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| Massachusetts coat of arms | ***Commonwealth of Massachusetts******Executive Office of Health and Human Services***Office of Medicaid*www.mass.gov/masshealth* |

MassHealth

Transmittal Letter IDTF-20

February 2020

 **TO:** Independent Diagnostic Testing Facilities Participating in MassHealth

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth [Signature of Daniel Tsai]

#  RE: *Independent Diagnostic Testing Facility Manual* (New MassHealth Third-Party Administrator for Prior Authorization; New Prior Authorization Requirements)

## Summary

This letter transmits updates to Subchapter 6 of the *Independent Diagnostic Testing Facility Manual* regarding new requirements for prior authorization (PA) for the provision of advanced imaging services, non-obstetric ultrasounds, polysomnography, and cardiology services. This PA requirement applies to outpatient services only and does not apply to services rendered in an emergency department or an inpatient setting.

This change will impact only those members enrolled in MassHealth fee-for-service, a Primary Care ACO plan, or the Primary Care Clinician (PCC) plan.  Providers serving members enrolled in a MassHealth-contracted accountable care partnership plan (ACPP), managed care organization (MCO), integrated care organization (ICO), senior care organization (SCO), or Program of All-inclusive Care for the Elderly (PACE) should refer to the ACPP’s, MCO’s, ICO’s, SCO’s, or PACE’s medical policies for covered services.

## New MassHealth Third-Party Administrator for Prior Authorization

As part of MassHealth’s efforts to provide its members with access to high quality, cost-effective care, MassHealth has contracted with eviCore healthcare (eviCore) to provide utilization management programs for advanced imaging services, non-obstetric ultrasounds, polysomnography, and cardiology services. Among other things, eviCore will evaluate all requests for PA for the services identified in this letter.

In the coming weeks, eviCore will be leading training sessions designed to assist provider organizations in fulfilling the new utilization management program requirements, such as the new PA requirements communicated by this letter. eviCore will offer these online training sessions on a variety of dates and times to accommodate provider availability and to encourage participation.

During these sessions, eviCore will provide a detailed overview of the new PA requirements, along with instructions for navigating the eviCore website at [www.evicore.com](http://www.evicore.com). Providers will also have the opportunity to ask questions and seek additional clarification where needed.

The training session offerings for each program are outlined in the following table.

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| **Web Training Sessions** |
| **Date** | **Day** | **Program** | **Time** |
|  |  |  |  |
| 2/11/2020 | Tuesday | Radiology/Cardiology | 2 p.m.–3 p.m. |
| 2/11/2020 | Tuesday | Sleep | 1 p.m.–2 p.m. |
|  |  |  |   |
| 2/13/2020 | Thursday | Radiology/Cardiology | 11 a.m.–12 p.m. |
| 2/13/2020 | Thursday | Sleep | 9 a.m.–10 a.m. |
|   |   |   |   |
| 2/18/2020 | Tuesday | Radiology/Cardiology | 11 a.m.–12 p.m. |
| 2/18/2020 | Tuesday | Sleep | 9 a.m.–10 a.m. |
|   |   |   |   |
| 2/19/2020 | Wednesday | Radiology/Cardiology | 10 a.m.–11 a.m. |
| 2/19/2020 | Wednesday | Sleep | 12 p.m.–1 p.m. |
|   |   |   |   |
| 2/21/2020 | Friday | Radiology/Cardiology | 2 p.m.–3 p.m. |
| 2/21/2020 | Friday | Sleep | 3 p.m.–4 p.m. |
|   |
| **Forums** |
| **Date** | **Day** | **Program** | **Time** |
|   |   |   |   |
| 4/2/2020 | Thursday | Radiology/Cardiology | 9 a.m.–10 a.m. |
| 4/6/2020 | Monday | Sleep | 1 p.m.–2 p.m. |

## How to Register

Please read the following instructions to register for and participate in a session:

1. Once you have selected a session, please go to [**http://eviCore.webex.com/**](https://urldefense.proofpoint.com/v2/url?u=http-3A__eviCore.webex.com_&d=DwMFAg&c=lDF7oMaPKXpkYvev9V-fVahWL0QWnGCCAfCDz1Bns_w&r=ociar-JOfoxGTyh_pHD-CcV6qvmlKB0VjFROvnhPquw&m=jYMcEPdWtvvDwWUFsZxR6K3_OUj_84Y_-umLCj0OxSI&s=dUuIqzOIEv2-OUOzwhEWOaUFqnSMvOU1c2PA1CxyWe8&e=)
2. Click on the menu bar on the upper left hand side—the three horizontal lines underneath the eviCore healthcare logo. Then choose “Webex Training”
3. Under Live Sessions, click the “Upcoming” tab, then enter the desired topic name exactly as listed in the table and search
4. Click “Register” next to the session(s) with the date and time you wish to attend
5. Complete the registration information

After you have registered for the online training session, you will receive an email containing the toll-free phone number, meeting number, conference password, and a link to access the web portion of the session. **Please keep the registration email with the link to the web conference and the call-in number for the session.** This information will not be sent a second time in advance of the training.

## New Prior Authorization Requirements

**Effective March 1, 2020**, MassHealth will require PA for the services and Current Procedural Terminology (CPT) codes listed below. Between March 1, 2020, and May 31, 2020, MassHealth will implement an informational edit that will not deny claims for services and codes requiring PA, but instead will inform providers of the PA requirement for those services and codes.

**Beginning** **June 1, 2020**, MassHealth will deny claims for services and codes requiring PA if the provider has not obtained PA. MassHealth and eviCore will provide technical assistance to providers during the rollout phase.

* **Turnaround Time:** eviCore will render a decision within 2 business days of a timely, complete request for PA.
* **Urgent and Emergent Care:** MassHealth is committed to ensuring patient access to necessary care and is working closely in partnership with eviCore to ensure that PA requests are processed in a timely manner and that there are appropriate processes in place to address urgent service needs. PA will not be required for services rendered in the emergency department, and there will be an option to submit same-day urgent PA requests, which will be processed within a maximum of 4 hours. If urgent requests meet medical necessity criteria and all required documentation is submitted, urgent requests can be approved in real time.
* **Window to Submit PA:** PA can be requested for a service rendered up to 14 days after the date of service.
* **Technical & Professional:** When a code requires a professional and a technical component (TC), PA is required for the technical component only, and the TC modifier must be included on the PA request.
* **Referrals:** If Primary Care Provider (PCP) referrals are required for the service requested, the PA will not override the referral requirement. For such services, MassHealth still requires a referral in addition to the PA.

## Prior Authorization Denials and Appeals Process

If a PA request is lacking necessary documentation, eviCore will contact the provider to obtain the missing information. If the provider fails to submit the requested documentation within 10 days of eviCore’s request, eviCore will issue an administrative denial of the request for PA. Upon receipt of a timely, complete submission, eviCore will review and approve, deny, or modify the request within 2 business days.

Once eviCore has rendered a decision, eviCore will notify the provider by fax or eviCore’s web portal. If eviCore has denied or modified a PA request, eviCore will also notify the member of this fact by mail. This communication will also explain the member’s appeal rights and include an appeal form. The member will have 30 days to appeal that decision to the Board of Hearings (BOH).

If eviCore has denied or modified a request for PA, the provider may request a peer-to-peer consultation with an eviCore clinician to review the clinical aspects of the case. Providers may request such consultations through eviCore’s online portal. A provider’s request for a peer-to-peer consultation does not alter or enlarge the time in which the member can request a fair hearing related to the denial or modification of the prior authorization request.

If eviCore overturns the denial or modification after the peer-to-peer consultation, the provider will be notified through the web portal and eviCore will work with the member to withdraw any requests for a hearing through the BOH.

## Clinical Guidelines to Evaluate PA Requests

eviCore’s Clinical Guidelines will be used to determine medical necessity and evaluate requests for PA by service category. Provider requests for authorization of the following services and codes must adhere to eviCore’s clinical guidelines, which are available on eviCore’s website and can be found at the following URL: <https://www.evicore.com/provider/clinical-guidelines>.

## Advanced Imaging CPT Codes

70336

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## Non-obstetric Ultrasound CPT Codes

78453

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78469

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78473

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## Polysomnography (Sleep) Studies CPT Codes

95782

95783

95800

95805

95806

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95811

## Cardiac Stress Tests CPT Codes

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Providers must submit clinical documentation with PA requests for these services. Follow the links below for further guidance.

<https://www.evicore.com/insights/how-to-speed-up-prior-authorization>

<https://www.evicore.com/resources/healthplan/masshealth>

To submit a PA request for these services, follow the link below.

[https://www.evicore.com/](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.evicore.com_&d=DwMFAg&c=lDF7oMaPKXpkYvev9V-fVahWL0QWnGCCAfCDz1Bns_w&r=ociar-JOfoxGTyh_pHD-CcV6qvmlKB0VjFROvnhPquw&m=9iAAH_GmRQfUx0szNFRtuCdzQ6EurImy87nxTH5nw_8&s=udELPIx3CjRWnKNx0eiZWFJNYkHQy1sGhxMQspl5uf0&e=)

MassHealth reviews requests for PA on the basis of medical necessity. If MassHealth approves the request, payment is still subject to all general conditions of MassHealth, including member eligibility, other insurance, and program restrictions.

## MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at [www.mass.gov/masshealth-transmittal-letters](http://www.mass.gov/masshealth-transmittal-letters).

To sign up to receive email alerts when MassHealth issues new transmittal letters and provider bulletins, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

## Questions or Concerns

If you have any questions or concerns about the information in this transmittal letter, please contact

the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Independent Diagnostic Testing Facility Manual

Pages 6-1 through 6-6

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Independent Diagnostic Testing Facility Manual

Pages 6-1 through 6-6 — transmitted by Transmittal Letter IDTF-19

601 Introduction

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 431.000 and 450: *Administrative and Billing Regulations*. MassHealth providers must refer to the American Medical Association’s *Current Procedural Terminology (CPT) Professional* or the *Health Care Procedure Code Set (HCPCS) Level II* codebook for the service code and service descriptions when billing for services provided to MassHealth members.

An independent diagnostic testing facility (IDTF) may request prior authorization for any medically necessary service reimbursable under the federal Medicaid Act, in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 1396d(r)(5) for a MassHealth Standard or CommonHealth member younger than 21 years of age, even if it is not designated as covered or payable in Subchapter 6 of the *Independent Diagnostic Testing Facility Manual*.

“IC” indicates that the claim requires individual consideration. See 130 CMR 431.406 for more information. “PA” indicates that the service requires prior authorization. See 130 CMR 450.303 for more information.

602 Portable X-ray: Radiology Service Codes

70030

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70120

70130

70134

70140

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70160

70190

70200

70210

70220

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74301

603 Freestanding Magnetic Resonance Imaging (FMRI): Radiology Service Codes

70336 PA1

70540 PA1

70542 PA1

70543 PA1

70544 PA1

70545 PA1

70546 PA1

70547 PA1

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70549 PA1

70551 PA1

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71550 PA1

71551 PA1

71555 PA1

72141 PA1

72142 PA1

72146 PA1

72147 PA1

72148 PA1

72149 PA1

72156 PA1

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73725 PA1

74181 PA1

74182 PA1

74183 PA1

74185 PA1

74301

74712 PA1

74713 PA1

75557 PA1

75559 PA1

75561 PA1

75563 PA1

75565 PA1

77021 PA1

77022 PA1

77046 PA1

77047 PA1

77048 PA1

77049 PA1

A4641

A9500 IC

A9502 IC

A9503 IC

A9505 IC

A9512 IC

A9537 IC

70557

604 Diagnostic Imaging Centers: Radiology Service Codes

59025

70030

70100

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75561 PA1

75563 PA1

75565 PA1

75572 PA1

75573 PA1

75574 PA1

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78483 PA1

78491 PA1

78492 PA1

78494 PA1

78496 PA1

78499 IC

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78609 PA1

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93229 IC

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93350 PA1

93351 PA1

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93799 IC

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93981

93990

93998 IC

95950

95951

95953

95956

A4641 IC

A9500 IC

A9502 IC

A9503 IC

A9505 IC

A9512 IC

A9537 IC

G0297 PA1

605 Mobile Mammography Van: Radiology Service Codes

76641

76642

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606 Sleep Centers: Radiology Service Codes

95782 PA1

95783 PA1

95800 PA1

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95805 PA1

95806 PA1

95807 PA1

95808 PA1

95810 PA1

95811 PA1

607 Modifiers

The following service code modifiers are allowed for billing under MassHealth.

Modifier Description

26 Professional Component

TC Technical Component

The following modifiers are for Provider Preventable Conditions (PPCs) that are National Coverage Determinations.

Modifier Description

PA Surgical or other invasive procedure on wrong body part

PB Surgical or other invasive procedure on wrong patient

PC Wrong surgery or other invasive procedure on patient

For more information on the use of these modifiers, see Appendix V of your provider manual.

This publication contains codes that are copyrighted by the American Medical Association. Certain terms used in the service descriptions for HCPCS codes are defined in the *Current Procedural Terminology (CPT) Professional* codebook.

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