Reimplementation Plans

• Effective June 1, 2015, Network Health will reinstate the prior authorization requirements for the following specialty programs at CareCore | MedSolutions.
  ➢ Interventional pain management
  ➢ Large joint procedures
  ➢ Radiation oncology therapy services
  ➢ Spinal procedures
  ➢ Advanced imaging and diagnostic cardiac services continue to require prior authorization.

• Beginning June 1, 2015, CareCore | MedSolutions will begin review for the above services taking place on or after July 1, 2015.
Impact of Reimplementation

• All contracted providers are impacted including our contracted providers in Southeast Wisconsin.
  – Please note, if prior authorization is not rendered for these services, the services will be denied as provider liability

• Network Health members/participants
  – Excluding the Froedtert Health Employee Group

• Network Health associates

• Network Health employers
SCOPE

Program Reimplementation
Interventional Pain Procedures

This list is not all inclusive. For a complete list of procedures, visit www.medsolutions.com/implementation/nhpwi/index.html

• Regional sympathetic blocks
• SI joint injections
• Trigger point injections
• Pain pumps
• Radiofrequency ablation (RFA)/ Spinal denervation
• Adhesiolysis
• Epidural steroid injections
• Epidurography/Discography
• Facet joint injections
• Prolotherapy
• Neurostimulators / Electrical stimulators
Large Joint Procedures

This list is not all inclusive. For a complete list of procedures, visit www.medsolutions.com/implementation/nhpwi/index.html

- Arthroplasty
- Tenotomy
- Capsulorrhaphy
- Osteotomy
- Capsulectomy
- Acrominoplasty
- Arthrotomy
- Actabuloplasty
- Revision arthroplasty
- Arthrodesis
- Arthroscopy
- Ligament repairs/
  Tendon transfers
# Radiation Therapy Services

This list may not be all inclusive. For a complete list of procedures, visit [www.medsolutions.com/implementation/nhpwi/index.html](http://www.medsolutions.com/implementation/nhpwi/index.html)

## Clinical procedures
- 2D and 3D conformal
- Brachytherapy
- Intensity-Modulated Radiation Therapy (IMRT)
- Proton beam therapy
- Stereotactic Radiosurgery (SRS)

## Non-clinical procedures
- SIM
- Planning
- Devices
- Imaging
- Physics
- Management
Spine Procedures

This list is not all inclusive. For a complete list of procedures, visit [www.medsolutions.com/implementation/nhpwi/index.html](http://www.medsolutions.com/implementation/nhpwi/index.html)

- Discectomy
- Decompression procedures
- Allograft
- Osteotomies
- Vertebroplatsy
- Disc arthroplasty
- Laminectomy/Laminotomy
- Kyphectomy
- Vertebral corpectomy
- Arthrodesis
Program Improvements

ONE portal and call center for all services

• Online authorization requests can be made at https://myportal.medsolutions.com
  • Advanced imaging
  • Cardiac diagnostics
  • Spine procedures
  • Radiation oncology
  • Interventional pain management
  • Joint surgeries (hip, knee, shoulder)
• Telephonic requests to 855-727-7444
• Authorization requests can be faxed to 888-693-3210
• Fax 877-791-4110 for Radiation Therapy ONLY
Program Improvements

Outreach for additional information

- In the event clinical information is missing, CareCore | MedSolutions will reach out to providers offices to obtain the needed clinical information PRIOR to issuing the original determination.
  - A telephone call is made followed by a fax attempt
  - CareCore | MedSolutions will share during the telephone outreach what specific information is missing to make the determination
  - Provider offices will be given one (1) business day turn-around to provide the clinical information ensuring timeliness of decisions
Program Improvements

Peer-to-Peer (P2P) Discussions
In the event of a denial determination, P2P discussion is strongly encouraged.

- **NEW**- Provider offices can call CareCore | MedSolutions to schedule a time for the P2P that works best.
- **NEW**- When medical necessity criteria is met during the P2P, overturns may be issued for both commercial and Medicare requests.
Program Improvements

Evidence-Based Criteria

• CareCore | MedSolutions criteria guidelines are reviewed annually using the following.
  – Nationally-accepted standards
  – Health plan input
  – Community specialty provider input

• Discussions on the criteria sets were held with the medical directors at Network Health and CareCore | MedSolutions and local specialty providers and changes were made.

• Links to the medical necessity criteria guidelines can be found here.

Program Improvements

Code groupings

• Similar procedure codes have been “grouped” together to improve claims payment of like services authorized.

• For a complete list of the code groupings by specialty please visit:
The client services team is dedicated to responding to issues. This team is composed of the following.

- Client service representatives
  - Handle eligibility and process inquiries
  - When needed, CSRs will escalate to client service managers

- Client service managers
  - Handle escalated concerns, projects

- Directors

The client service team is committed to providing high quality, timely and efficient service.
Prior Authorization Required

- Interventional pain management
- Large joint procedures
- Radiation oncology therapy services
- Spinal procedures

Advanced imaging and diagnostic cardiac services continue to require prior authorization.

For a list of all CPT codes that require prior authorization through CareCore | MedSolutions, please visit http://www.medsolutions.com/implementation/nhpwi
Program Overview

• Prior authorization review applies to the following.
  – Outpatient services
  – Elective/non-urgent services
  – Diagnostic services

• Prior authorization review does NOT apply to the following.
  – Emergency room
  – Inpatient stays
  – 23-hour observation status
How to Request Prior Authorization?

- Online prior authorization requests can be made here. [https://myportal.medsolutions.com](https://myportal.medsolutions.com)
  - Advanced imaging
  - Cardiac diagnostics
  - Spine procedures
  - Radiation oncology
  - Interventional pain management
  - Joint surgeries (hip, knee, shoulder)
- Telephonic requests can be made by calling 855-727-7444 (Monday-Friday 7 a.m. - 8 p.m. CST)
- Requests can be FAXED to 888-693-3210
- Use fax 877-791-4110 for Radiation Oncology ONLY
Inpatient Stays

• Although MedSolutions authorizes a procedure, inpatient stays related to any of the services discussed will require a separate authorization from Network Health.

• For any required inpatient stay contact one of the following.
  – Network Health's Commercial Utilization Management Department at 800-236-0208
  – Network Health's Medicare Utilization Management Department at 866-709-0019.
Information Needed

The following information is needed for any prior authorization request.

- Member/participant ID
- Member/participant name
- Date of birth
- Ordering physician
- NPI or Tax ID
- Fax number
- Rendering facility/provider
- Tax ID or NPI
- CPT codes
- Diagnosis codes
- Clinical information pertinent to the case
  - Prior testing and results
  - Prior imaging and results
  - Office notes
  - Therapy history
  - Previous treatments
  - Duration of previous treatments

networkhealth.com
Turn Around Time

- All prior authorization requests must be processed within 14 calendar days of the original request.
  - CareCore | MedSolutions strives to have turn around time within two to three business days.
Outcomes

Approvals

• All approval decisions are faxed to the ordering provider office and mailed to the member/participant.

• Approvals contain the following information.
  – Description of the services approved
  – Ordering provider
  – Rendering facility information
  – Dates the authorization is effective
ALL authorization approvals are effective for 180 days
Outcomes

Denials

• In the event clinical information is missing, CareCore | MedSolutions will reach out to providers offices to obtain the needed clinical information PRIOR to issuing the original determination.
  • A telephone call is made followed by a fax attempt
  • CareCore | MedSolutions will share during the telephone outreach what specific information is missing to make the determination
  • Provider offices will be given one (1) business day turn-around to provide the clinical information ensuring timeliness of decisions

• All denials contain the following information.
  • The rationale for the determination
  • How to request a peer review
  • Appeal rights
  • Contact information

• Denial decisions are called and mailed to the ordering provider and mailed to the member/participant.
Peer Review

• In the event of a denial determination, providers can ask to discuss the decisions with a like-specialty reviewer from CareCore | MedSolutions.
  – Provider offices should call CareCore | MedSolutions
  – CareCore | MedSolutions will schedule a time convenient for the ordering provider to discuss the decision

• All appeals are handled at Network Health.
Retrospective Reviews

• CareCore | MedSolutions can conduct retrospective reviews when the following are met.
  – Authorization is requested within three business days following the date of service
  – The service was medically necessary
  – The service was urgent

• CareCore | MedSolutions will provide a decision within 30 calendar days.
Urgent Requests

• Contact CareCore | MedSolutions by phone to request an urgent or expedited prior authorization review.
  – Be sure to have clinical information ready
  – Urgent and expedited cases are processed within 72 hours
Changes to Authorizations

• Contact CareCore | MedSolutions by telephone to update authorizations on file prior to services being rendered.
  – Dates of service
  – Facility changes
  – Procedure changes
  – Be sure to indicate the services have not been rendered
May Training Opportunities

• CareCore | MedSolutions will be hosting general how-to webinar training sessions prior to reimplementation for providers and support staff.
  – Monday, May 26 | 7:30 a.m. – 8 a.m. (Radiation oncology)
  – Monday, May 26 | 12-12:30 p.m. (Joint, pain and spine procedures)
  – Friday, May 29 | 7:30 a.m. – 8 a.m. (Joint, pain and spine procedures)
  – Friday, May 29 | 12-12:30 p.m. (Radiation oncology)

* All times are Central
June Training Opportunities

• CareCore | MedSolutions will be hosting follow up general how-to WebEx reimplementation training sessions for providers and support staff.
  
  – Tuesday, June 2 | 7:30 a.m. – 8 a.m. (Joint, pain and spine procedures)
  – Tuesday, June 2 | 12-12:30 p.m. (Radiation oncology)
  – Thursday, June 4 | 7:30 a.m. – 8 a.m. (Radiation oncology)
  – Thursday, June 4 | 12-12:30 p.m. (Joint, pain and spine procedures)

* All times are Central
Registration: Training Webinars

• To register for a webinar session, go to [http://medsolutions.webex.com/](http://medsolutions.webex.com/) and follow the instructions below.
  – Click on the "Training Center" tab
  – Select the conference you want to attend by clicking the "Upcoming" tab
  – All of the provider orientation sessions will be named “Network Health MSK WI Provider Orientation Session” or “Network Health Radiation Oncology Provider Orientation Session”
  – Click "Register" and enter your registration information

[Network Health Logo]
Important Dates

• June 1, 2015- CareCore | MedSolutions begins to review for prior authorization on the following services taking place on or after July 1, 2015.
  - Interventional pain management
  - Large joint procedures
  - Radiation oncology therapy services
  - Spinal procedures

• July 1, 2015- prior authorization requirements reinstated.
  - Please note, if prior authorization is not rendered for these services, the services will be denied as provider liability.