Meridian Medicaid Plan Medical Specialty Solutions

Provider Training Presented by:
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Date:

NIA

NIA Program Agenda

☑ Introduction to NIA

☑ Our Program

- Authorization Process

- Other Program Components

- Provider Tools and Contact Information

☑ RadMD Demo

☑ Questions and Answers

NIA Specialty
National Footprint / Medicaid Experience

National Footprint

- ✓ **Since 1995 –** delivering radiology benefits management solutions; one of the *go-to* care partners in industry.

- ✓ **Uniquely independent –** only major specialty company not aligned to health plan ownership.

- ✓ **64 health plans/markets –** partnering with NIA for management of advanced and/or cardiac imaging solutions.

- ✓ **28M national lives – participating** in an NIA RBM nationally.

- ✓ **Diverse populations –** Medicaid, Exchanges, Medicare, Commercial, FEP, Provider Entities.

Medicaid/Medicare/Exchange Expertise/Insights

- ✓ **42 Medicaid plans/markets** with NIA RBM solutions in place.

- ✓ **12.5M Medicaid lives –** in addition to 3.9M Exchange and 2M Medicare Advantage lives participating in an NIA RBM program nationally.

- ✓ **14M Commercial lives**

Intensive Clinical Specialization & Breadth

- ✓ **Specialized Physician Teams**
  - 160+ actively practicing, licensed, board-certified physicians
  - 28 specialties and sub-specialties

URAC Accreditation & NCQA Certified

NIA's Prior Authorization Program

The Program

- Meridian Medicaid will begin a prior authorization program through NIA for the management of outpatient imaging services.

Important Dates

- Program start date: January 1, 2021

- Expansion for Medicaid members on April 1, 2021 via RadMD or Call Center for services rendered on or after April 1, 2021.

Procedures & Settings Included

Procedures:
- CT/CTA
- CCTA
- MRI/MRA
- PET Scan
- Myocardial Perfusion Imaging
- MUGA Scan
- Stress Echocardiography
- Echocardiography

Settings:
- Office
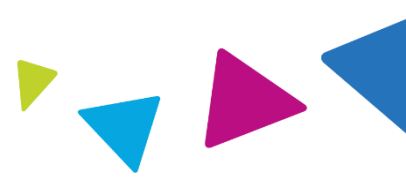- Outpatient Hospital
- Observation

Membership Included

- Medicaid

Network

NIA will use the Meridian Medicaid network of In-office providers, Free-Standing Imaging Facilities (FSF's), and Hospitals to deliver outpatient imaging services to Meridian Medicaid members.
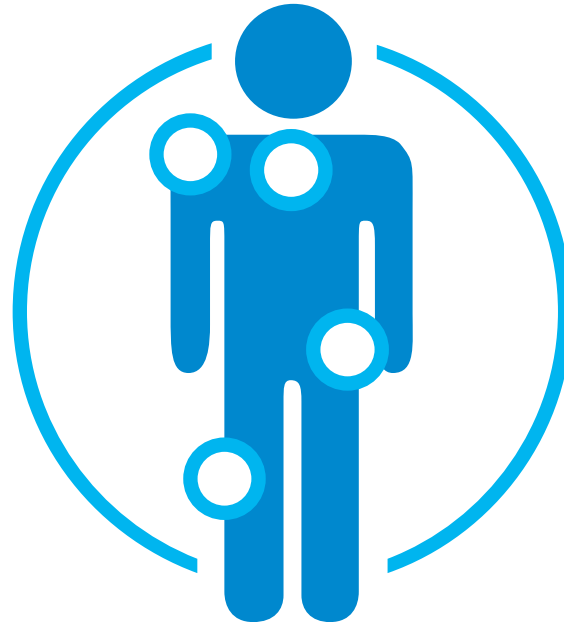
NIA's Prior Authorization Program

Medicaid expansion effective April 1, 2021: Any services rendered on and after April 1, 2021 will require authorization. Only non-emergent procedures performed in an outpatient setting require authorization with NIA.

Procedures Requiring Authorization

- CT/CTA
- CCTA
- MRI/MRA
- PET Scan
- Myocardial Perfusion Imaging
- MUGA Scan
- Stress Echocardiography
- Echocardiography

Excluded from the Program Procedures Performed in the following Settings:

- Hospital Inpatient
- Emergency Room
- Urgent Care
- Surgery Center

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 www.RadMD.com.

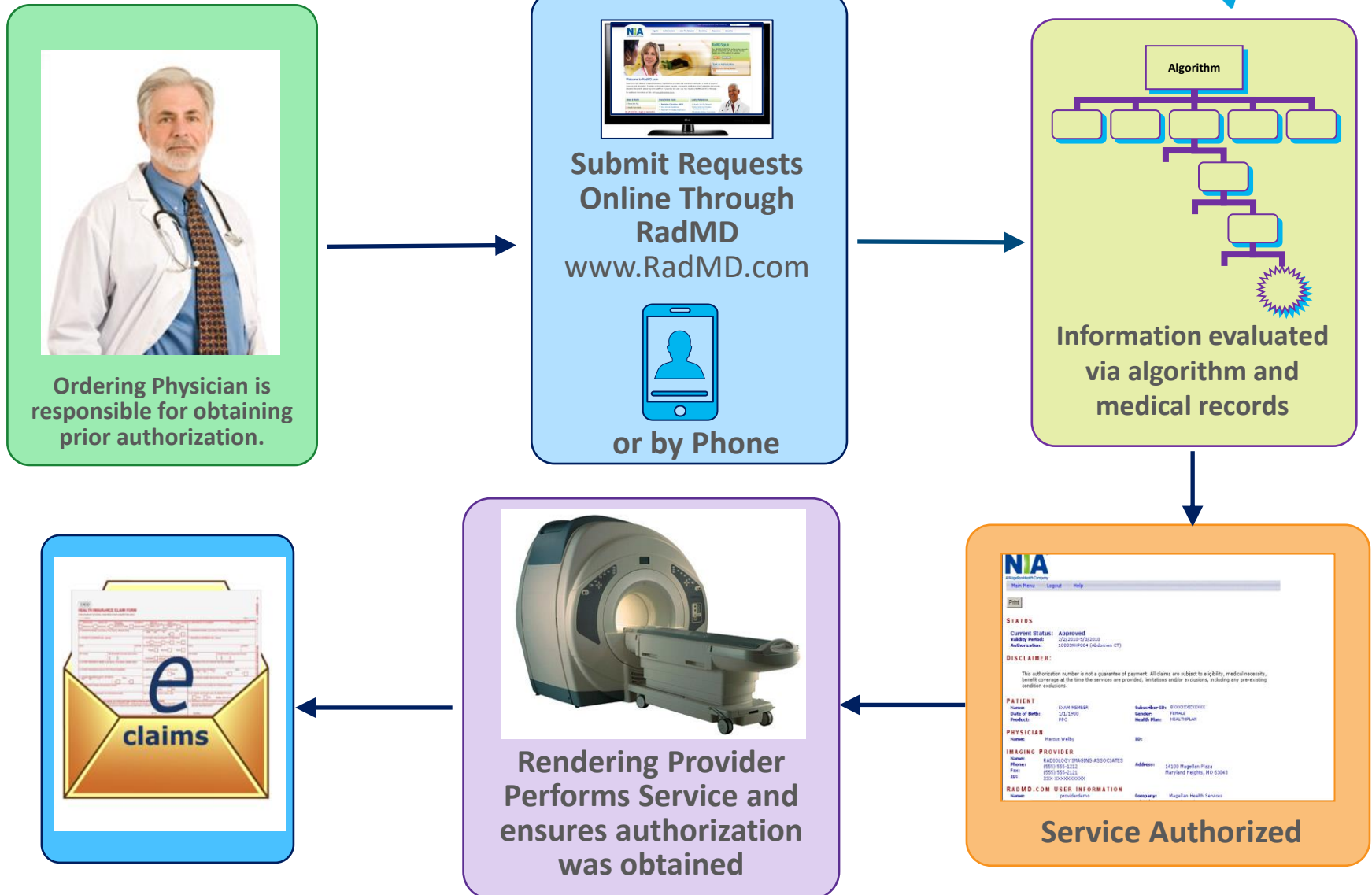☑ Defer to Meridian Medicaid's Policies for Procedures not on Claims/Utilization Review Matrix.

authorized, that any one of the listed procedure codes could be submitted on a claim representing that service. This assumes that the member is eligible at the time of the service, that appropriate rebundling rules are applied, that the claim includes an appropriate diagnosis code for the CPT code and that the service is performed within the validity period.

If a family of CPT codes is not listed in this matrix, an exact match is required between the authorized CPT code and the billed CPT code. If the exact match does not occur, the charge should be adjudicated accordingly.

*Please note: Services rendered in an Emergency Room, Observation Room, Surgery Center or Hospital Inpatient setting are not managed by NIA.
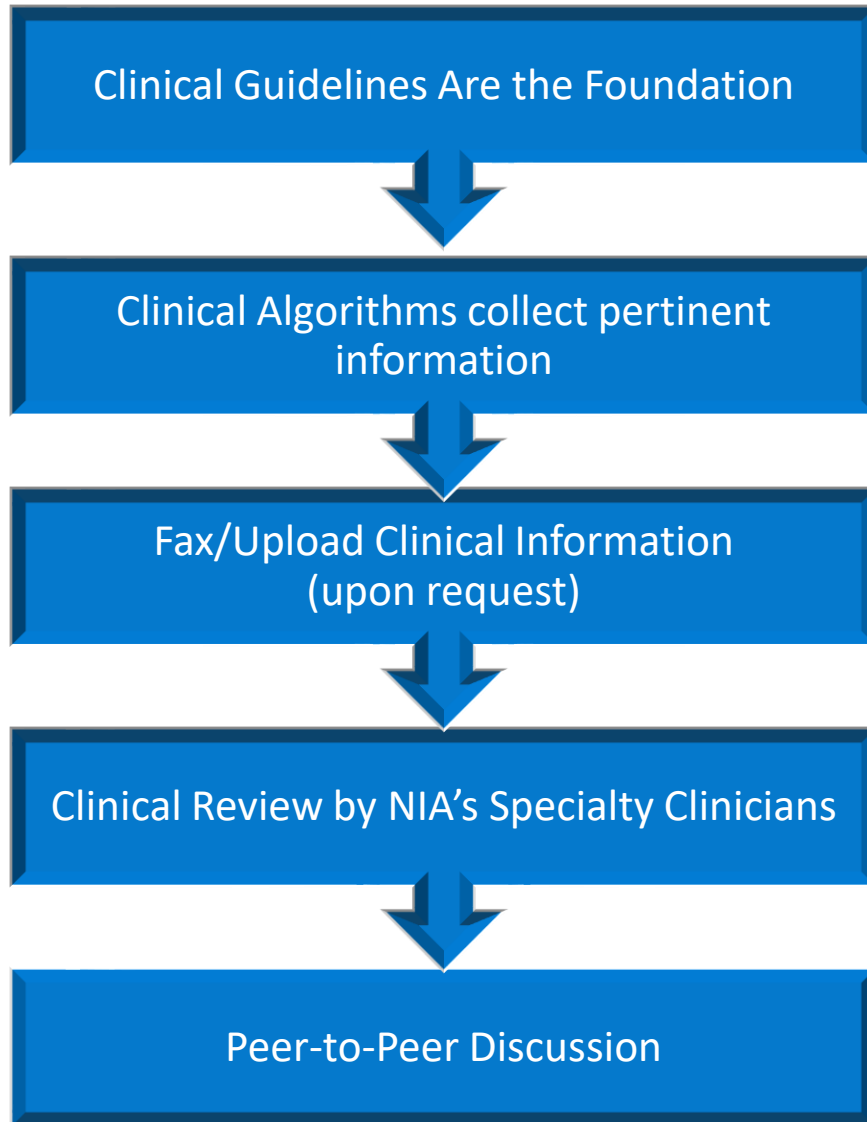
Authorized CPT Code	Description	Allowable Billed Groupings
70336	MRI Temporomandibular Joint	70336
70450	CT Head/Brain	70450, 70460, 70470
70480	CT Orbit	70480, 70481, 70482
70486	CT Maxillofacial/Sinus	70486, 70487, 70488, 76380
70490	CT Soft Tissue Neck	70490, 70491, 70492
70496	CT Angiography, Head	70496
70498	CT Angiography, Neck	70498
70540	MRI Orbit, Face, and/or Neck	70540, 70542, 70543
70551	MRI Internal Auditory Canal	70551, 70552, 70553, 70540, 70542, 70543
70544	MRA Head	70544, 70545, 70546
70547	MRA Neck	70547, 70548, 70549
70551	MRI Brain	70551, 70552, 70553
70554	Functional MRI Brain	70554, 70555
71250	CT Chest	71250, 71260, 71270, G0297
71275	CT Angiography, Chest (non coronary)	71275
71550	MRI Chest	71550, 71551, 71552

NIA

Prior Authorization Process Overview

Ordering Physician is responsible for obtaining prior authorization.

Submit Requests Online Through RadMD
www.RadMD.com

or by Phone

Algorithm

Information evaluated via algorithm and medical records

Service Authorized

Rendering Provider Performs Service and ensures authorization was obtained

claims

Recommendation to Rendering Providers: Do not schedule test until authorization is received

NIA's Clinical Foundation & Review

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┌─────────────────────────────────────────┐
│   Clinical Guidelines Are the Foundation │
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                    ▼
┌─────────────────────────────────────────┐
│   Clinical Algorithms collect pertinent  │
│              information                  │
└─────────────────────────────────────────┘
                    ▼
┌─────────────────────────────────────────┐
│   Fax/Upload Clinical Information         │
│           (upon request)                  │
└─────────────────────────────────────────┘
                    ▼
┌─────────────────────────────────────────┐
│  Clinical Review by NIA's Specialty       │
│              Clinicians                   │
└─────────────────────────────────────────┘
                    ▼
┌─────────────────────────────────────────┐
│        Peer-to-Peer Discussion           │
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- **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 www.RadMD.com**

- Algorithms are a branching structure that changes depending upon the answer to each question.

- The patient'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.

- 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.**

Patient and Clinical Information Required for Authorization

General

- Includes: ordering physician information, member information, rendering provider information, requested examination, etc.

Clinical Information

- Includes clinical information that will justify examination, symptoms and their duration, physical exam findings

- Preliminary procedures already completed (e.g., x-rays, CTs, lab work, ultrasound reports, scoped procedures, referrals to specialist, specialist evaluation)

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

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

Clinical Specialty Team Review

Automated Timeliness Routing

Clinical Specialization Pods Overseen by a Physician Advisor			
Neurology	Abdomen/Pelvis (includes OB-US)	General Studies	Radiation Oncology
Cardiac		Orthopedic	Oncology

Physician Review Team

Physician Panel of Board-Certified Physician Specialists
with ability to meet any State licensure requirements

Specialty Physician panels for peer reviews on specialty products
(cardiac, OB Ultrasound, radiation oncology, interventional pain management, surgery, sleep management)

Document Review

☑ NIA may request patient's medical records/additional clinical information.

☑ When requested, validation of clinical criteria within the patient's medical records is required before an approval can be made.

☑ Ensures that clinical criteria that supports the requested test are clearly documented in medical records.

☑ Helps ensure that patients receive the most appropriate, effective care.

NIA to Ordering Physician: Request for Additional 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 www.RadMD.com
  - Fax using that NIA coversheet

- Location of Fax Coversheets:
  - Can be printed from www.RadMD.com
  - Call 1-866-214-2493 MMP
  - Call 1-866-214-2493 Medicaid

- Use the case specific fax coversheets when faxing clinical information to NIA

Request Verification Details

Exam Request Verification: Detail

Print Fax Coversheet | **Upload Clinical Document**

Member	**Provider**
Name:	Name:
Gender:	Address:
Date of Birth	
Member ID:	Phone:
Health Plan:	Tax ID:
	UPIN:
	Specialty:

Case	
Case Description:	Request ID:
Request Date:	Status:
Entry Method:	ity Dates:
ICD10:	act Name:
Final Determination Date:	

Clinical Review Process

Physicians' Office Contacts NIA for Prior Authorization

✓ RadMD   ✓ Telephone

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 Team interacts with Provider Community.*

1 — **2** — **3** — **4** →

System Evaluates Request Based on Information Entered by Physician

- Clinical information complete – Procedure Approved
- Additional clinical information required – Pends for clinical validation of medical records

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 Authorization Process

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 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 1-866-214-2493 for MMP & 1-866-214-2493 for Medicaid.

Notification of Determination

Authorization Notification	Denial Notification
■ Validity Period - Authorizations are valid for: 30 days from the date of request.	■ 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. ■ A re-review is available with new or additional information. ■ Timeframe for re-review is 1 business day of request. ■ In the event of a denial, providers are asked to follow the appeal instructions provided in their denial letter. ■ Medicare re-opens are not available.

Claims and Appeals

How Claims Should be Submitted

- Rendering providers/Imaging providers should continue to send their claims directly to Meridian Medicaid.

- Providers are strongly encouraged to use EDI claims submission.

- Check on claims status by logging on to the Meridian Medicaid website at provider.ilmeridian.com.

Claims Appeals Process

- In the event of a prior authorization or claims payment denial, providers may appeal the decision through Meridian Medicaid

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

NOTE: Consistent with CMS guidelines, multiple procedure discounts are applied when appropriate.

Radiation Safety and Awareness

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

☑ U.S. population exposed to nearly six times more radiation from medical devices than in 1980

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

1 mSv=

4 months of natural exposure

50 chest x-rays

NIA has developed a Radiation Awareness Program designed to create patient and physician awareness of radiation concerns

Provider Tools

RadMD Website
www.RadMD.com

Available
24/7 (except during maintenance)

Toll Free Number
MMP 1-866-214-2493
Medicaid 1-866-214-2493
7am – 7pm CST

- 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
www.RadMD.com

RadMD Functionality varies by user:

- **Ordering Provider's Office** – View and submit requests for authorization.
- **Rendering Provider** – Views approved authorizations for their facility.

Online Tools Accessed through www.RadMD.com:

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

Address http://www.radmd.com/

RadMD Sign In

24/7 online access for imaging facilities and health plans to NIA's RadMD Web site.

Sign In   New User

Track an Authorization

Authorization Tracking Number

Go
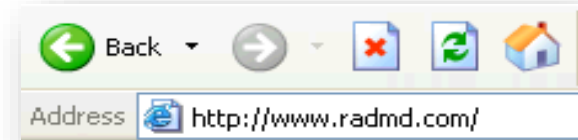
Registering on RadMD.com
To Initiate Authorizations

Everyone in your organization is required to have their own separate user name 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 user name and password.

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

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.

RadMD – 2020 Enhancements

NIA offers a **Shared Access** feature on our www.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 www.RadMD.com, allowing them to communicate with patients and facilitate treatment.

Allows Users the ability to view all approved authorizations for facility

IMPORTANT

- **Everyone in your organization is required to have their own separate user name 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 user name and password.

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 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 authorizations under your organization.

1

RadMD Sign In

24/7 online access for imaging facilities and health plans to NIA's RadMD Web site.

Sign In | New User

Track an Authorization

Authorization Tracking Number

[   ] Go

2

-- Please Select an Appropriate Description --
Physician's office that orders procedures
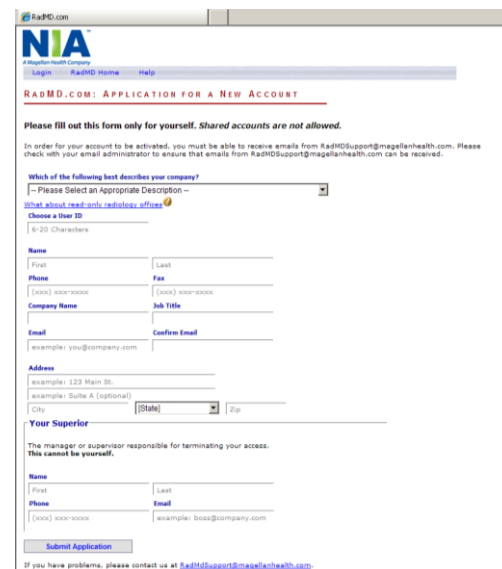Facility/office where procedures are performed
Health Insurance company
Cancer Treatment Facility or Hospital that performs radiation oncology procedures
Physicians office that prescribes radiation oncology procedures
Physical Medicine Practitioner (PT, OT, ST, Chiro, etc.)

3

When to Contact NIA

Providers:

Initiating or checking the status of an authorization	- Website, www.RadMD.com - Toll-free number 1-866-214-2493 MMP - Toll-free number 1-866-214-2493 Medicaid - Interactive Voice Response (IVR) System
Initiating a Peer to Peer	- Call Toll-free number 1-866-214-2493 MMP - Call Toll-free number 1-866-214-2493 Medicaid
Technical Issues	- RadMDSupport@evolent.com - Call 1-800-327-0641
Provider Education requests or questions specific to NIA	Leta Genasci Provider Relations Manager 1-314-387-5518 lgenasci@evolnet.com

RadMD Demonstration

Confidentiality Statement

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