

Important Update

Hip and Knee Surgery Utilization Management Program Will Expand

Program Expansion

The Hip and Knee Surgery Utilization Management (UM) Program currently applies to our Medicare Advantage BlueMedicareSM HMO and BlueMedicareSM PPO plans. Magellan Healthcare/NIA manages the program on our behalf. Effective January 1, 2019, we are expanding this program to include our HMO health plans (BlueCare[®] and myBlue) for individuals under age 65.

Although we currently review certain hip and knee procedures for BlueCare and myBlue HMO plans, on January 1, we are expanding the list of procedures that require preservice review (see list below). Additionally, the program expansion requires you to *request approval from Magellan Healthcare/NIA* for non-emergency hip and knee surgeries scheduled on or after January 1 for your patients enrolled in these plans.

Please note: Non-HMO Affordable Care Act health plans (BlueOptionsSM, BlueSelect) and BlueChoice[®] for individuals under age 65 *will not be included* in the program on January 1 as previously communicated. The program will apply to Affordable Care Act BlueOptions and Affordable Care Act BlueSelect health plans for individuals under age 65 in the future. We will notify you once the date is confirmed. Please continue to follow current approval processes for hip and knee procedures for these members. You can find details about Florida Blue UM processes in the *Manual for Physicians and Providers* at floridablue.com.

Magellan HealthCare/NIA

Magellan Healthcare/NIA will perform pre-service and/or post-service medical necessity reviews on our behalf for the expanded Hip and Knee UM Program. They are a clinically driven company that effectively manages quality and patient safety. Magellan Healthcare/NIA has orthopedic surgeons who perform reviews, including review of any medical records submitted for a request, to ensure clinically appropriate quality of care and effective utilization for our members.

Hip and Knee Surgeries Included in the Expanded UM Program

The following non-emergency surgeries performed in any setting will require pre-service review:

Knee Surgery

- 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 realignment, articular cartilage restoration)

Hip Surgery

- 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)

Note: Procedures included in the program are subject to change. For a detailed list of hip and knee surgeries that are part of this UM program, please refer to Magellan Healthcare/NIA online resources at radmd.com. On January 1, 2019, you can also find a list in our online *Manual for Physicians and Providers* at floridablue.com > Providers (top of the page) > Provider Manual.

Health Plans Included in the Expanded Hip and Knee Surgery UM Program

HMO (Health Options, Inc.) health plans for individual members under age 65 – effective January 1, 2019

- For your patients enrolled in a BlueCare or myBlue HMO health plan, you are required to obtain authorization for services performed. What's changing is that you must *request approval from Magellan Healthcare/NIA* for the non-emergency hip and knee surgeries listed above for services scheduled on or after January 1, 2019.
- You can submit your requests to Magellan Healthcare/NIA by:
 - Accessing their secure website at radmd.com
 - Calling them toll-free at **866-326-6302**

Note: You can appeal preservice and post-service review decisions for non-emergency hip and knee surgeries through Florida Blue's standard appeal process. Details are included in our online *Manual for Physicians and Providers* at floridablue.com.

Exclusions

This program does not apply to:

- Members who are covered through self-insured administrative services only (ASO) plans
- The Florida State Employees' PPO Plan
- The Federal Employee Program[®]
- Traditional Medicare Supplement health plans
- BlueChoice, BlueOptions and BlueSelect health plans
- Members of other Blue Cross and/or Blue Shield Plans who may access our provider networks through the BlueCard[®] program.

How to Submit Preservice Review Requests Through Magellan Healthcare/NIA

- You may access Magellan Healthcare/NIA's secure website at radmd.com
- Call Magellan Healthcare/NIA at **866-326-6302**

Important: For non-emergency hip and knee surgeries scheduled on or after January 1, 2019, you are required to obtain a preservice review from Magellan Healthcare/NIA. Failure to obtain a preservice review may result in claim denials if medical necessity criteria are not met.

For more information about the program, please read the attached questions and answers.

Questions and Answers

Expanded Hip and Knee Surgery Utilization Management Program

Why is Florida Blue expanding its current Hip and Knee Surgery Utilization Management (UM) Program to non-Medicare members?

The purpose of the program is to improve our members' quality of care, align clinical needs to appropriate hip and knee services and avoid unnecessary non-emergency hip and knee surgeries performed in an inpatient or outpatient setting. We retained Magellan Healthcare/NIA to manage the program on our behalf. Magellan Healthcare/NIA is a clinically driven company that effectively manages quality and patient safety.

What is the effective date?

The effective date is for services provided on or after January 1, 2019.

What health plans are included in the expanded Hip and Knee Surgery UM Program?

HMO (Health Options, Inc.) health plans for individual members under age 65 – effective January 1, 2019:

- For your patients enrolled in a BlueCare or myBlue HMO health plan, you are required to obtain authorization for services performed. What's changing is that you must request approval from Magellan Healthcare/NIA for the non-emergency hip and knee surgeries listed below for services scheduled on or after January 1, 2019.
- You can submit your requests to Magellan Healthcare/NIA by:
 - Accessing their secure website at radmd.com
 - Calling them toll-free at **866-326-6302**

Note: You can appeal preservice and post-service review decisions for non-emergency hip and knee surgeries through Florida Blue's standard appeal process. Details are included in our online *Manual for Physicians and Providers* at floridablue.com.

Are any health plans excluded?

Yes. This program does not apply to:

- Members who are covered through self-insured administrative services only (ASO) plans
- The Florida State Employees' PPO Plan
- The Federal Employee Program[®]
- Traditional Medicare Supplement health plans
- BlueChoice, BlueOptions and BlueSelect health plans
- Members of other Blue Cross and/or Blue Shield Plans who may access our provider networks through the BlueCard program

Will the Hip and Knee UM Program include non-Medicare PPO plans in the future?

Yes. We plan to expand the program to Affordable Care Act BlueOptions (NetworkBlue) and Affordable Care Act BlueSelect (BlueSelect network) health plans for individuals under age 65 in the future and will notify you once the date is confirmed. Please continue to follow current approval processes for hip and knee procedures for these members. You can find details about Florida Blue UM processes in the *Manual for Physicians and Providers* at floridablue.com.

What non-emergency hip and knee surgeries require a preservice review?

The following surgeries require a preservice review:

Knee Surgery

- 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)

Hip Surgery

- 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)

Note: Procedures included in the program are subject to change.

For a detailed list of hip and knee surgeries that are part of the UM Program, please refer to Magellan Healthcare/NIA online resources at radmd.com. On January 1, 2019, you can also refer to the Utilization Management section of the Florida Blue *Manual for Physicians and Providers* on our website at floridablue.com> Providers (top of the page)> Provider Manual.

What if I don't request a preservice review for non-emergency hip and knee surgeries?

For HMO health plans, you will receive an administrative claim denial and you cannot balance bill the member.

Are emergency hip and knee surgeries included in this program?

No. They are not included.

Does the location of service affect preservice review requirements?

No. Preservice review is required for non-emergency hip and knee surgeries.

Who should request preservice reviews for hip and knee surgeries?

Ordering physicians should request a preservice review from Magellan Healthcare/NIA *before a surgery is performed*.

How do I request a preservice review for non-emergency hip and knee surgeries?

- For services scheduled on or after January 1, 2019, ordering physicians should contact Magellan Healthcare/NIA to request preservice reviews for the hip and knee procedures listed above.
- You can do this by accessing their secure website at radmd.com or by calling them toll-free at **866-326-6302**.

What information does Magellan Healthcare/NIA require for preservice reviews?

To expedite the preservice review process, please have the following information ready before logging on to the Magellan Healthcare/NIA website or calling the Magellan Healthcare/NIA Call Center.

(* = required information):

- Name and office phone number of ordering physician*
- Member name and ID number*
- Requested surgery type*
- Name of facility where the surgery will be performed*
- Anticipated date of surgery*
- Details justifying the surgical procedure*:
 - ✓ Clinical diagnosis*
 - ✓ Physician exam findings (including findings applicable to the requested services)
 - ✓ Diagnostic imaging results

Please be prepared to share the following information if requested:

- Clinical notes outlining type and onset of symptoms
- Length of time with hip or knee pain
- Physical exam findings
- Diagnostic imaging results
- Specialist reports/evaluation

Can I request preservice reviews at the same time for more than one procedure if performed on the same day for a member?

Yes. You can request more than one preservice review at the same time for a patient if more than one procedure is performed on the same day for the same patient.

If I get a preservice review number, does that guarantee payment?

No. A preservice review number is not a guarantee of payment. Preservice reviews are based on medical necessity and the member's eligibility and benefits. Benefits may be subject to limitations and/or qualifications and are determined when the claim is processed.

Where do I send claims for hip and knee surgeries?

You should submit claims to Florida Blue as you do today.

How do I appeal a preservice review denial?

You can submit your appeal request to Florida Blue through our standard appeal process.

How do I appeal a claim denial?

You should submit your request to Florida Blue as you do today.

Is a preservice review required for my patients who already have a hip or knee surgery scheduled on or after January 1, 2019?

Yes. Any non-emergency hip or knee surgery performed on or after January 1, 2019, requires a preservice review through Magellan Healthcare/NIA.

Who reviews preservice review requests for hip and knee surgeries?

Magellan Healthcare/NIA has orthopedic surgeons who perform preservice medical necessity reviews, including the review of any medical records submitted for the request.

Does the preservice review requirement affect authorization requirements for the facility?

No. The medical necessity review is for the surgeon's professional services and the type of surgery performed. Magellan Healthcare/NIA will let us know what type of surgery is scheduled and what the decision is regarding medical necessity for the procedure.

Facilities must continue to follow *our preauthorization processes* for hospital admissions and elective surgery.

Note: Any Florida Blue preauthorization requirements for the facility or hospital admission must be obtained *after the surgery meets Magellan Healthcare/NIA's medical necessity criteria*.

What does the NIA Magellan preservice review number look like?

The Magellan Healthcare/NIA preservice review number includes eleven alphanumeric characters. In some cases, the ordering physician may receive a Magellan Healthcare/NIA tracking number instead (not the same as a preservice review number) if the request is not approved right away. Ordering physicians can use either number to track the status of their request online or through Magellan Healthcare/NIA's voice response telephone system.

Can ordering physicians verify a preservice or tracking number?

Yes. Ordering physicians can check the status quickly and easily by going to Magellan Healthcare/NIA's website at radmd.com.

Where can I get details about medical coverage guidelines for non-emergency hip and knee surgeries?

You can find Magellan Healthcare/NIA Clinical Guidelines on their website at radmd.com. They are in a PDF file format that you can print for future reference. Magellan Healthcare/NIA developed clinical guidelines from practice experience, literature reviews, specialty criteria sets and empirical data.

Where can I find more information?

For more information, please refer to the Utilization Management section of the Florida Blue *Manual for Physicians and Providers* on our website at floridablue.com > Providers (top of the page) > Provider Manual.