
eviCore Radiation Therapy Program Platform Improvements

Providers who have previously submitted Radiation Therapy prior authorization requests to eviCore on the legacy CareCore National (ISAAC) utilization management system will notice several differences in authorizations approved via the ImageOne platform. On the ImageOne platform, eviCore reviews the overall treatment plans submitted, rather than the specific individual codes requested on the ISAAC platform.

The ISAAC platform is designed to review and approve a specific radiation therapy treatment plan. Authorizations include approvals for the radiation technique (e.g., 3D, SRS, IMRT) with or without image guidance, the number of fractions (treatment sessions) and the number of phases (or cone-downs).

The ImageOne platform provides approval for an episode of care (EOC) that is inclusive of all relevant and necessary CPT codes associated with treatment delivery and Image Guided Radiation Therapy (i.e., codes within the scope of the eviCore radiation therapy managed code list). This approach has proven to be more advantageous than reviewing individual CPT codes or providing a list of approved CPT codes.

The EOC approach benefits providers by:

Minimizing Administrative Burden

Modifications in treatment delivery may occur during the course of treatment. When the program requires the review of individual CPT codes, it also necessitates reviews for each subsequent modification or correction. The additional reviews create potential for denials and delays in patient care. eviCore's EOC authorization offers a more efficient method for updates to the treatment plan because a variety of codes are covered under the authorization.

Increasing Treatment Flexibility

There are many codes that can be substituted for one another dependent on the evolution of care. For example, the approved authorization might be for a 3D conformal treatment plan. Based on the evolution of the patient's care, it might be necessary to deliver a less complex dose of 3D conformal radiation (77402) versus a more complex dose of 3D conformal radiation (77407). eviCore doesn't want to limit the provider to a specific CPT code if the less complex radiation dose is more appropriate.

Facilitating Accurate Billing and Claims Payment

The EOC allows the provider and/or facility to bill according to the level of complexity rendered within the course of treatment. To participate effectively, providers must be familiar with the appropriate codes associated with an episode of care and should understand the various edits to minimize or eliminate claim denials. Providers should bill according to the treatment plan that was rendered, and billing should align with the national billing guidelines for radiation therapy.

For additional information related to the eviCore radiation therapy program and billing, please see the following resources:

- <https://www.astro.org/>
- <https://www.cms.gov/>
- <https://www.evicore.com/> -> Solutions -> Radiation Therapy -> Clinical Guidelines
- https://www.evicore.com/healthplan/1199_SEIU_Funds