

Prevea360 Health Plan Musculoskeletal Care Management (MSK) Program Quick Reference Guide for Ordering Physicians/Surgeons

April 1, 2019

Prevea360 Health Plan has entered into an agreement with NIA, to implement a Musculoskeletal Care Management (MSK) Program. This program includes prior authorization for non-emergent MSK: inpatient and outpatient hip, knee, shoulder and spine surgeries. This decision is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

The following procedures are currently included in the Musculoskeletal Management Care Program for Prevea360 Health Plan members:

- Inpatient and outpatient lumbar and cervical spine surgeries
- Inpatient and outpatient knee surgeries
- Inpatient and outpatient hip surgeries
- Inpatient and outpatient shoulder surgeries

Prior Authorization Implementation

As a provider of MSK services that require prior authorization, it is essential that you develop a process to ensure that the appropriate authorization number have been obtained.

It is the responsibility of the ordering physician/surgeon and rendering facility to ensure that prior authorization was obtained, when necessary. Payment will be denied for procedures performed without a prior authorization, which will include the MSK surgery hospital admission with the ordering physician/surgeon (1 authorization needed), and the member cannot be balance-billed for such procedures.

Procedures Requiring Prior Authorization Outpatient and Inpatient Spine Surgery Services:

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetectomy & Foraminotomy)
- Lumbar Spine Fusion (Arthrodesis) With or Without Decompression – Single & Multiple Levels
- Cervical Anterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression (without fusion)
- Cervical Artificial Disc Replacement
- Cervical Anterior Decompression (without fusion)

Outpatient and Inpatient Hip Surgery Services: **

- Revision/Conversion Hip Arthroplasty
- Total Hip Arthroplasty/Resurfacing
- Femoroacetabular Impingement (FAI) Hip Surgery (includes CAM/pincher & labral repair)
- Hip Surgery – Other (includes synovectomy, loose body removal, debridement, diagnostic hip arthroscopy, and extra-articular arthroscopy)

Outpatient and Inpatient Knee Surgery Services: **

- Revision Knee Arthroplasty
- Total Knee Arthroplasty (TKA)
- Partial-Unicompartmental Knee Arthroplasty (UKA)
- Knee Manipulation under Anesthesia (MUA)
- Knee Ligament Reconstruction/Repair
- Knee Meniscectomy/Meniscal Repair/Meniscal Transplant
- Knee Surgery – Other (includes synovectomy, loose body removal, diagnostic knee arthroscopy, debridement with or without chondroplasty, lateral release/patellar realignment, articular cartilage restoration)

**Surgeon must request surgery authorization for each joint, even if bilateral joint surgery is to be performed on the same date.

Outpatient and Inpatient Shoulder Surgery Services: **

- Revision Shoulder Arthroplasty
- Total/Reverse Arthroplasty or Resurfacing
- Partial Shoulder Arthroplasty/Hemiarthroplasty
- Shoulder Rotator Cuff Repair
- Shoulder Labral Repair
- Shoulder Surgery – Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, claviclectomy, diagnostic shoulder arthroscopy)

NIA will manage non-emergent inpatient and outpatient hip, knee, shoulder and spine surgeries through the existing contractual relationships with Prevea360 Health Plan. If an urgent/emergent clinical situation exists outside of a hospital emergency room, please contact NIA immediately with the appropriate clinical information for an expedited review. The number to call to obtain a prior authorization is 1-877-642-0622 for Prevea360 Health Plan providers in Wisconsin.

Please refer to NIA's website www.RadMD.com to obtain the Prevea360 Health Plan NIA Billable CPT® Codes Claim Resolution/Utilization Review Matrix for all of the CPT-4 codes that NIA authorizes on behalf of Prevea360 Health Plan.

Prior Authorization Information

To ensure that authorization numbers have been obtained, please adhere to the following guidelines.

Outpatient and Inpatient Musculoskeletal Surgeries:

- Emergency musculoskeletal surgery (admitted via the Emergency Room) does not require prior authorization through NIA.

- Non-emergent outpatient and inpatient hip, knee, shoulder and spine surgery services require prior authorization through NIA.
- The ordering physician must obtain prior authorization with NIA prior to performing the surgery. This will include the facility admissions. Additionally, the facility should ensure that a NIA prior authorization has been obtained prior to scheduling the surgery/procedure.
- NIA's medical necessity review and determination is for the authorization of the surgeon's professional services and type of surgery being performed. NIA will provide the Prevea 360 Health Plan with the surgery type requested and authorization determination.
- Authorizations are valid for 90 days from the date of service for outpatient and 14 days from date of service for inpatient.

Checking Authorizations

You can check on the status of patients' authorizations quickly and easily by going to the NIA website, www.RadMD.com. After obtaining a secure password sign-in to select, the **My Exam Requests** tab to *view all* outstanding authorizations.

Submitting Claims

Claims will continue to go directly to Prevea360 Health Plan. Please send your claims for MSK procedures to the following address:

Prevea360 Health Plan
P.O. Box 56099
Madison, WI 53705

Quick Contacts

- Website: www.RadMD.com
- Toll Free Phone Numbers:
- 1-877-642-0622

Providers are encouraged to use EDI claims submission.

Prevea360 Health Plan payor ID number is 39113.

Frequently Asked Questions

In this section NIA addresses commonly asked questions received from providers.

Where can I find NIA's Guidelines for these MSK procedures?

Guidelines can be found on NIA's website at www.RadMD.com.

Is prior authorization necessary if Prevea360 Health Plan is not the member's primary insurance?

- Yes

What does the NIA authorization number look like?

The NIA authorization number consists of 8 or 9 alpha/numeric characters (e.g., 1234X567). In some cases, the ordering physician may instead receive a NIA tracking number (not the same as an authorization number) if the physician's authorization request is not approved at the time of initial contact. Physicians can use either number to track the status of their request on the RadMD Web site or via our Interactive Voice Response telephone system.

Who can I contact at NIA for questions, complaints, and appeals, etc.?

Please use the following NIA contacts by type of issue:

- To educate your staff on NIA procedures and to assist you with any provider issues or concerns, contact your NIA Area Provider Relations Manager.
- Preauthorization and claims payment complaints/appeals: Follow the instructions on your non-authorization letter or Explanation of Benefit (EOB)/Explanation of Payment (EOP) notification.

How will referring/ordering physicians know who NIA is?

Prevea 360 Health Plan sends orientation materials to referring/ordering providers. Prevea360 Health Plan and NIA are also coordinating additional outreach and orientation activities.

What will the member ID card look like? Will it have both NIA and Prevea360 Health Plan information on the card? Or will there be two cards?

The Prevea360 Health Plan member ID card will not have NIA identifying information on it.