

# Cardiac Solution Program

## Frequently Asked Questions

Updated April 2024

### Why do some cardiac-related procedures need prior authorization?

- Prior authorization is required to minimize radiation exposure and promote the most appropriate procedure for quality care. It will also help contain costs. Health plans spend millions annually in unnecessary medical care. Trends in imaging and imaging-related areas are higher in Hawaii than national benchmarks. Prior authorization will help prevent unnecessary testing.

### How does the program work?

- The Cardiac Solution Program assesses imaging technologies that are used to diagnose and monitor patients with cardiac-related conditions in nonemergent cases. The program takes a comprehensive approach to determine if a procedure is the proper step in diagnosing cardiac-related conditions or if another procedure is more appropriate.

### What procedures are included in the program?

- Prior authorization through Evolent is required for the following nonemergent cardiac procedures:
  - Computed tomography (CT), computed tomography angiography (CTA).
  - EBCT.
  - Myocardial perfusion imaging (MPI).
  - Stress echocardiography.
  - Implantable cardiac devices.
  - Left heart cardiac catheterization.

### What do ordering providers need to do?

- Providers should request prior authorization online at RadMD.com or by calling 1-866-306-9729.

### Who will administer clinical oversight of the cardiac program?

- Board-certified cardiologists work with community-based physicians to develop evidence-based clinical guidelines and algorithms to determine the best options. These cardiologists will consult with referring physicians to apply these guidelines and algorithms to each patient's symptoms and medical history. Determining the most-appropriate clinical imaging protocol for each patient will help reduce duplicate testing, minimize patient radiation exposure, avoid indication drift, shorten diagnosis time, and improve the overall health care experience.

## Can I request prior authorizations via the Internet?

- Yes, RadMD.com is the most efficient way to request prior authorization. You can also call 1-866-306-9729. For system technical assistance, call 1-800-327-0641.

## What are clinically urgent cardiac procedures?

- Clinically urgent requests are intended to evaluate a condition that requires prompt medical intervention to prevent additional consequences to the patient's health and well-being. Conditions that require urgent intervention include those that:
  - Cannot be postponed for 24 hours without risking progression to an emergent condition.
  - Cannot be postponed for 24 hours without risking loss of life or limb, or risk of permanent disability.
  - Would subject the patient to severe pain that cannot be adequately managed without the care or treatment that's the subject of the request, in the opinion of a physician with knowledge of the patient's medical condition.
- Clinically urgent authorizations are valid for three days from the date of the request.

## How do I obtain a clinically urgent prior authorization?

There are two ways:

1. RadMD.com:
  - Enter patient demographics and answer a few clinical questions.
  - Select the clinically urgent indication.
  - Receive prior authorization number.
2. Call Evolent at 1-866-306-9729.
  - Call center availability:
    - Monday-Friday, 6 a.m.-6 p.m. Hawaii time.
  - Answer a few demographic and clinical questions.
  - State that the case is clinically urgent.
  - Attest that the case meets clinically urgent criteria.
  - Receive prior authorization number.

## Is prior authorization required if HMSA is secondary to another carrier or coverage?

- Yes, prior authorization is required if HMSA is the secondary plan to another non-HMSA plan.
- However, if the patient has more than one HMSA plan, then only ONE prior authorization is needed under their primary plan.

### Exception:

- If Medicare Part B is the primary insurer, NO prior authorization is needed.

## How long is a prior authorization valid?

- Prior authorizations are valid for 90 days from the date of service. If date of service isn't given, the authorizations are valid 90 days from the date of request.
- Clinically urgent authorizations are valid for three days from the date of the request.

**Is a prior authorization needed for generator/battery replacements?**

- No, prior authorization isn't needed for generator/battery replacements. However, upgrades such as single chamber generators to dual chamber require prior authorization.

**Do right heart catheterizations require a prior authorization?**

- No, right heart catheterizations don't require prior authorization. However, left heart catheterizations do.

**Key Provision**

- Imaging procedures performed as part of an admission to an emergency room, inpatient or observation setting, or surgery center don't require prior authorization.