Health Alliance Utilization Management Changes Overview February 2017

Maxine Wallner – Director Provider Services

Agenda

- Decision Overview
- Utilization Management Program Changes
 - Expansions and modifications to prior authorization requirements
 - eviCore healthcare partnership
 - Review of 2017 changes
- Network Education and Training
 - Development of training program for your health system.
- eviCore
 - Overview
 - Clinical Approach
 - Service Model
 - Case Initiation Process

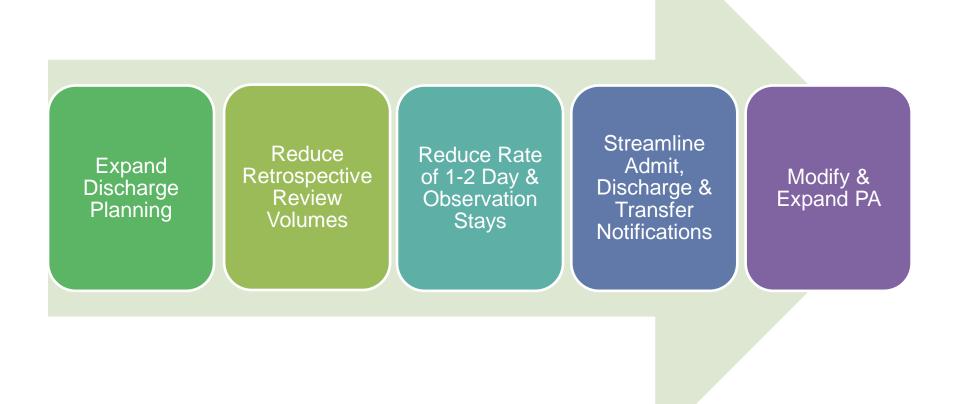
Decision Overview

It is the expectation of Health Alliance that our members have access to medical care that results in the best outcomes possible.

To achieve this expectation, we must employ best practices in all areas of care management through;

- Addressing the needs of expanding complex patient populations
- Utilizing best practice clinical guidelines with full transparency
- Deliver the customer service our members and providers deserve

Health Alliance Utilization Management Opportunities



Health Alliance and eviCore Partnership



eviCore brings together the broadest range of integrated, innovative medical benefits management solutions across the entire healthcare continuum, enabling better outcomes for our patients, providers and Health Alliance.

Enhanced User Experience

Health Alliance's partnership with eviCore will provide:

- Robust, transparent evidence-based guidelines
- Responsive clinical review process improved prior authorization decision turnaround times
- Specialty-specific medical directors supporting peer to peer discussions
- Seamless integration between the Health Alliance Provider Portal and the eviCore system

January 2017 Changes

Modify and Expand PA Health Alliance UM changes effective January 1, 2017

Change Type	What	Program Beginning 1/1/17
New	Observation Stays Notification to Health Alliance is required for observation stays beyond 24 hours (commercial) & 48 hours (Medicare)	Phone call or census data feed to Health Alliance
New	Non-Urgent Ambulance Air and ground	Health Alliance Web Portal
Removal	Therapeutic Plasma Exchange	
Removal	TAVR	

March 2017 Changes

Modify and Expand PA Health Alliance UM changes effective March 1, 2017

Change Type	What	Program Beginning 3/1/17
New	Limit Fax Requests Health Alliance prefers PAs via Clear Coverage, Health Alliance Web Portal and eviCore	
New	OB Ultrasound	eviCore
New	All Diagnostic Ultrasound Duplex Scans, Transcranial Doppler Study, Non-Invasive Physiologic Studies	eviCore
New	Cardiac Imaging and Procedures ECHO, ECHO Stress, Cardiac Rhythm Implantable Devices, Myocardial Perfusion Imaging, Nuclear Medicine, Diagnostic Heart Catheterization	eviCore

Modify and Expand PA Health Alliance UM changes effective March 1, 2017 cont'd

Change Type	What	Current Program	Program Beginning 3/1/17
New	 Planned Elective Inpatient Admissions – admitting physician must preauthorize the elective inpatient procedure or surgery 		Clear Coverage
	(Note: hospitals must still notify Health Alliance by phone or census of an admission within 24 hours of the admission. This process will not change.)		
Transition	High Tech Imaging CT, CTA, MRI, MRA, PET	Clear Coverage	eviCore
Transition	DME	Health Alliance Web Portal	Clear Coverage
Transition	Home Health	Health Alliance Web Portal	Clear Coverage
Transition	Home Oxygen	Health Alliance Web Portal	Clear Coverage

May 2017 Changes

Modify and Expand PA Health Alliance Outpatient UM changes effective May 1, 2017

Change Type	What	Current Program	Program Beginning 5/1/17
New	Outpatient Medical Oncology Oncology Pathway Drugs		eviCore
New	Outpatient Radiation Therapy		eviCore
New	Musculoskeletal Joint/Spine Surgery, Pain Management		eviCore
New	Outpatient Specialty Therapy Physical, Occupational, Speech		eviCore
Transition	Outpatient Specialty Therapy Chiropractic	Clear Coverage	eviCore
Transition	Genetic Testing	HA Web Portal	eviCore

REQUEST PREAUTHORIZATION	Authorizations	CLAIMS	CLAIM REPROCESSING INQUIRIES	ATTACH TO MEMBER
	Attention!	Requests Need Action	A 1 Claim Reprocessing Inquiries Need More Information	
Request Preauthorization				
Do I Need to File? Policies & Procedures Requiring Preauthorization Look up the member to view Preauthorization Lists				
	Starting 1/22/2017 all Blepha	aroplasty, Eyebrow Lift Pre	authorizations must be filed at Health Alliance.	
Starting 1/25/201	Starting 1/25/2017 all Cosmetic and Reconstructive Surgery OR Breast Reconstruction; Breast Implant Removal & Replacement Preauthorizations must be filed at EviCore.			
Starting 1/25/2017 all Co	Starting 1/25/2017 all Cosmetic and Reconstructive Surgery OR Breast Reconstruction; Breast Implant Removal & Replacement Preauthorizations will no longer be filed at Health Alliance.			
	Starting 2/15/2017 all Endovenous I	Laser/RFA for Varicose Ve	ins Preauthorizations must be filed at Clear Coverage.	
	Starting 2/15/2017 all Endovenous Laser/RFA for Varicose Veins Preauthorizations will no longer be filed at EviCore.			
	Starting 1/22/2017 all Home Services Preauthorizations must be filed at Clear Coverage.			
Where Do I File?				
Procedure / Service Category	the lists above.		Check	Show All Categories
Clear Coverage [™]		Hea Hea	innovative so	File at Evicore
		File Durable Medic File Pharm		

Education and Training

In close collaboration with our health system partners, education and training will be delivered to all network providers and staff via one or more of the methods below.

- Email announcements
- Newsletter articles
- Phone calls
- On-site training sessions delivered by Health Alliance & eviCore
- Webinars
- Organizational learning management systems
- Online resources

Announcements began in December and training begins January 2017.

eviCore Company Overview

Renee Jernander Regional Provider Engagement Manager

Company Highlights

4K employees including 1K clinicians

Headquartered in Bluffton, SC Offices across the US including:

- Lexington, MA
- Colorado Springs, CO

SIX SIGMA

- Franklin, TN
- Greenwich, CT

- Melbourne, FL
- Plainville, CT
- Sacramento, CA

SHARING A VISION AT THE CORE OF CHANGE.



managed nationwide



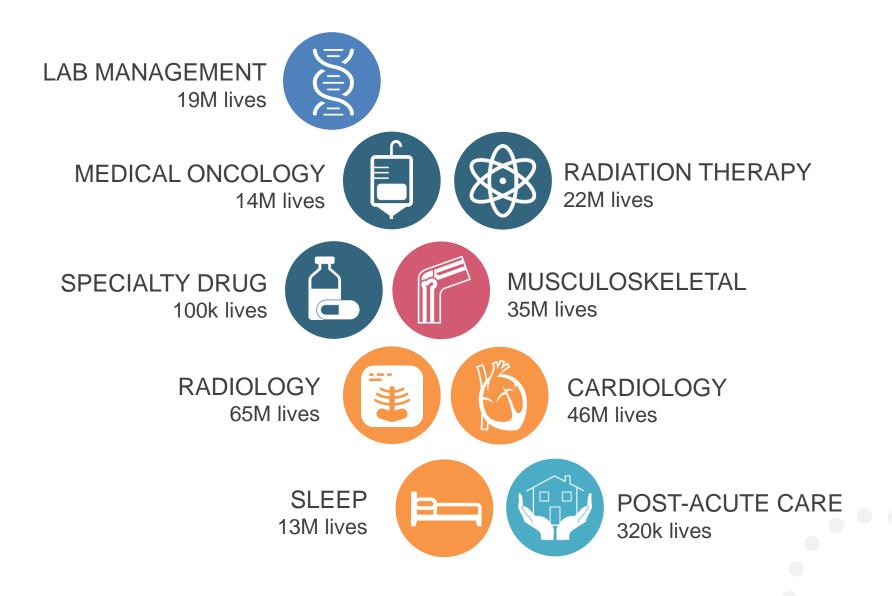
× Utilization Management





12M claims processed annually

Integrated Solutions



eviCore's Clinical Approach

Clinical Platform

Multi-Specialty Expertise

Family Medicine	Oncology/Hematology
Internal Medicine	Surgery
Pediatrics	General
Sports Medicine	OrthopedicThoracic
OB/GYN	CardiacNeurological
Cardiology	Otolaryngology
Nuclear Medicine	 Spine
Anesthesiology	Radiology
Radiation Oncology	Nuclear
Sleep Medicine	MedicineMusculoskeletalNeuroradiology

- 190+ board-certified medical directors
- Diverse representation of medical specialties
- 450 nurses with diverse specialties and experience
- Dedicated nursing and physician teams by specialty for Cardiology, Oncology, OB-GYN, Spine/Orthopedics, Neurology, and Medical/Surgical

Organic Evidence-Based Guidelines



Aligned with National Societies

- American College of Cardiology
- American Heart Association
- American Society of Nuclear Cardiology
- Heart Rhythm Society
- American College of Radiology
- American Academy of Neurology
- American College of Chest Physicians
- American College of Rheumatology
- American Academy of Sleep Medicine
- American Urological Association
- National Comprehensive Cancer Network

- American College of Therapeutic Radiology and Oncology
- American Society for Radiation Oncology
- American Society of Clinical Oncology
- American Society of Colon and Rectal Surgeons
- American Academy of Orthopedic Surgeons
- North American Spine Society
- American Association of Neurological Surgeons
- American College of Obstetricians and Gynecologists
- The Society of Maternal-Fetal Medicine

eviCore's Service Model

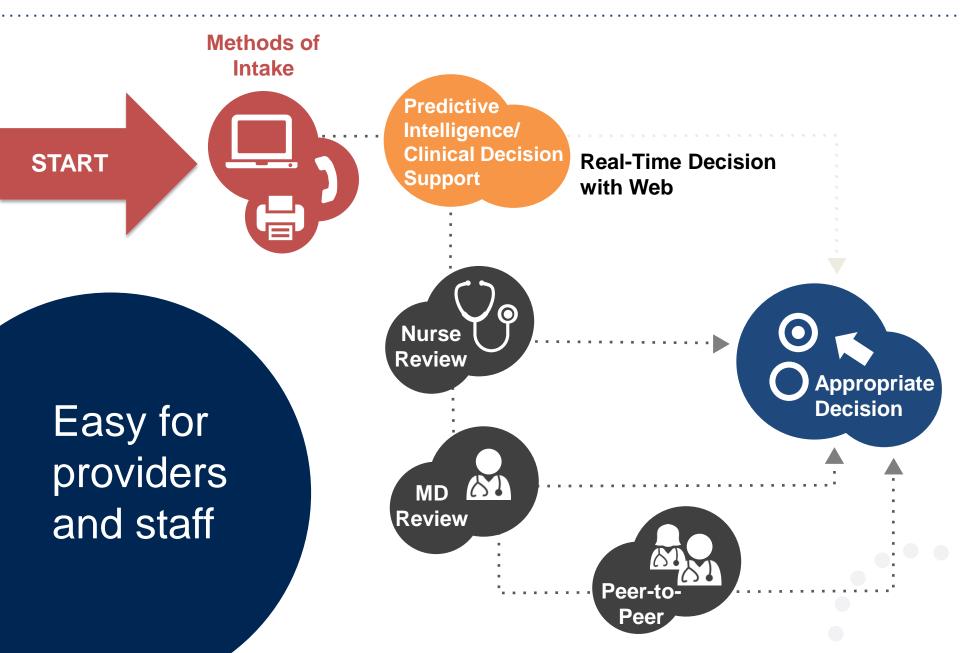
Preauthorization Requests

How to request preauthorizations:

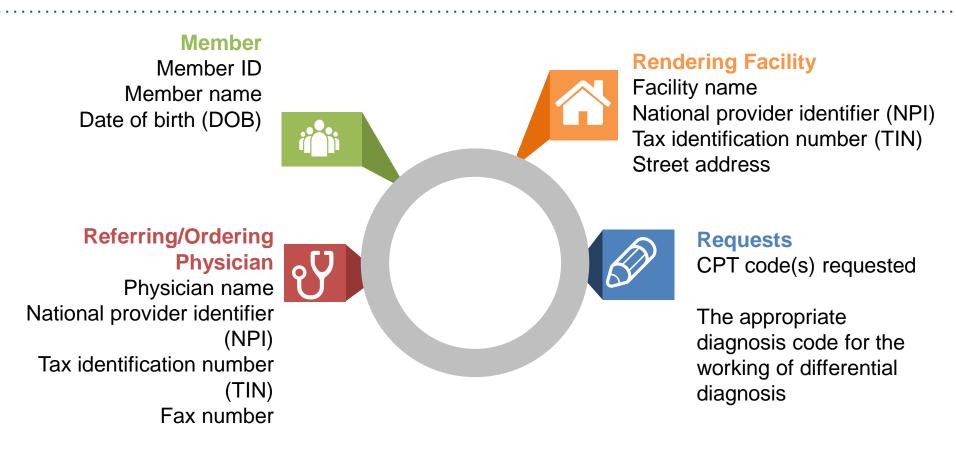
YourHealthAlliance.org Available 24/7 and the quickest way to create preauthorizations and check existing case status YourHealthAlliance.org

Or by phone: 844.303.8452 7 a.m. – 7 p.m. Monday – Friday

Clinical Review Process



Information Needed to Begin a Preauthorization

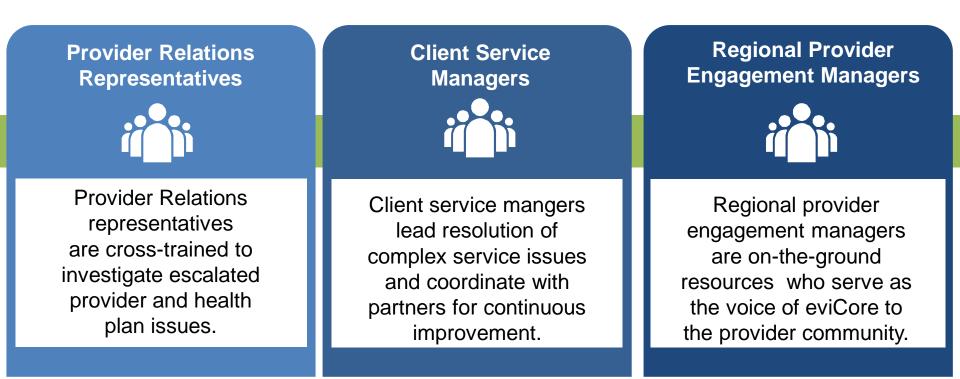


If clinical information is needed, please be able to supply:

- Prior tests, lab work, and/or imaging studies performed related to this diagnosis
- The notes from the patient's last visit related to the diagnosis
- Type and duration of treatment performed to date for the diagnosis

Client Service Delivery Team

The Client Service delivery team is responsible for high-level service delivery to our health plan clients as well as ordering and rendering providers nationwide



Why Our Service Delivery Model Works

One centralized intake point allows for timely identification, tracking, trending, and reporting of all issues. It also enables eviCore to quickly identify and respond to systemic issues impacting multiple providers.

Complex issues are escalated to resources who are the subject matter experts and can quickly coordinate with matrix partners to address issues at a root-cause level. Routine issues are handled by a <u>team</u> of representatives who are cross trained to respond to a variety of issues. There is no reliance on a single individual to respond to your needs.

Preauthorization Program for Health Alliance Medical Plans

Introduction to Wave One Process Effective March 1, 2017



Wave One Program Overview

eviCore will begin accepting requests on February 20, 2017 for service dates on and after March 1, 2017.

eviCore Preauthorization applies to services that are:

- Elective / Non-emergent
- Diagnostic

It is the responsibility of the ordering provider to request preauthorization approval for services.



Wave One OB Ultrasound Preauthorization Requirements

- ALL OBUS requests require preauthorization.
- OBUS requests will be reviewed based on the specific CPT code criteria and eviCore guidelines.
- Please include the patient's gestational age at the time the requested OBUS CPT code(s) will be performed, any prior OBUS that have been done (include the CPT code, date, and results), and the patient's prenatal record.
- Batched requests for multiple ultrasounds (up to 4 weeks) may be requested on one case and will be approved if clinical criteria is met to perform serial ultrasounds. These requests will usually be requested by a maternal fetal medicine specialist for a high risk pregnancy.

<u>Please Note:</u> All OBUS requests will be reviewed using the imaging guidelines located at eviCore.com.

Wave One Preauthorization Outcomes - Approval

Approved Requests:

Delivery:

- All requests are processed within 2 business days after receipt of all necessary clinical information.
- Authorizations are typically good for **90 days** from the date of determination.
- Urgent requests must be initiated via phone

• Emailed to ordering provider

- Mailed to Medicare members
- Facility will not receive notification
- Information can be printed on demand from the Health Alliance Web Portal

Wave One Preauthorization Outcomes - Denial

Denied Requests:

- Communication of denial determination
- Communication of the rationale for the denial
- How to request a Peer Review

Delivery:

- Denial is emailed to the rendering provider
- Mailed to the member

Wave One Preauthorization Outcomes – Commercial Membership

• Reconsiderations:

- Additional clinical information can be provided without the need for a physician to participate
- Must be requested within 14 calendar days following the date of service
- Call 844.303.8452 to initiate reconsideration

Peer-to-Peer Review:

- If a request is denied and requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians. In certain instances, additional information provided during the consultation is sufficient to satisfy the medical necessity criteria for approval.
- Peer-to-Peer reviews can be scheduled at a time convenient to your physician

Wave One Special Circumstances

Appeals:

- eviCore will not process appeals
- To initiate an appeal, contact Health Alliance:
 - 800.851.3379, ext. 4668
 - PSC@healthalliance.org

Retrospective Studies:

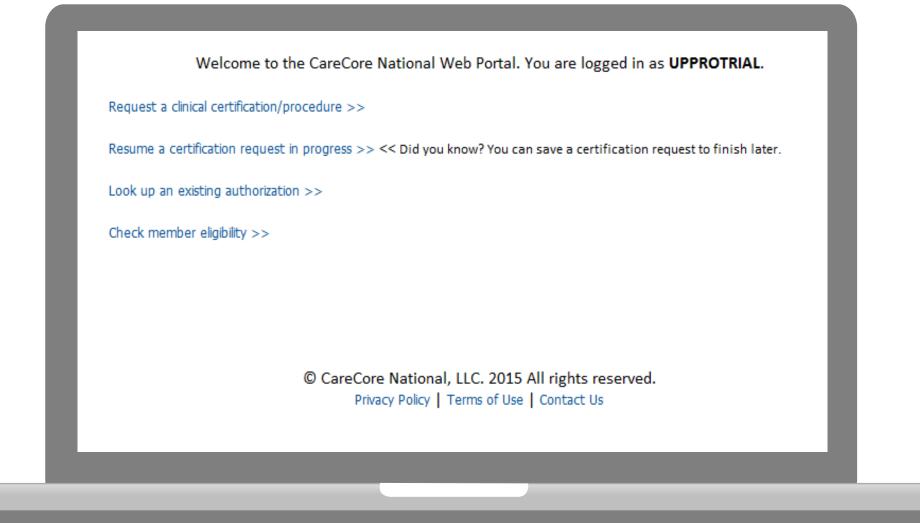
• The program will not permit requestors to submit retrospective authorization requests

Outpatient Urgent Studies:

- Contact eviCore by phone to request an expedited preauthorization review and provide clinical information
- Urgent Cases will be reviewed within 24 hours (not to exceed 72 hours) of the request

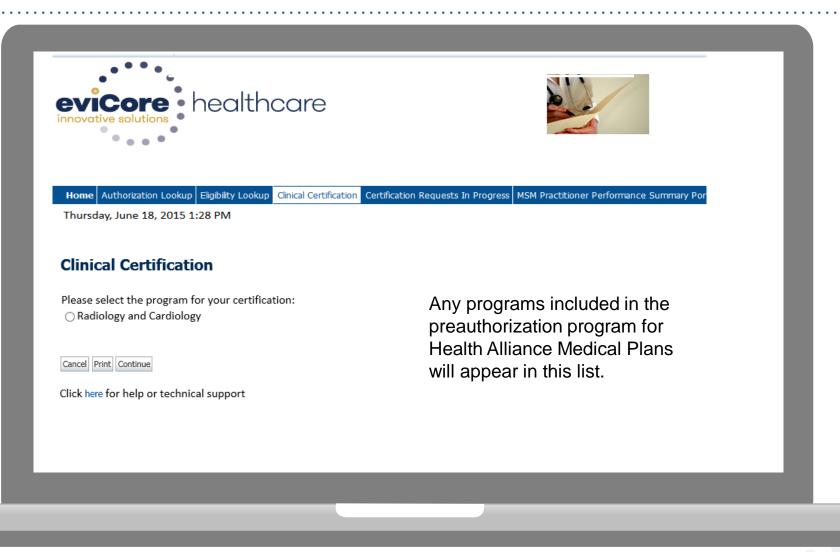
eviCore's Case Initiation Process

Initiating A Case



Choose "request a clinical certification/procedure" to begin a new case request.

Select Program



Select the **Program** for your preauthorization.

Select Program

rtification Requests In Progress MSM Practitioner Performance Summary Por
More programs will appear in this list as each wave is implemented.

Select the **Program** for your preauthorization.

Select Provider

hursday, March 05, 2015 9:53 AM		CHC2COT P	edono ni krodimi la	5M Practitioner Performance Summary Portal Resources Manage Your Account
10% Complete	Clinical Certif			t to build a case. If the practitioner, group, or lab for whom you wis
	Filter Last Name or NPI:	or group		a to build a case. It the practitioner, group, or lab for whom you wis
	or NPI: Selected Physician:	-	Physician	
		SELECT	200300200	
		SEACT	BOYER, CAROL	
		SELECT	LEJA, MONIKA	
		SELECT	O'BRYANT, CATHERI	NE
	Cancel Back Print Contin	ue		

Select the **Practitioner/Group** for whom you want to build a case.

Contact Information

	Clinical Cert	ification		
10% Complete	Physician's Name		[?]	
EDIT	Who to Contact	Test Contact	[?]	
	Fax	(555) 555-5555	[?]	
The [?] indicates a	Phone	(555) 555-5556	[?]	
equired field or that	Ext.		[?]	
nore information is	Cell Phone	(122) 334-4556		
available as a help eature.	Email	test@test.com		
	Cancel Back Prin	Continue		

Enter the **Provider's name** and appropriate information for the point of contact individual.

Member Information

		tient Information
		Clinical Certification
30% Comp	lete	Patient ID:
DOE, JOHN	EDIT	Date Of Birth: MM/DD/YYYY Patient Last Name Only: [?]
		DO NOT INCLUDE ALPHA PREFIX. ENTER NUMERIC DIGITS ONLY.
		ELIGIBILITY LOOKUP
		Cancel Back Print

Enter the member information including the Patient ID number, date of birth, and patient's last name. Click "Eligibility Lookup."

Clinical Details

Clinical Certification

This procedure has not been performed. CHANGE

Radiology Procedures

Select a Procedure by CPT Code[?] or Description[?]

70551 V MRI Brain W/O CONTRAST

Diagnosis

Diagnosis Code: F01.50 Description: Vascular dementia without behavioral disturbance Change Diagnosis

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Cancel Back Print Continue

Click here for help or technical support

Verify Service Selection

Clinical Certification

Confirm your service selection.

Procedure Date:TBDCPT Code:70551Description:MRI Brain W/O CONTRASTDiagnosis Code:F01.50Diagnosis:Vascular dementia without behavioral disturbanceChange Procedure or Diagnosis

Cancel Back Print Continue

Click here for help or technical support

Site Selection

uesday, April 15, 2	014 4303 PM					Leg Of	FØRDEH
		Clinical C	ertification				
60% Come	slate				n the member's zip code patient to is not on this l		
Physician				iearch parameters		nny you can assist no	
-	EDIT	Specific Site Se					
Patient					r best results, search by ru may search a partial si		
	EDIT	•			ite names that most clos	ely match your entry	
		NPE TINE	Zip Code:	10016	Site Name:		
. .		TINE	Gity:			 Exact match Starts with 	
Service							owe sti
						-	
				Name		Address	
		SRICCT					
		SPLECT					
		SRECT					
		MUNCT					
			Print				

Use the search fields to locate the specific facility site needed.

Clinical Certification

Clinical Certification

You are about to enter the clinical information collection phase of the authorization process.

Once you have clicked "Continue," you will not be able to edit the Provider, Patient, or Service information entered in the previous steps. Please be sure that all this data has been entered correctly before continuing.

In order to ensure prompt attention to your on-line request, be sure to click SUBMIT CASE before exiting the system. This final step in the on-line process is required even if you will be submitting additional information at a later time. Failure to formally submit your request by clicking the SUBMIT CASE button will cause the case record to expire with no additional correspondence from CareCore National.

Cancel Back Print Continue

Click here for help or technical support

Verify all information entered and make any needed changes prior to moving into the clinical collection phase of the preauthorization process.

You will not have the opportunity to make changes after that point.

Clinical Certification

Clinical	Certification
----------	---------------

Is this request to evaluate suspicion of cancer, screening for cancer, active evaluation or monitoring of known cancer?
 Yes
 No

Finish Later	Did you know?
	You can save a certification request to finish later.
	request to finish later.

Cancel Print

SUBMIT

Once you have entered the clinical collection phase of the case process, you can save the information and return within (2) business days to complete.

Clinical Certification

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Clinical Co	ertification	
Suspected New	f the following best describes the reason for the requested study. Stroke with or without a Prior History of Stroke 🔹	
SUBMIT		
🗆 Finish Later	Did you know? You can save a certification request to finish later.	
Cancel Print		
Cancel Print		

Questions will populate based upon the information provided.

Medical Review

Clinical Certification

Is there any additional information specific to the member's condition you would like to provide?

- C I would like to upload a document
- OI would like to enter additional notes in the space provided
- C I would like to upload a document and enter additional notes
- C I have no additional information to provide at this time

Enter text in the space provided below or both.

Additional Info							
					-		
					-	~	
ou may upload	d a document from your comp	outer (PDF o	r Word less tha	an 5MB)			
• • • • • • • • • • • • • • • • • • •							
Additional Uplo	oad Document:	-					
		Browse					
			_				
UBMIT							
SUBMIT							
	Did you know?						
	Did you know? You can save a certification						
	You can save a certification						
БИВМІТ							
	You can save a certification						
	You can save a certification						

If additional information is required, you will have the option to either upload documentation, enter information into the text field, or contact us via phone.

Approval

Clinical Certification

Your case has been Approved. Provider Name: Contact: Provider Phone Address: Number: Fax Number: Patient Id: Patient Name: Insurance Carrier: Site Name: Site ID: Site Address: Diagnosis Code: F01.50 Description: Vascular dementia without behavioral disturbance Date of Service: Not provided CPT Code: Description: MRI Brain W/O CONTRAST 70551 Authorization Number: Review Date: 10/18/2016 3:52:55 PM Expiration Date: 12/2/2016 Your case has been Approved. Status:

Suspected New Stroke with or without a Prior History of Stroke meets criteria

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, an approval will be issued.

Print the screen and store in the patient's file.

Print Continue

Building Additional Cases

Home	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress
Tuesday,	October 18, 2016 3:58 PM			
Clinica	al Certification			
Thank yo	u for submitting a request	for clinical certificatio	on. Would you like to:	
 Ret 	turn to the main menu			
	rt a new request			
 Res 	sume an in-progress request			
You can a	also start a new request us	ing some of the same	information.	
Start	a new request using the sa	me:		
○ Pro	ogram (Radiology)			
	ovider			
	ogram and Provider (Radio			
O Pro	ogram and Health Plan (Ra	diology and		
GO				
	7			
Cancel Prir	ht			

Once a case has been submitted for clinical certification, you can return to the Main Menu, resume an in-progress request, or start a new request. You're even able to indicate if any of the previous case information will be needed for the new request.

Authorization Look Up

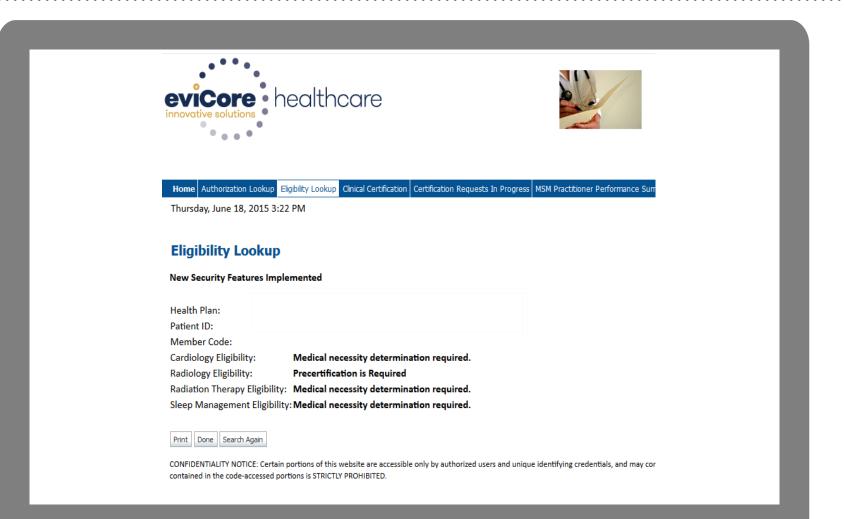
evicore healthcare		
Home Authorization Lookup Eligibility Lookup Clinical Certification Certification Thursday, June 18, 2015 3:07 PM	evicore healthcare	Provider Web Portal
Authorization Lookup New Security Features Implemented	Home Authorization Lookup Eligibility Lookup Clinical Certification Certification Requests In Progress MSM Practitioner Performance Summar Thursday, June 18, 2015 3:10 PM Authorization Lookup	y Portal Resources Manage Your Account
REQUIRED FIELDS Healthplan: - Provider NPI:	New Security Features Implemented REQUIRED FIELDS Healthplan: Provider NPI: Patient ID: Patient Date of Birth: MM/DD/YYYY	
Print CONFIDENTIALITY NOTICE: Certain portions of this website are accessible only contained in the code-accessed portions is STRICTLY PROHIBITED.	OPTIONAL FIELDS Case Number: or Authorization Number: Print Search	

CONFIDENTIALITY NOTICE: Certain portions of this website are accessible only by authorized users and unique identifying credentials, and may contain confidential or privileged information. If you are not an aut contained in the code-accessed portions is STRICTLY PROHIBITED.

Authorization Status

Authorization Number	:
Case Number:	A reserve of
Status:	Approved
ApprovalDate:	5/28/2014 1:07:36 PM
Service Code:	72148
	CHANGE SERVICE CODE
Service Description:	MRI LUMBAR SPINE W/O CONTRAST
Site Name:	
Expiration Date:	7/12/2014
Date Last Updated:	5/28/2014 1:07:36 PM
Correspondence:	VIEW CORRESPONDENCE

Eligibility Look Up



eviCore Web Portal Technical Assistance



Web Portal Services are available 24/7.

Provider Resources

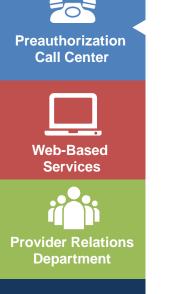






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Provider Resources: Preauthorization Call Center



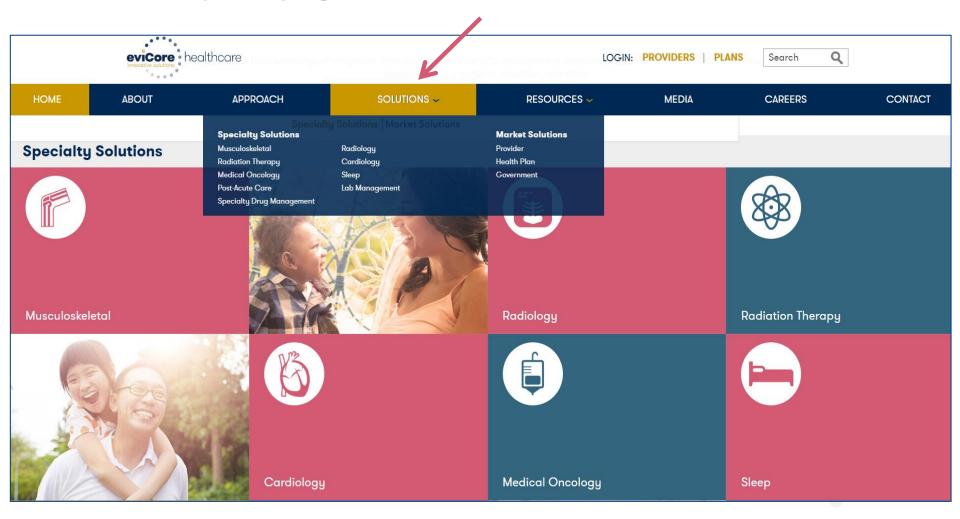
7 a.m. to 7 p.m.: 844.303.8452

- Obtain preauthorization or check the status of an existing case
- Discuss questions regarding preauthorizations and case decisions
- Change facility or CPT Code(s) on an existing case that was initiated via eviCore through the YourHealthAlliance.org sign-on

Provider Enrollment Questions Contact Health Alliance Medical Plans at HealthAlliance.org

Tools & Criteria

Clinical Guidelines, FAQ's, Clinical Worksheets, Fax Forms, and other important resources can be accessed at eviCore.com. Click "Solutions" from the menu bar, and select the specific program needed.

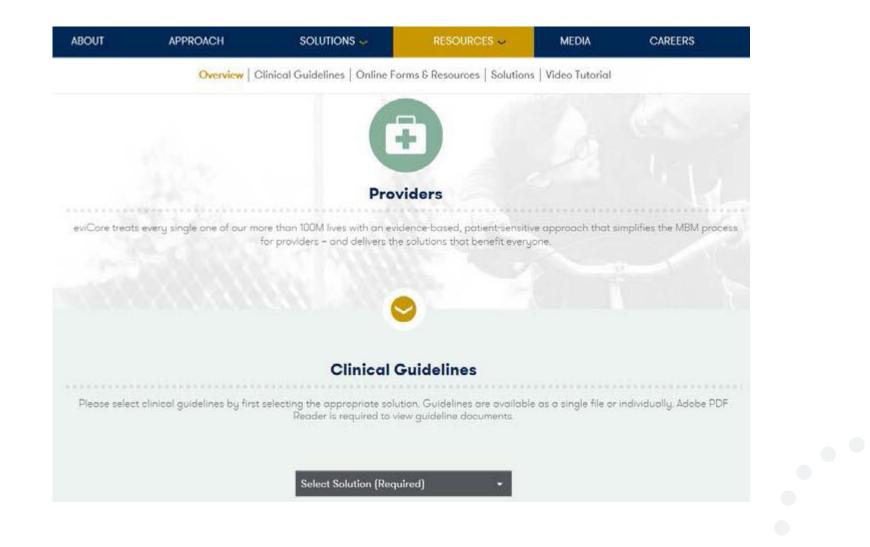


How To Access Clinical Guidelines

- To access eviCore healthcare's Clinical Guidelines on the web, visit eviCore.com.
- Click on "Resources" from the main menu, and select "Providers."



Once you have clicked "**Providers**," you will see the Clinical Guidelines section.



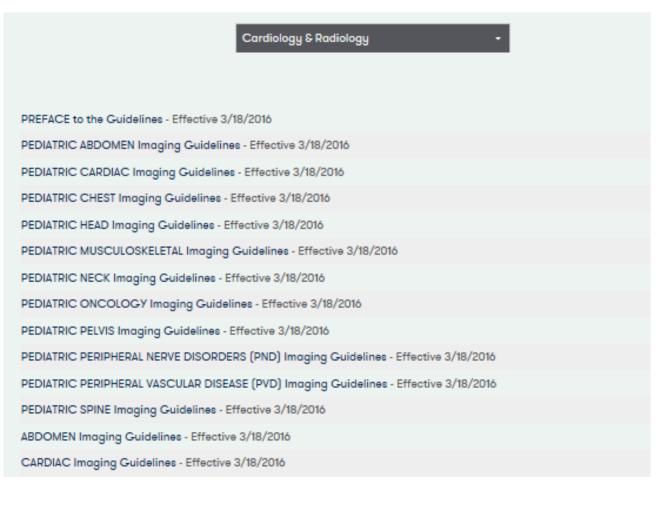
The "Clinical Guidelines" section provides a dropdown box that allows you to Select Solution: Cardiology & Radiology, Medical Oncology, Musculoskeletal, Post-Acute Care, Lab Management, Sleep, Radiation Therapy, and Specialty Drug Management.

Clinical Guidelines

Please select clinical guidelines by first selecting the appropriate solution. Guidelines are available as a single file or individually. Adobe PDF Reader is required to view guideline documents.

Select Solution (Required)	•	L							
Select Solution (Required)	^								
Cardiology & Radiology									
Medical Oncology									
Musculoskeletal									
Post-Acute Care									
Lab Management									
 Sleep		•			 	 	 	 	
Radiation Therapy									
Specialty Drug Management	~	1							

Click on the solution you need, and all Clinical Guidelines for that solution will populate. (Example below shows only a portion of guidelines available for Cardiology/Radiology)



There may be instances where you need to access the health plan specific guidelines. Scroll toward the bottom of the Clinical Guideline page you are viewing, and click "View More."

+ View more for health plan specific cardiology & radiology guidelines

The "View More" option will populate the health plan specific guidelines available.

View less for health plan specific cardiology & radiology guidelines
BCBS AL Radiology Guidelines - Effective 6/13/2015
BCBS AL Blue Advantage Radiology Guidelines - Effective 5/1/2015
Neighborhood Health Partnership Cardiology Guidelines - Effective 3/18/2016
Neighborhood Health Partnership Radiology Imaging Guidelines - Effective 3/18/2016
Oxford Cardiology Guidelines - Effective 3/18/2016
River Valley Cardiology Imaging Guidelines - Effective 3/18/2016
River Valley Radiology Imaging Guidelines - Effective 3/18/2016



Pre-Certification Call Center





Health Alliance Medical Plans Implementation Site:

Provider Resources: Implementation Site

eviCore.com/healthplan/Health_Alliance

- CPT code list of the procedures that require preauthorization
- Touchstone quick reference guide
- eviCore clinical guidelines

Provider Resources: Provider Relations Department



Preauthorization Call Center





ProviderRelations@evicore.com

To speak with an eviCore Provider Relations representative, call 800.646.0418 (Option 3)

- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Request for an authorization to be resent to the health plan
- Request for education/training on program processes

To obtain a copy of this presentation, please contact the Provider Relations department at <u>ProviderRelations@evicore.com</u>

Thank You!



