

Changes to Medical Mutual's Prior Authorizations in 2018

Beginning January 1, 2018, Medical Mutual of Ohio has engaged **eviCore healthcare** to manage their prior authorization process for radiology services to fully insured and self-funded plans. This requirement will apply to both commercial and Medicare Advantage plans. Medical Mutual has required prior authorization in the past, but the recent notification of this engagement did include a statement indicating that the services requiring prior authorizations has expanded. The full list of CPT and HCPCS requiring authorization can be found at: www.evicore.com/healthplan/medmutualOH. A review of the site indicates that prior authorizations are required for all outpatient, non-emergent, diagnostic advanced imaging services, including: MRI/MRA, CT/CTA, PET and Nuclear medicine. This site includes links to:

- Radiology Quick Reference Guide
 - Provides guidance on Places of Service requiring authorization
 - Modalities subject to prior authorization
 - Expedited/Urgent requests
 - Patient information needed at time of authorization
 - Denial and appeal process for unapproved authorizations
 - Other key contact information and support tools
- Frequently Asked Questions
- Radiology Prior Authorization Presentation
 - Powerpoint providing:
 - Company overview
 - eviCore's clinical approach
 - Foundation for eviCore's Evidence-Based Guidelines
 - eviCore's Service Model
 - Program overview for Medical Mutual of Ohio

It's important to note that requirement to use eviCore healthcare begins on January 1, 2018, but the website is available for use on December 18, 2017. This will provide a little lead time for staff responsible for obtaining authorization to familiarize themselves with this process. APS recommends client's hospitals and free standing imaging centers take advantage of this time, as a means to help ensure no issues with payment in 2018. If you have any further questions, please contact your Practice Manager.