Prior Authorization of Advanced Diagnostic Imaging, Cardiology & Pain Management for Aetna Better Health Florida

Provider Orientation





Company Highlights

4K employees including 1K clinicians

Headquartered in Bluffton, SC Offices across the US including:

- Lexington, MA
- Colorado Springs, CO •
- Franklin, TN
- Greenwich, CT

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

SHARING A VISION AT THE CORE OF CHANGE.

100M members managed nationwide



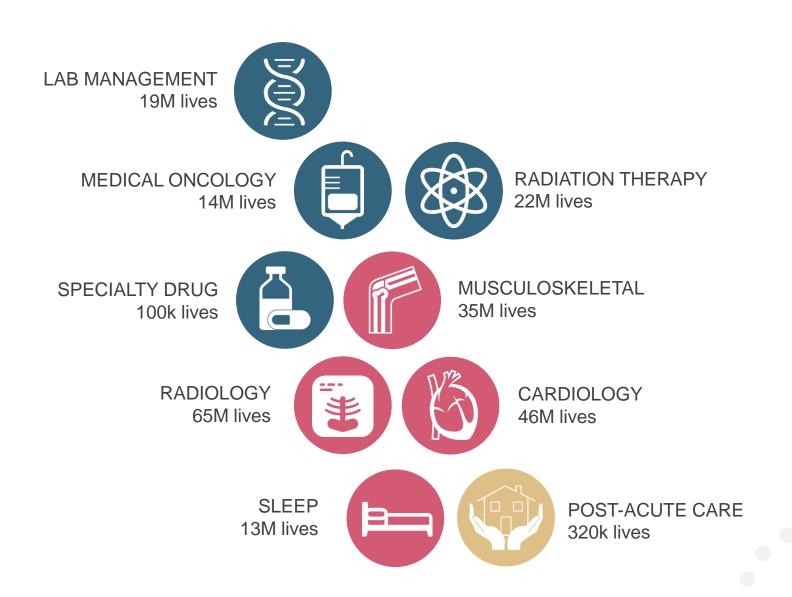








Integrated Solutions





Radiology Solution

Experience

- 22 years' experience since 1994
- 30+ regional and national clients
- 65M total members
 - 51M Commercial membership
 - 6.8M Medicare membership
 - 7.2M Medicaid membership







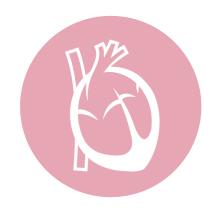


Radiology Solution

Covered Services

Advanced imaging services

- CT, CTA
- MRI, MRA
- PET, PET/CT



Cardiology Solution

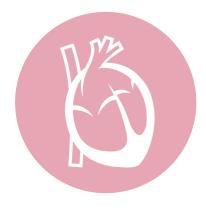
Experience

- 10 years' experience since 2006
- 20+ regional and national clients
- 46M total membership
 - 37.7M Commercial membership
 - 2.3M Medicare membership
 - 5.98M Medicaid membership









Cardiology Solution

Covered Services

Advanced imaging and diagnostic services

- Stress Testing
 - Myocardial Perfusion Imaging (SPECT & PET)
 - Stress Echocardiography
 - Cardiac PET, CT & MRI
- Echocardiography; Transthoracic, Transesophageal
- Diagnostic Heart Catheterization



Musculoskeletal Solution Experience

- 8 years' experience since 2008
- 30+ regional and national clients
- 35M total membership
 - 26M Commercial membership
 - 7M Medicaid membership
 - 2M Medicare membership
- 4,300 average cases built per day









Musculoskeletal Solution Covered Services

Interventional Pain

- Spinal injections
- Spinal denervations
- Stimulators/pain pumps

Our Clinical Approach

Clinical Platform

Multi-Specialty Expertise

Family Medicine	Oncology/Hematology
Internal Medicine	Surgery
Pediatrics	 General Orthopedic Thoracic Cardiac Neurological Otolaryngology Spine
Sports Medicine	
OB/GYN	
Cardiology	
Nuclear Medicine	
Anesthesiology	Radiology
Radiation Oncology	Nuclear MedicineMusculoskeletalNeuroradiology
Sleep Medicine	

- 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

Evidence-Based Guidelines

The foundation of our solutions:





Contributions from a panel of community physicians



Experts associated with academic institutions



Current clinical literature

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 Academy of Pediatrics
- 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

Service Model

Client Provider Operations

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

Client Provider Representatives



Client Provider Representatives are cross-trained to investigate escalated provider and health plan issues.

Client Service Managers



Client Service Managers lead resolution of complex service issues and coordinate with partners for continuous improvement.

Regional Provider Engagement Managers



Regional Provider Engagement Managers are on-the-ground resources who serve as the voice of eviCore to the provider community.

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.

Radiology/Cardiology/Pain Management Prior Authorization Program for Aetna Better Health FL



AETNA BETTER HEALTH®

Program Overview

eviCore will begin accepting requests on February 27, 2017 for dates of service February 27, 2017 and beyond

Prior authorization applies to services that are:

- Outpatient
- Elective/non-emergent
- Diagnostic

Prior authorization does not apply to services that are performed in:

- Emergency room
- Inpatient
- 23-hour observation

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

Prior Authorization Required:

- CT, CTA (Computed Tomography, Computed Tomography Angiography)
- MRI, MRA (Magnetic Resonance Imaging, Magnetic Resonance Angiography)
- PET (Positron Emission Tomography)
- NCM/MPI (Nuclear Cardiac Imaging)
- Echocardiography (TTE, TEE and SE)
- Diagnostic Heart Catheterizations
- OB/NON-OB Ultrasounds

Pain Management - (previously Triad)

- Spinal injections
- Spinal implants
 - Spinal cord stimulators
 - Pain pumps

To find a list of CPT
(Current Procedural Terminology)
codes that require prior authorization
through eviCore, please visit:

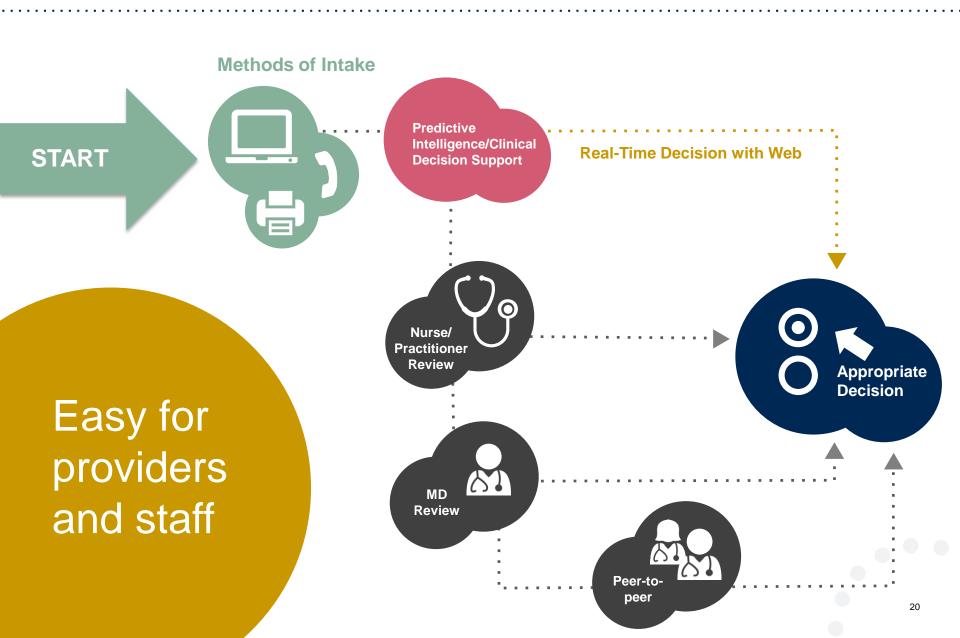
https://www.evicore.com/healthplan/ABH_FL

Prior Authorization Requests

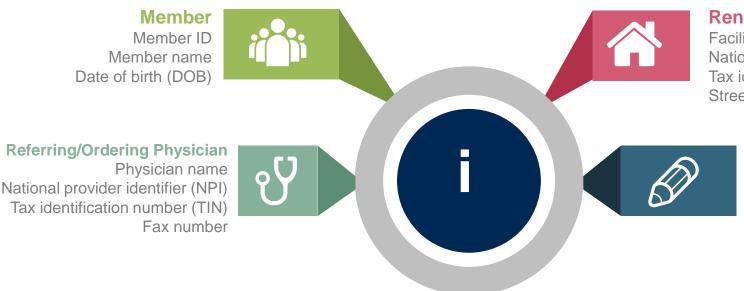
How to request prior authorization:



Clinical Review Process



Needed Information



Rendering Facility

Facility name
National provider identifier (NPI)
Tax identification number (TIN)
Street address

Requests

CPT code(s) for requested imaging

The appropriate diagnosis code for the working of differential diagnosis

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

Prior Authorization Outcomes



- All requests are processed within 7 calendar days for FL Medicaid and 14 calendar days for FL Healthy Kids (CHIP)after receipt of all necessary clinical information.
- Authorizations are typically good for 60 calendar days from the date of request.

Delivery:

- Faxed to ordering provider
- Mailed to the member
- Information can be printed on demand from the eviCore healthcare Web Portal

Denied Requests:

- Communication of denial determination
- Communication of the rationale for the denial
- How to request a Peer Review
- Appeals are handled directly by Aetna Better Health

Delivery:

- Faxed to the ordering provider and rendering facility
- Mailed to the member

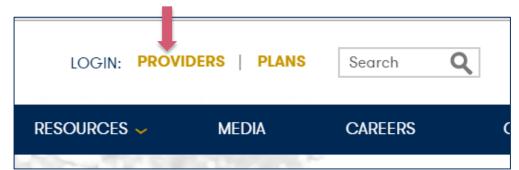
Web Portal Services

eviCore healthcare website

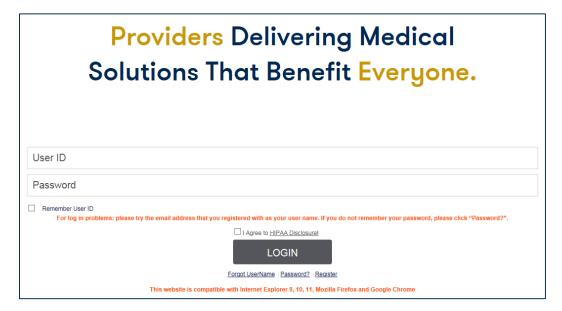
Point web browser to evicore.com



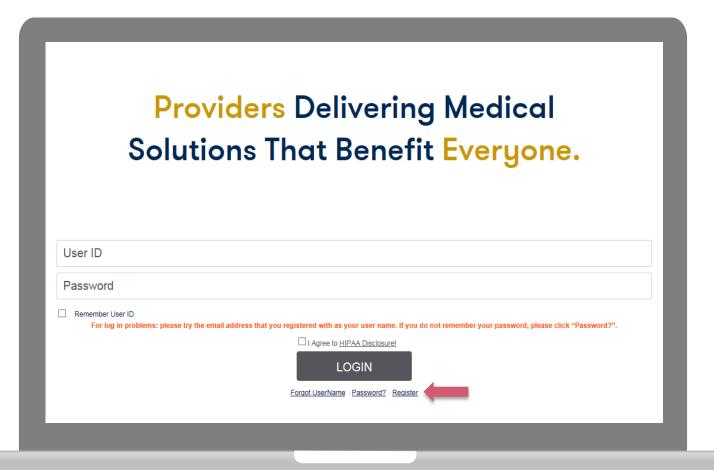
Click on the "Providers" link



Login or Register

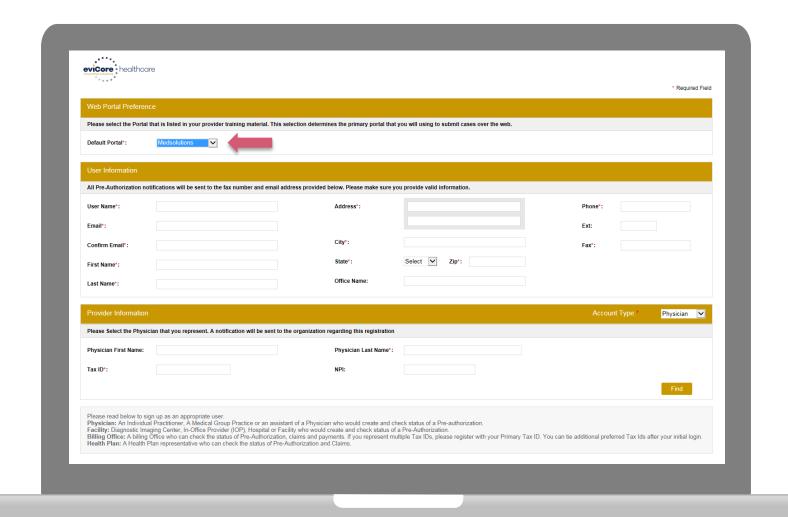


Creating An Account



To create a new account, click Register.

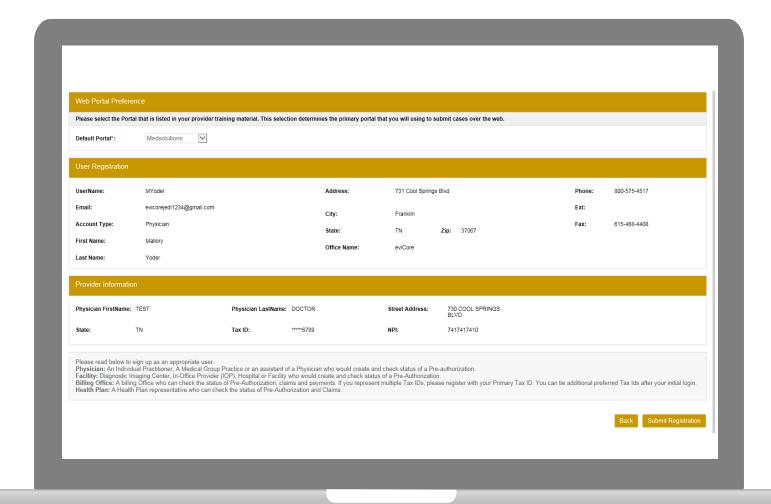
Creating An Account





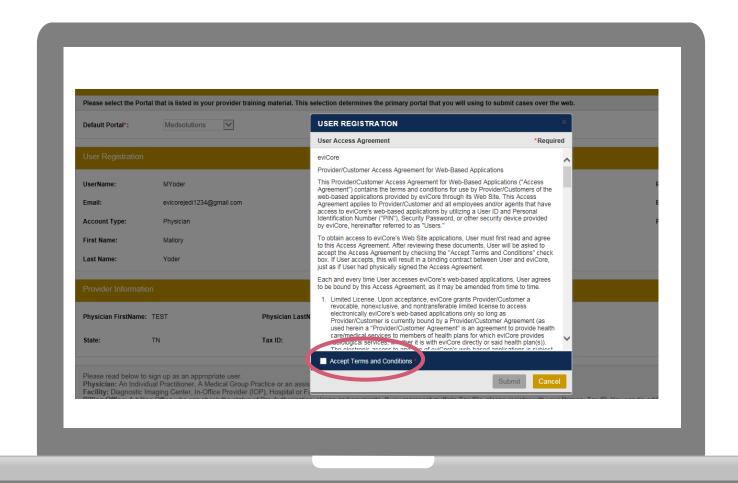


Creating An Account





User Registration-Continued





User Registration-Continued

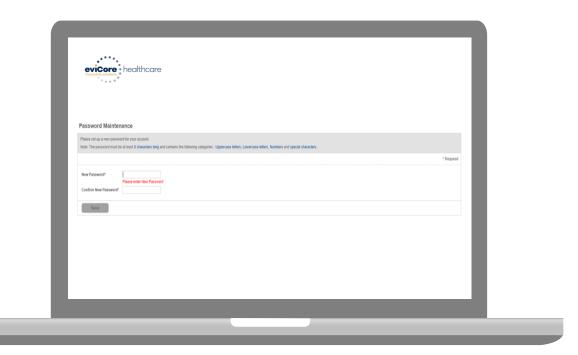


You will receive a message on the screen confirming your registration is successful. You will be sent an email to create your password.

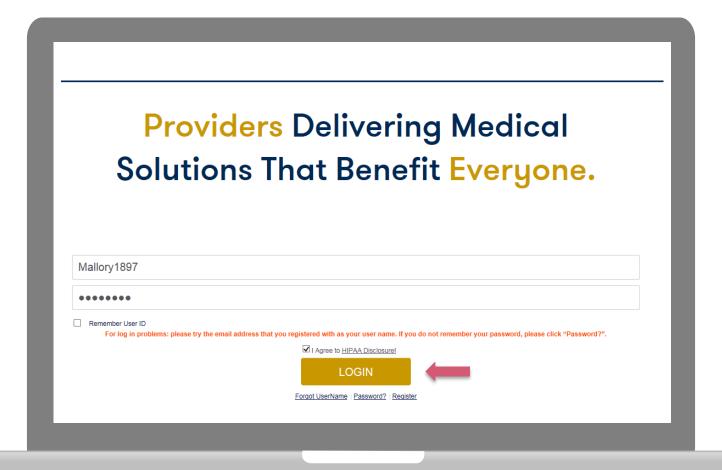
Create a Password

Your password must be at least (8) characters long and contain the following:

- Uppercase letters
- Lowercase letters
- Numbers
- Characters (e.g., ! ? *)

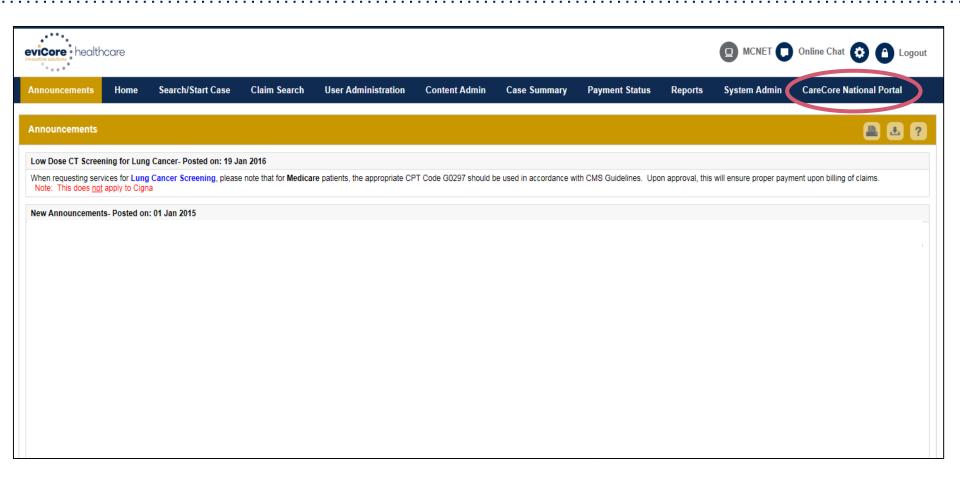


Account Log-In



To log-in to your account, enter your User ID and Password. Agree to the HIPAA Disclosure, and click "Login."

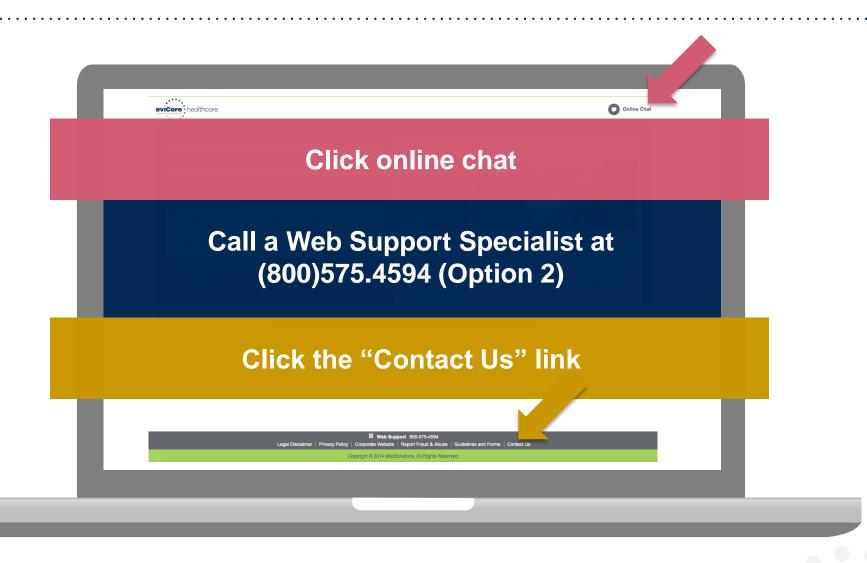
Announcement



Once you have logged in to the site, you will be directed to the main landing page that includes important announcements.

<u>Note</u>: You can access the CareCore National Portal at any time once registered. Click the CareCore National Portal button on the top right corner to seamlessly toggle back and forth between the two portals without having to log-in multiple accounts.

Web Portal Services-Assistance



Provider Resources



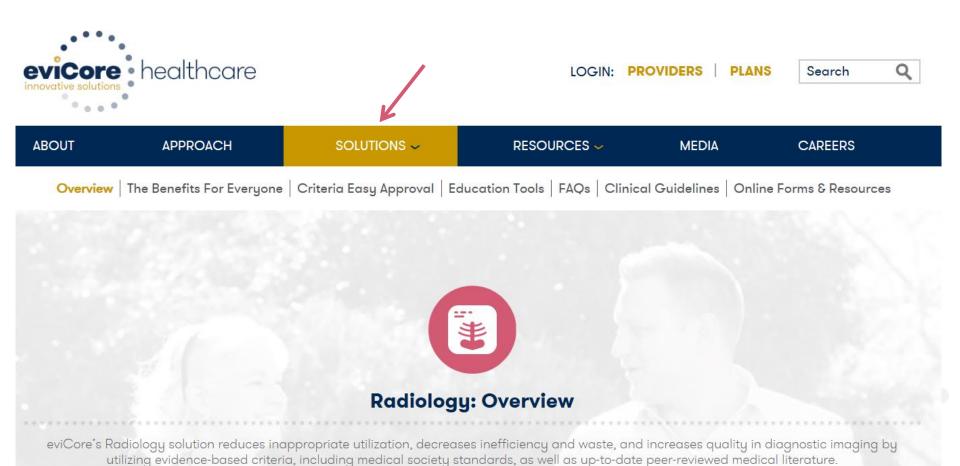






Online Resources

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



Provider Resources: Web-Based Services





Web-Based Services





www.evicore.com

To speak with a Web Specialist, call (800) 575-4594 or email portal.support@evicore.com

- Request authorizations and check case status online
- Print case summary reports
- Attach clinical documents during <u>and</u> after case creation
- Auto save no data lost
- Export and print work lists
- View cases by individual user and office

Provider Resources: Prior Authorization Call Center





Web-Based Services





7:00 AM - 8:00 PM CST: (888) 693-3211

- Obtain pre-certification or check the status of an existing case
- Discuss questions regarding authorizations and case decisions
- Change facility or CPT Code(s) on an existing case

eviCore fax number: 1-844-82AETNA

Provider Resources: Client Services Department





Web-Based Services





clientservices@evicore.com

- 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

Provider Resources: Implementation Document





Web-Based Services





Provider Enrollment Questions Contact – Please call the number on the back of the member's card

Aetna Better Health Implementation site - includes all implementation documents:

https://www.evicore.com/healthplan/ABH_FL

- CPT code list of the procedures that require prior authorization
- ABH quick reference guide
- eviCore clinical guidelines
- FAQ documents and announcement letters

To obtain a copy of this presentation, please contact the Client Services department at clientservices@evicore.com

Thank You!

