AmeriHealth Caritas VIP Care
Advanced and Cardiac Imaging Program
Louisiana

Provider Training

Evolent Program Agenda

Our Advanced and Cardiac Imaging Program

- ✓ Authorization Process

  - Other Program Components

- ✓ Provider Tools and Contact Information

- ✓ RadMD Demo

- ✓ Questions and Answers

Evolent

Connecting Our Brands is About Connecting Care

Our Motivation

Patients

- Better Treatment
- Better Health

Providers

- Less Friction
- Appropriate Care

Medical Specialty Solutions Prior Authorization Program

THE PROGRAM

- AmeriHealth Caritas Louisiana is enhancing the current authorization program through Evolent for the management of advanced and cardiac imaging services.
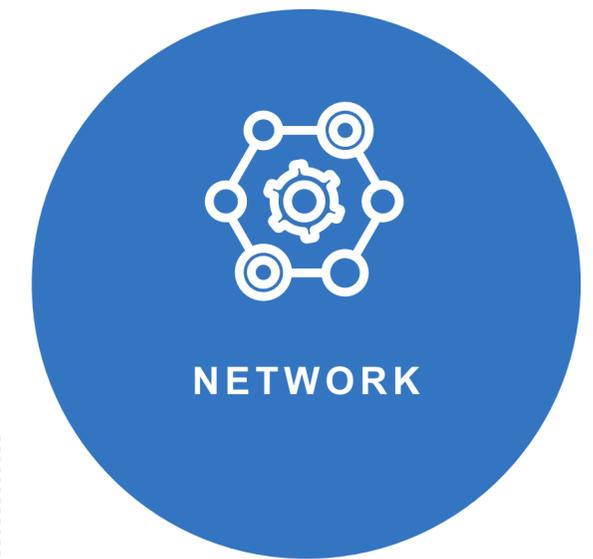
IMPORTANT DATES

- Program to include AmeriHealth Caritas VIP Care enrollees: March 1, 2026

SETTINGS

- Freestanding diagnostic facilities
- Hospital outpatient diagnostic facilities
- Provider offices

MEMBERSHIP INCLUDED

- Medicare (D-SNP)

NETWORK

- Evolent will manage services through AmeriHealth Caritas VIP Care's contractual relationships.

Advanced and Cardiac Imaging Program

Evolent is managing authorizations for the following services being performed in outpatient settings: POS 11, POS 19, POS 22 and POS 24.

- CT/CTA
- MRI/MRA
- PET Scan
- MUGA Scan
- Nuclear Stress Test
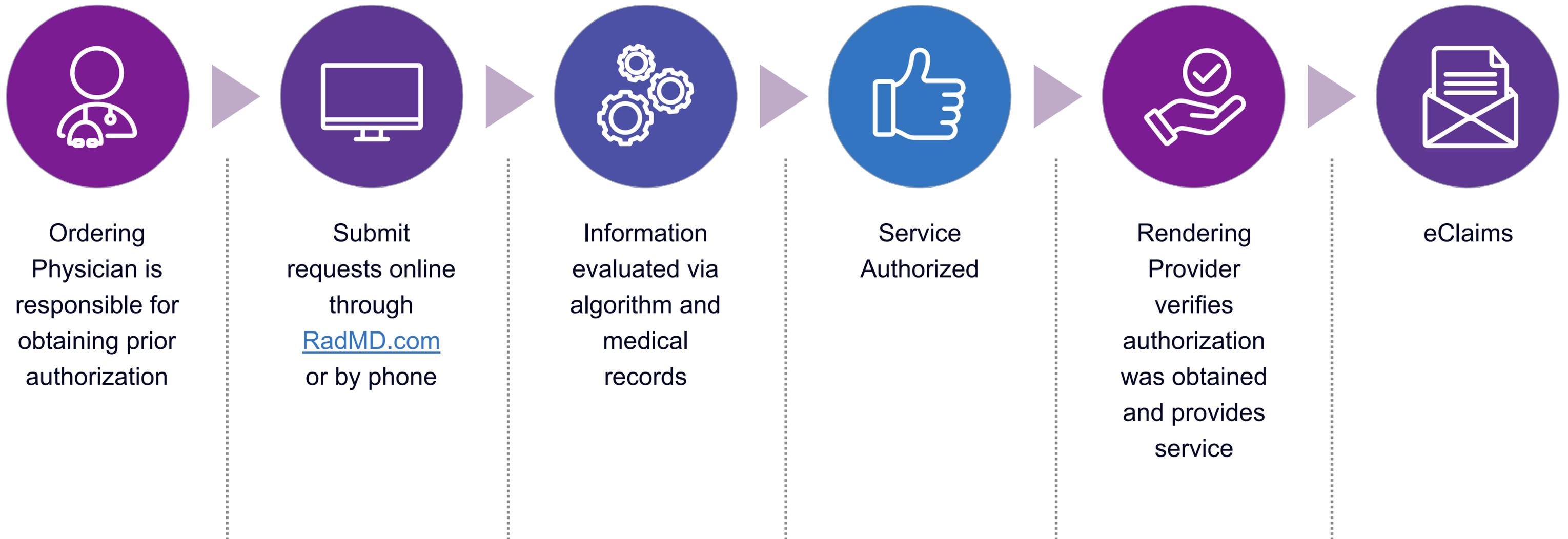
Site of Service Exclusions:

- Hospital Inpatient
- Observation (following ER admit)
- Emergency Room
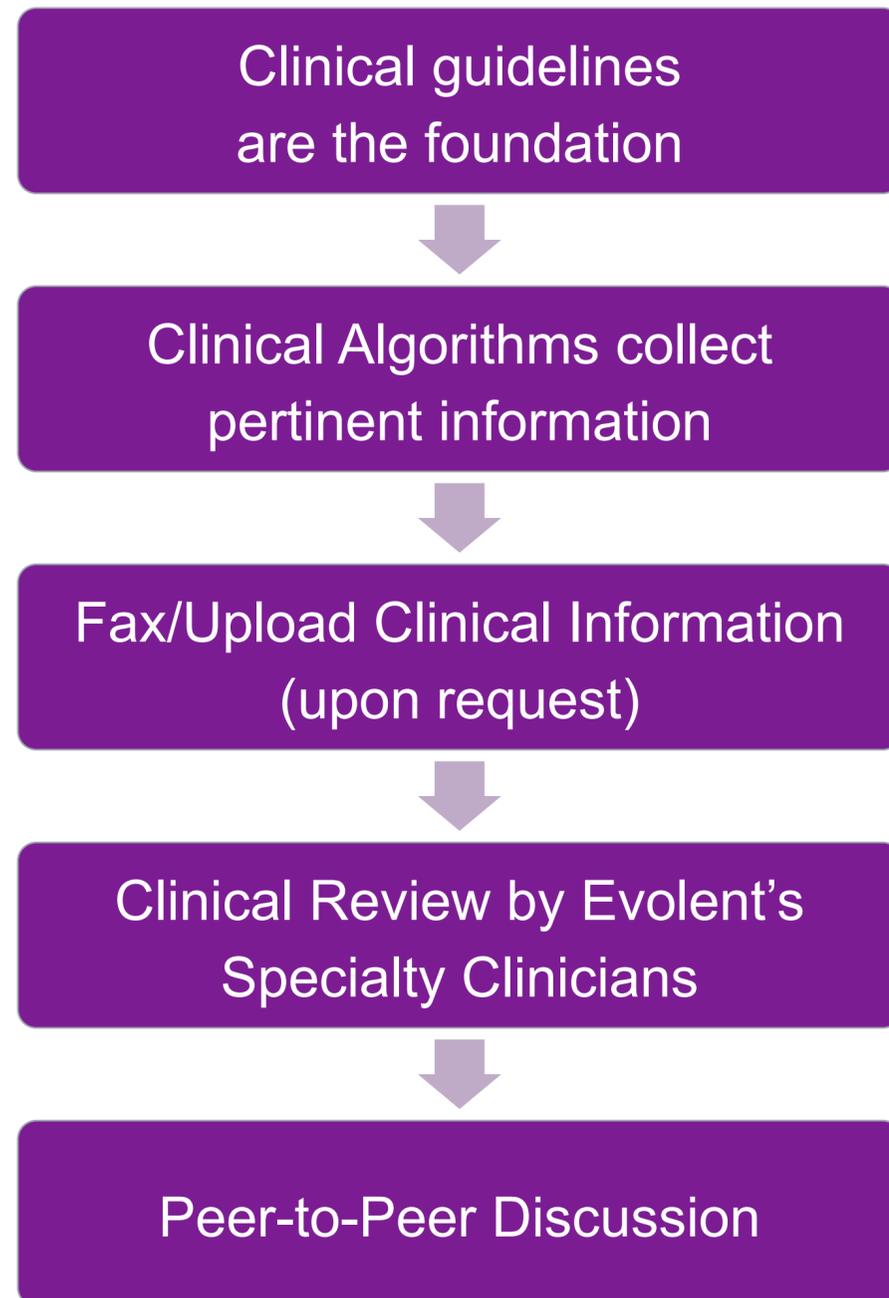- Urgent Care

CPT Codes Requiring Prior Authorization

✓ Review the Utilization Review Matrix to determine CPT codes managed by Evolent.

✓ Includes CPT Codes and their Allowable Billable Groupings.

✓ Located on RadMD.com

✓ Defer to AmeriHealth Caritas VIP Care's Policies for Procedures not on the Utilization Review Matrix.

Advanced and Cardiac Imaging Procedures		
Procedure Name	Primary CPT Code	Allowable Billed Groupings
MRI Temporomandibular Joint	70336	70336
CT Head/Brain	70450	70450, 70460, 70470, +0722T
CT Orbit	70480	70480, 70481, 70482, +0722T
CT Maxillofacial/Sinus	70486	70486, 70487, 70488, 76380, +0722T
CT Soft Tissue Neck	70490	70490, 70491, 70492, +0722T

Prior Authorization Process Overview

Ordering Physician is responsible for obtaining prior authorization

Submit requests online through RadMD.com or by phone

Information evaluated via algorithm and medical records

Service Authorized

Rendering Provider verifies authorization was obtained and provides service

eClaims

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 AmeriHealth Caritas VIP Care 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 specialized clinical teams.

- 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 Advanced and Cardiac Imaging

Special Information

- Ordering physician information, member information, rendering provider information, and requested examination.

- Clinical information that will justify examination, symptoms and their duration, and physical exam findings.

- Preliminary procedures already completed (i.e., x-rays, CT's, lab work, ultrasound reports, scoped procedures, referrals to specialist, specialist evaluation.

- Reason the study is being requested (i.e., further evaluation, rule out a disorder).

- Refer to Prior Authorization Checklists on RadMD for more specific information.

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.

CC_TRACKING_NUMBER   FAXC

ABDOMEN - PELVIS CT
PLEASE FAX THIS FORM TO: 1-800-784-6864
Date: TODAY

ORDERING PHYSICIAN:	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:	HEALTH_PLAN_DESC		

We have received your request for Abdomen - Pelvis CT. As we are unable to approve based on the information provided to date, please respond to this fax as soon as possible.

Study Requested was: Abdomen - Pelvis CT
For documentation ALWAYS PROVIDE:

1. The most recent office visit note
2. Any office visit note since initial presentation of the complaint/problem requiring imaging
3. Any supporting documentation such as diagnostic or imaging reports that corroborate abnormalities or the requirement for follow-up imaging

Further specifics and examples are listed below:
FAX_QUESTIONS_ADDL
aalfaddlfaxquestions

a) Abdominal pain evaluation:
   Provide details regarding history of abdominal pain (history- onset, trauma mechanism, if relevant, effect on/change w/ bowel or urinary habits, relevant past medical history- bowel disease or surgery, etc; examination, including pelvic/rectal examinations; diagnostic work-up- submit reports demonstrating abnormalities; prior treatment/consultation, if any).

b) Abnormal finding on examination, imaging or laboratory test:
   Provide the office visit note(s) or lab/imaging report that documents the abnormality found and any needed explanation of the relevance to the request for abdomen/pelvis CT imaging

c) Suspicion of cancer:
   Provide the office visit/consultation notes indicating rationale for suspicion of cancer, along with relevant examination, diagnostic/imaging reports indicating the relevance of an imaging test in further evaluation of a possible malignancy

d) History of cancer:
   Provide the office visit note describing the current symptoms or issue and the history; report of the biopsy and/or relevant treatment reports that will document the cell type of the cancer and treatment to date.

e) Pre-operative evaluation:
   Provide the office visit note/consultation by the surgical specialist indicating the operation planned and indications. It is usually expected that planned pre-operative evaluation will be ordered by the surgeon in conjunction with surgical scheduling so that the two coincide within a four week/30 day period.

f) Post-operative evaluation:

CC_TRACKING_NUMBER

FAXC

Submitting Additional Clinical Information

✓ Records may be submitted:

- Upload to RadMD.com

- Fax using Evolent coversheet

✓ Location of Fax Coversheets:

- Can be printed from RadMD.com

- Call 1-866-272-4085

✓ 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

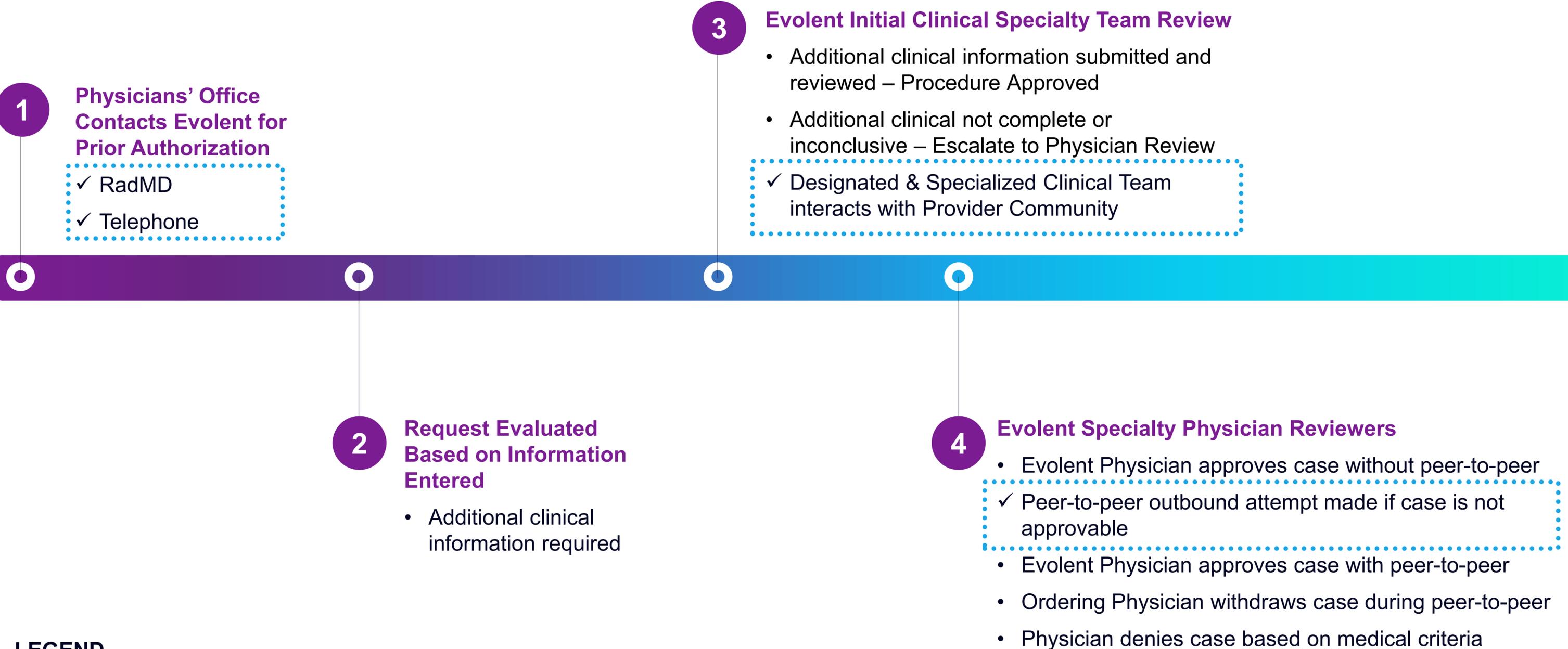| Member		Provider	
Name:	Evo Lent	Name:	Memorial Hospital
Gender:	Female		
Date of Birth:	5/24/1971	Address:	123 Main St, New City, ST 12345
Member ID:	AB123456	Phone:	123-456-7890
Health Plan:	ABC Health Plan HMO	Tax ID:	987654321
		UPIN:	
Spoken Language:	ENGLISH	Specialty:	
Written Language:	ENGLISH		

Clinical Specialty Team

Advanced and Cardiac Imaging Review

Clinical Specialization Pods Overseen by Medical Director

Physician Review Team consists of Physician Panel of Board-Certified Physician Specialists to meet State licensure requirements

Physician clinical reviewers conduct peer reviews on specialty products

Clinical Review Process

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

✓ RadMD

✓ Telephone

3 **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 Team interacts with Provider Community

2 **Request Evaluated Based on Information Entered**

- Additional clinical information required

4 **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

LEGEND

✓ Key Evolent differentiator

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 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 at 1.888.642.4812.

- Turnaround time is within 72 calendar hours.

Authorization Validity Period

- Authorizations are valid for :

  - 90 days from date of request or final determination

Denial Notification

- Notifications include an explanation of services denied and the clinical rationale.

- Once a denial determination has been made, it is considered final.

- Re-opens are allowed, prior to submitting a formal appeal, following an adverse determination.
  - Re-opens are accepted, in writing, within one year of the date of the denial.
  - Re-opens are accepted, in writing, at anytime to correct a clerical error.

- Peer-to-peer discussions are offered prior to the final denial decision for any request that does not meet medical necessity guidelines.

- In the event of a denial, providers are asked to follow the instructions provided in their denial letter.

Claims and Appeals

Claims Process:

- Providers should submit their claims to AmeriHealth Caritas VIP Care.

- Providers are strongly encouraged to use EDI claims submission.

- Check on claims status by logging on to AmeriHealth Caritas VIP website at: AmeriHealth Caritas VIP Care Louisiana - Medicare Plan

Appeals Process:

- In the event of a prior authorization or claims payment denial, providers may appeal the decision through AmeriHealth Caritas VIP Care.

- Providers should follow the instructions on their non-authorization letter or Explanation of Payment (EOP) notification.

Radiation Safety and Awareness

Studies suggest a significant increase in cancer in dose estimates in excess of 50 mSv.

- 1mSv = 4 months of natural exposure/50 chest x-rays

CT scans and nuclear studies are the largest contributors to increased medical radiation exposure.

According to the 2019 NCRP Report, a dramatic decrease in average radiation dose per person by as much as 15 – 20% has been demonstrated due to radiation safety and technological advances.

Evolent has developed a Radiation Awareness Program designed to create member and physician awareness of radiation concerns.

Provider Tools

- 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

RadMD.com

Available 24/7

1.888.642.4812

Available Monday - Friday

7:00 AM – 7:00 PM CT

Evolent Website

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.

Online Tools Available on RadMD

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

RadMD New User Application Process - Ordering

STEPS

1. Click the **"New User"** button on the right side of the home page.

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

2. Under the Appropriate Description dropdown 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.

IMPORTANT

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

- 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.

1

RadMD Sign In

For URGENT/EXPEDITED authorization requests, please contact the Evolent call center.

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?
-- Please select an appropriate description -- [v] What about read-only radiology offices

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

Choose a Username:

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

Phone: | Fax: | Phone: | Email:

Email: | Confirm Email:

Company Name: | Job Title:

Address Line 1: | Address Line 2:

City: | State:
[State]

Zip:

Submit

RadMD New User Application Process - Rendering

STEPS

1. Click the **"New User"** button on the right side of the home page.

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

2. Under the Appropriate Description dropdown 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.

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.

- 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.
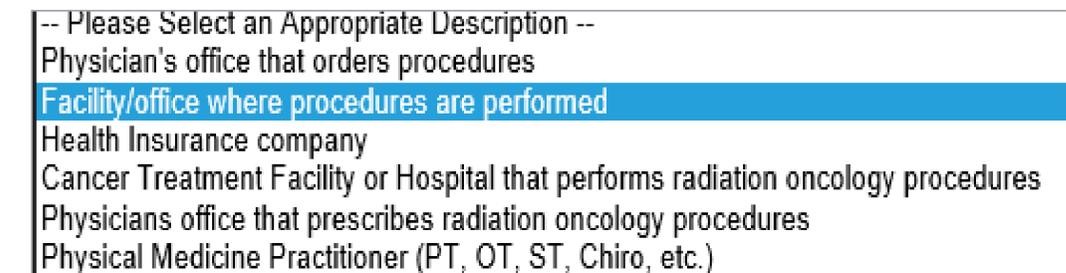
Shared Access

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.

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.

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

     1 share offer requires your attention

   Clinical Guidelines

   Request access to Tax ID

News and Updates

   Hot Topic:

Login As Username: [_____] Login

Request Status

   Search for Request

   View All My Requests

   View Customer Service Calls

Tracking Number: [_____] Search

Forgot Tracking Number?

When to Contact Evolent

Initiating or checking the status of an authorization request	• Website: RadMD.com • 1.888.642.4812
Initiating a Peer-to-Peer Consultation	• 1.888.642.4812
Provider Service Line	• RadMDSupport@Evolent.com • Call 1.800.327.0641
Provider Education requests or questions specific to Evolent	Provider Training Providertraining@evolent.com

evolent

THANK YOU!