

PROVIDER BULLETIN

PROVIDER INFORMATION

January 2, 2019

Radiation Therapy Program Updates for Fully Insured Commercial and Medicare Advantage Subscribers – eviCore Healthcare Specialty Utilization Management (UM) Program

eviCore has released clinical guideline updates for the Radiation Therapy program. Updates include, but are not limited to: New information added, criteria updated, indications updated, clarification added, etc.

New guidelines and updated guidelines will become **effective March 1, 2019**:

New Guidelines:

Guideline Name
Radiation Therapy for Multiple Myeloma and Solitary Plasmacytomas - NEW
Radiation Therapy for Thymoma and Thymic Cancer - NEW
Radiation Treatment with Azedra® (iobenguane I-131) - NEW

eviCore’s Radiation Therapy clinical guidelines are available on the Blue Cross website at providers.bluecrossmn.com

- To access the link, select “**Medical Policy**” under **Tools and Resources**, read and accept the Blue Cross Medical Policy Statement
- Click on the “+” (plus) sign next to “**Medical and Behavioral Health Policies**”
 - Scroll down to locate the “**Medical Policy Supporting Documents**” section
- Click on “**eviCore healthcare Specialty Utilization Management Clinical Guidelines**” link
 - Click on the “**Clinical Guidelines**” link
 - Select “**Radiation Therapy**” solution in dropdown.

Products Impacted

This change only applies to **fully insured commercial** and **Medicare Advantage** subscribers.

The changes do not impact:

- Blue Cross Commercial Self-Insured Subscribers
- Blue Cross Platinum Blue and Senior Gold Subscribers
- Blue Cross Government Programs (Families and Children(F&C), MinnesotaCare (MNCare), SecureBlue (MSHO), and Minnesota Senior Care Plus (MSC+) health plans)
- Blue Cross Federal Employee Program (FEP)

To submit a PA Request to eviCore

Providers submit eviCore PA requests via our free <https://www.availity.com> provider portal.

Instructions on how to utilize this portal are found on the Availity website. Providers need to reference the eviCore clinical guideline criteria, submit prior authorization request via Availity, and submit all applicable clinical documentation with the PA request. Failure to submit required information may result in review delays or denial of the request due to insufficient information.

Note: An approved PA does not guarantee coverage under a subscriber's benefit plan. Subscriber benefit plans vary in coverage and some plans may not provide coverage for certain services discussed in the medical policies.

Questions?

If you have questions and would like to speak to an eviCore representative call **844-224-0494**, 7:00 a.m. to 7:00 p.m. CST, Monday - Friday.