

**\* HIGHMARK BLUE CROSS BLUE SHIELD WEST VIRGINIA  
INTRODUCES RADIATION THERAPY MEDICAL NECESSITY REVIEW  
AND AUTHORIZATION PROGRAM \***

**Read this bulletin on-line via NaviNet**

AUGUST 8, 2011

HWV-HOSP-2011-003  
HWV-ASC-2011-001  
HHIC-HOSP-2011-003  
HHIC-ASC-2011-001

**TO:** (1) CHIEF FINANCIAL OFFICER  
(2) DIRECTOR/MANAGER OF PATIENT ACCOUNTS  
(3) BILLING OFFICE STAFF  
(4) ADMISSIONS AND REGISTRATION  
(5) CARE/CASE MANAGEMENT/UTILIZATION REVIEW DEPT

**FROM:** HIGHMARK BLUE CROSS BLUE SHIELD WEST  
VIRGINIA/HIGHMARK HEALTH INSURANCE COMPANY

**SUBJECT:** HIGHMARK BLUE CROSS BLUE SHIELD WEST VIRGINIA  
INTRODUCES RADIATION ONCOLOGY THERAPY MEDICAL  
NECESSITY REVIEW AND AUTHORIZATION PROGRAM

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**PURPOSE**

This bulletin announces that Highmark Blue Cross Blue Shield West Virginia (Highmark West Virginia) and Highmark Health Insurance Company (HHIC) have contracted with CareCore National LLC to provide medical necessity review and authorization where applicable for select radiation oncology therapy services. Another facility bulletin will be published in the future with more details about this new program that more clearly outlines program specifics not explained in this publication.

**BACKGROUND/OVERVIEW**

In an effort to help ensure that the radiation oncology therapy services provided to our members are consistent with nationally recognized clinical guidelines, Highmark West Virginia and HHIC have partnered with CareCore National LLC (CareCore) to provide medical necessity review and authorization where applicable for select outpatient radiation oncology therapy services.

The addition of this new authorization requirement is due, in large part, to increasing demands from our employer group customers for products that promote quality, medically appropriate care and value for their employees. In addition, patient safety issues have also made this an important program to offer to our members.

For general information about CareCore, visit [www.carecorenational.com](http://www.carecorenational.com).

### **IMPACT/ACTION**

Effective with dates of service of January 1, 2012 and beyond, medical necessity determinations will need to be established for all HHIC members and for many Highmark West Virginia members. An authorization will be required for select outpatient services performed in a facility setting.

The radiation oncologist will need to notify Highmark West Virginia or HHIC of any Highmark West Virginia or HHIC members whose episode of care is not completed prior to the program's January 1, 2012 effective date. Specific instructions about this notification process will be provided in a future facility bulletin.

**Please note that claims for services provided without authorization will be rejected, and the member will be held harmless and will not be responsible for payment. Oncology specialists and urologists have also received a general announcement about this program and their role in obtaining authorization for these services. Read the attached Special Bulletin to see this notification.**

In order to assist facilities providing radiation oncology therapy for select outpatient services, facilities may want to read the attached list of procedure codes that will be impacted by this particular authorization requirement.

### **TIME FRAME**

Beginning December 1, 2011, providers may begin to seek authorization for HHIC members, and for many Highmark West Virginia members, that are anticipated to receive select outpatient radiation oncology therapy services on or after January 1, 2012.

Facilities will note, in the attached Special Bulletin, that specialists providing outpatient radiation oncology therapy services to Highmark West Virginia or HHIC members (currently receiving treatment utilizing any of the procedure codes listed in this bulletin's link), are required to forward all relevant member information to Highmark West Virginia or HHIC if treatment is expected to continue beyond January 1, 2012.

### **ASSISTANCE**

**This Bulletin**

Questions regarding this bulletin may be directed to your assigned External Provider Relations representative.

**Inquiries About Eligibility, Benefits, Claim Status or Authorizations**

For inquiries about eligibility, benefits, claim status or authorizations, Highmark West Virginia and HHIC encourage providers to use the electronic resources available to them – NaviNet<sup>®</sup> and the applicable HIPAA transactions – prior to placing a telephone call to Customer Service Center.

**ATTACHMENTS**

[Special Bulletin dated August 1, 2011](#)

[Codes List for Radiation Oncology Authorization Program](#)

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