

SPECIAL eBULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

OCT. 1, 2018

EVICORE TO MANAGE HIGHMARK'S ADVANCED IMAGING AND CARDIOLOGY SERVICES PROGRAM BEGINNING JAN. 1, 2019

At Highmark we believe we have to put patients first. To deliver the value-based care that patients deserve, we need to change how health care works. To do this, we are continuing to partner with you to provide the most appropriate care possible.

Working with health care providers and care teams, we're helping to implement nationally accepted, evidence-based guidelines. Often, these models only require some changes to the way most practitioners deliver care today. More important, they're proven to add up to better patient outcomes and more affordable care.

To that end, Highmark is partnering with eviCore healthcare (eviCore) for a new Advanced Imaging and Cardiology Services Program, effective Jan. 1, 2019. This program incorporates a comprehensive, evidence-based clinical review, including predictive intelligence, clinical decision support, and peer-to-peer discussions.

The eviCore program will replace the previously implemented National Imaging Associates (NIA) program. However, eviCore will oversee the same Highmark members and prior authorize largely the same set of advanced diagnostic imaging and cardiology services along with new additional services. [Click here](#) to review the list of CPT[®] and HCPCS procedure codes that will require prior authorization through the new program beginning Jan. 1, 2019. **Note:** The procedure codes indicated in red are new codes that will require prior authorization through the Advanced Imaging and Cardiology Services Program.

In addition, to ensure our members receive high-quality care, Highmark is working with eviCore to certify qualified imaging providers and facilities and to confirm that advanced imaging and cardiology services are provided with tested and relevant technology. eviCore will also introduce an enhanced radiation safety program which will provide insights on radiation exposure levels to further ensure the safety of our members.

We will provide additional information about our new Advanced Imaging and Cardiology Services Program as we get closer to the Jan. 1, 2019, implementation date.

Watch for detailed information on the Highmark Provider Resource Center for everything you'll need to know.



Thank you for your continued assistance in ensuring that Highmark members receive necessary services in a high-quality, clinically appropriate fashion. We appreciate your support and the care you provide to our members and your patients.

ADDITIONAL DETAILS ON THE EVICORE TRANSITION

Submission Details

Providers can begin submitting privileging applications to eviCore for dates of service after Jan. 1, 2019. Furthermore, providers whose privileges expire during the first quarter of 2019 (January, February, or March) will be given a three-month privileging extension. Privileges that would have expired on Jan. 2, 2019, will be extended until April 2, 2019. During this transition, please be aware that eviCore may take up to 20 days — as opposed to the usual 14 days — to complete a privileging request. NIA will stop accepting privileging requests on Dec. 14, 2018.

Beginning Dec. 17, 2018, providers may request prior authorization through eviCore for procedures or services scheduled for Jan. 1, 2019, and after. If a prior authorization is not requested for a procedure or service planned for Jan. 1, 2019, and later, the claim may be denied. If services are scheduled before Jan. 1, 2019, please request prior authorizations for those services through NIA.

Members Impacted

eviCore will manage the prior authorizations for advanced imaging and cardiology services for Highmark's fully insured Commercial, Children's Health Insurance Program (CHIP) of Pennsylvania, Medicare Advantage, and Affordable Care Act members, plus members of select self-insured (Administrative Services Only) groups.

Note: The Federal Employee Program is excluded from this program.

Remember, some employer groups may choose to opt out of the program, so please always verify the member's eligibility and benefits before delivering care to confirm if an authorization is required. NaviNet[®] is available to help you check member benefits and to verify if an authorization is required.

You can determine if a member's benefit plan requires prior authorization on the Eligibility and Benefits Details screen in NaviNet. In the Group Information section, Advanced Imaging will display "YES" if the Advanced Imaging and Cardiology Services Program applies to the member's plan and if prior authorization is required.

Claims Adjudication and Medical Policies

Under the terms of the agreement between Highmark and eviCore, Highmark will oversee the eviCore program and will continue to be responsible for claims adjudication and medical policies. eviCore will manage elective or non-emergent outpatient advanced imaging and cardiology services through the existing contractual relationships with Highmark.

To review eviCore's medical policies, you may go to the Highmark implementation site at evicore.com/healthplan/highmark.

Note: Providers rendering the specific advanced imaging or cardiology service should verify that the necessary authorization has been obtained before providing the service. Failure to do so may result in non-payment of the claim, and you may not seek reimbursement from the member.

WHAT PROCEDURES REQUIRE PRIOR AUTHORIZATION THROUGH THIS PROGRAM?

The following outlines the specific procedures requiring the prior authorization components of the Advanced Imaging and Cardiology Services Program.

Advanced Imaging Component

Prior authorization will be required for the following outpatient, non-emergent, elective advanced imaging services:

- CT, CTA
- MRA, MRI
- Nuclear medicine
- PET, PET-CT

Cardiology Services Component

Prior authorization will be required for the following outpatient, non-emergent, elective cardiology services:

- Cardiac CT
- Cardiac MRI
- Diagnostic heart catheterization
- Myocardial perfusion imaging (SPECT and PET)
- Nuclear cardiac imaging
- Stress echocardiogram
- Transesophageal echocardiogram
- Transthoracic echocardiogram

To review the full list of procedure codes that require prior authorization through eviCore, you may go to the Highmark implementation site at [evicore.com/healthplan/highmark](https://www.evicore.com/healthplan/highmark).

KEY PROVISIONS

It is the responsibility of the provider to obtain prior authorization for all advanced imaging and cardiology services listed above.

eviCore does not manage the prior authorization for advanced imaging or cardiology services that are performed during an inpatient stay, in an emergency room setting, or observation stay.

Highmark will honor existing prior authorizations for continuity of care on claims for advanced imaging or cardiology services that overlap during the transition to the new program.

Appeals for services that were denied by NIA should be submitted to NIA no later than June 30, 2019. NIA will review the appeal using the medical policy guidelines that were applicable on the date the service was performed.

ADDITIONAL TRAINING

eviCore is offering web orientation sessions to introduce you and your staff to the new Advanced Imaging and Cardiology Services Program. During the sessions, you'll receive information about the prior authorization requirements for Highmark members and will learn how to navigate the eviCore website. We encourage you to attend an orientation session to learn about the new prior authorization process for advanced imaging and cardiology services. For additional details, please visit eviCore's Highmark implementation site at [evicore.com/healthplan/highmark](https://www.evicore.com/healthplan/highmark).