please be prepared to fax the following information, if requested:</p> <ul style="list-style-type: none"> <li>• Clinical notes outlining onset of pain, conservative care modalities, outcomes and physical exam findings</li> <li>• Date and results of prior interventional pain management procedures</li> <li>• Effectiveness of prior procedures on reducing pain</li> <li>• Diagnostic imaging results</li> <li>• Specialist reports/evaluation</li> </ul> <p style="text-align: right;"><i>*denotes required information</i></p>
<p><b>Can a provider request more than one procedure at a time for a member (e.g., a series of epidural injections)?</b></p>	<p>No. Evolent requires prior authorization for each pain procedure being requested and does not authorize more than one procedure at a time.</p>
<p><b>What kind of response time can ordering providers expect for prior authorization?</b></p>	<p>The best way to maximize the efficiency and turnaround time of an authorization request is by going online to <b>www.RadMD.com</b> or by calling <b>(866) 972-9642</b> and have the following case information ready:</p> <ul style="list-style-type: none"> <li>• The patient’s history and diagnosis</li> <li>• Onset of pain</li> <li>• Findings on physical examination</li> </ul>

	<ul style="list-style-type: none"> <li>• Response and type of non-operative management the patient has undergone</li> <li>• History of medical or surgical treatment</li> <li>• Rationale for the procedure</li> </ul> <p>Generally, a determination is made within two business days after receipt of the request with full clinical documentation. In certain cases, the review process can take longer if additional clinical information is required to make a determination.</p>
<b>What does the Evolent authorization number look like?</b>	The Evolent authorization number consists of eight or nine alpha-numeric characters. In some cases, the ordering provider may instead receive an Evolent tracking number (not the same as an authorization number) if the provider's authorization request is not approved at the time of initial contact. Providers are able to use either number to track the status of their request online or through an interactive voice response telephone system.
<b>If requesting an authorization through RadMD and the request pends, what happens next?</b>	You will receive a tracking number and Evolent will contact you to complete the process.
<b>Can RadMD be used to request retrospective or expedited authorization requests?</b>	Retrospective requests are not allowed. Expedited requests should be called into Evolent Evolent's call center at <b>(866) 972-9642</b> .
<b>How long is the prior authorization number valid?</b>	The authorization number is valid for 60 days from the date service is provided, or from date of request.
<b>If a provider obtains a prior authorization number, does that guarantee payment?</b>	An authorization number is not a guarantee of payment. Authorizations are based on medical necessity and are contingent upon eligibility and benefits. Benefits may be subject to limitations and/or qualifications and will be determined when the claim is received for processing.
<b>Does Evolent allow retro-authorizations?</b>	It is important that key physicians and office staff be educated on the prior authorization requirements. Claims for interventional pain management procedures, as outlined above, that have <u>not</u> been properly authorized will <u>not</u> be reimbursed. Physicians administering these procedures <u>should not</u> schedule or perform procedures without prior authorization

<p><b>Can a provider verify an authorization number online?</b></p>	<p>Yes. Providers can check the status of a member's authorization quickly and easily by going to the Evolent website at <b>www.RadMD.com</b>.</p>
<p><b>Is the Evolent authorization number be displayed on the BCBSNE website?</b></p>	<p>No. The authorization number is not displayed on BCBSNE's website.</p>
<p><b>What if I disagree with Evolent's determination?</b></p>	<p>In the event of a prior authorization or claims payment denial, providers may appeal the decision through BCBSNE. Providers should follow the instructions on their non-authorization letter or explanation of payment notification.</p>
<p><b>SCHEDULING PROCEDURES</b></p>	
<p><b>Does Evolent make a final determination based on the anticipated date of service?</b></p>	<p>Evolent does not guarantee final determination of the request by the anticipated date of service.</p> <p>The anticipated date of service (provided during the request for authorization) is used to determine timing between procedures.</p> <p>Please be advised that Evolent needs two business days after the receipt of clinical information to review and render a decision on a request. Please do not schedule or perform the procedure until you have an approved authorization.</p>
<p><b>MEDICAL PROVIDERS</b></p>	
<p><b>Which medical providers are affected by the spine management program?</b></p>	<p>The spine management program applies to specialized providers who perform IPM spine procedures in an outpatient setting.</p> <p>BCBSNE providers need to request a prior authorization from Evolent in order to bill the service. Providers who perform IPM procedures are generally located at:</p> <ul style="list-style-type: none"> <li>• Ambulatory surgical centers</li> <li>• Hospital outpatient facilities</li> <li>• Provider offices</li> </ul>
<p><b>CLAIMS</b></p>	
<p><b>Where do providers send their claims for outpatient, non-emergent pain management services?</b></p>	<p>BCBSNE network providers should continue to send claims directly to BCBSNE.</p> <p>Providers are encouraged to use electronic data interchange processes for claims submission.</p>

<b>How can providers check claims status?</b>	Providers/surgeons should continue to check claims status by calling <b>(800) 284-4640</b> or logging into <a href="http://www.navinet.net">www.navinet.net</a>
<b>Who should a provider contact if they want to appeal a prior authorization or claims payment denial?</b>	Providers should follow the appeal instructions given on their non-authorization letter or explanation of benefits notification.
<b>MISCELLANEOUS</b>	
<b>How is medical necessity defined?</b>	<p>Evolut defines medical necessity as services that:</p> <ul style="list-style-type: none"> <li>• Meet generally accepted standards of medical practice; are appropriate for the symptoms, consistent with diagnosis, and otherwise in accordance with sufficient evidence and professionally recognized standards</li> <li>• Are appropriate to the illness or injury for which it is performed as to type of service and expected outcome</li> <li>• Are appropriate to the intensity of service and level of setting</li> <li>• Provide unique, essential, and appropriate information when used for diagnostic purposes</li> <li>• Are the lowest cost alternative that effectively addresses and treats the medical problem; and rendered for the treatment or diagnosis of an injury or illness</li> <li>• Are not furnished primarily for the convenience of the member, the attending physician, or other provider</li> </ul>
<b>Where can a provider find Evolut's guidelines for clinical use of pain management procedures?</b>	The guidelines for Evolut's IPM procedures can be found online at <a href="http://www.RadMD.com">www.RadMD.com</a> . They are presented in a PDF file format that can easily be printed for future reference. Evolut's clinical guidelines have been developed from practice experiences, literature reviews, specialty criteria sets and empirical data.
<b>What does the member ID card look like? Does the ID card have both Evolut and BCBSNE information on it? Or is there two cards?</b>	The BCBSNE member ID card does not contain any Evolut identifying information on it.
<b>CONTACT INFORMATION</b>	
<b>Who can a provider contact at Evolut for more information?</b>	Providers can contact Andrew Dietz, Senior Provider Relations Manager, at 407-967-4636 or <a href="mailto:adietz@evolut.com">adietz@evolut.com</a> .

