

UPDATED: JUNE 8, 2016

# **Outpatient Rehabilitation Services**

# What is the change?

Premera Blue Cross is implementing an authorization and medical necessity review process for outpatient rehabilitation services. Our goal is to ensure members receive high-quality, cost-effective care consistent with best practices.

# When is it effective?

Effective July 1, 2016, eviCore healthcare (previously known as CareCore National) will begin managing outpatient rehabilitation services for Premera.

#### What is the impact?

Outpatient rehabilitation services (based on CPT, HCPCS or Revenue codes) from physicians, practitioners, and facilities will require a medical necessity review authorization through eviCore healthcare.

#### What action do I need to take?

A full list of the outpatient rehabilitation codes for review is on the back of this News Brief and is also posted on our provider website at <u>premera.com/wa/provider/utilization-review/outpatient-rehabilitation/</u>. If a physician, practitioner, or a facility provides outpatient rehabilitation services to a Premera member on or after July 1, 2016, the servicing provider needs to submit a treatment plan to eviCore healthcare for a medical necessity review authorization of services after the initial visit. eviCore healthcare will evaluate the treatment plan and determine medical necessity and respond to the request within two business days. For services found to be medically necessary, eviCore will provide an authorization/notification number and date range that will ensure prompt payment by Premera. Services that are not medically necessary will be denied. Claims submitted without an authorization will be reviewed retrospectively for medical necessity. Services denied as not medically necessary are provider liability for contracted providers.

**Starting June 17, 2016,** you can register with eviCore healthcare at <u>CareCoreNational.com</u>. If you have an existing account and currently request authorizations, your process will be the same as it is now. To initiate an authorization for dates of service on or after July 1, 2016, contact eviCore healthcare:

- Online: Register starting June 17, 2016 at CareCoreNational.com
- Phone: Call 800-792-8751 from 7 a.m. to 7 p.m. local time Monday through Friday
- Fax: Send an eviCore healthcare request form (available online) to 800-540-2406



# Share this News Brief in your office.

Check out **premera.com/wa/provider** for Network News, online provider tools, and log in to sign up for email alerts. In June, we'll add helpful links to assist you with eviCore healthcare's process for submitting a medical necessity review authorization, including a quick reference guide, guidelines, tutorial, and frequently asked questions on our provider website at premera.com/wa/provider/utilization-review/outpatient-rehabilitation/.

If you have questions about this notification, call Physician and Provider Relations at 877-342-5258, option 4.

Codes		
Current Procedural Terminology (CPT)		
97001	97032	97150
97002	97033	97530
97003	97034	97532
97004	97035	97533
97010	97036	97535
97012	97039	97542
97014	97110	97750
97016	97112	97755
97018	97113	97760
97022	97116	97761
97024	97124	97762
97026	97139	97799
97028	97140	
Healthcare Common Procedure Coding System (HCPCS)		
G0281	G0283	
Revenue		
420	429	434
421	430	439
422	431	977
423	432	978
424	433	

# List of Outpatient Rehabilitation Codes