Advanced Imaging Services

Function	Provider Workflow	BPR-specified Capabilities	'MET', Scheduled Date, or 'NA'	Comment
Checking Eligibility and Benefits	Use AIM site to check eligibility	Identify services that are benefit exclusions for the patient		Cannot identify which services are benefit exclusions for the patient. Service may be approved by AIM, but find out later it is an excluded benefit by Regence.
Determining	Access Regence site using Pre-Auth link stored as a "favorite" Search generic preauth list for a CPT code Do not review associated medical policy Note: A separate OmedaRx site is not accessed – see validation findings for Medical Services above.	Provide up-to-date navigation information on One-Stop-Shop page Look up/Search for the care service by code, keyword or functional category	To-Be Confirmed MET	Lookup is done via searching preauth list by CPT code
		Information is specific to a product/group or plan. Identify whether any entered service		 Pre-Auth List is generic Information is not up-to-date, accurate No specific statement about
		require a pre-authorization. This includes Unlisted Procedures.		whether services that are not on Pre-Auth List will require a preauth.
whether Pre- Auth or Medical Necessity		Explicitly indicate if service does not require a pre-authorization.		No specific information about Unlisted Procedures
Review is required		Identify whether any entered service require a medical necessity review (separate from a pre-auth). This includes Unlisted Procedures.		 No specific statement about whether services that are not on Pre-Auth List will require a medical necessity review No specific information about Unlisted Procedures
		Identify any professional restrictions related to delivering the service, e.g. type of provider, site of care, etc.		Site of care is a known professional restriction for a number of service, but it is not identified on the web site
		Identify if/what supporting documentation that needs to be sent with a review request		

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		Identify clinical criteria or vendor information whose criteria is used	MET	Medical Policies are posted
		Identify whether approval of this service is dependent upon previously trying other services.	???	May be in Medical Policy, which are not reviewed by admin staff
	 Complete series of questions on AIM site, including providing clinical information. For auto-approve – decision made immediately by AIM site For non-auto-approve: Nurse calls back in timely manner Sometimes peer-2-peer is required, though it appears to be a cursory step as quick approval once one gets set up. Setting up peer-2-peer is time-consuming and problematic 	Provide an online form/web page for requesting pre-service review	MET	
		On form/web page - Allow specification of the "urgency" of the request		
		On form/web page - Allow specification of the services to be reviewed	MET	Bilaterality cannot always be indicated
		Identify the timeframe under which the request will be reviewed		
		On form/web page - Include questions about any relevant professional restrictions (as applicable)		
Obtaining a Pre-Authorization		If form/web page asks for clinical information, either offer check list selection of appropriate clinical information or allow providers to submit ALL clinical information relevant to the specific request for services, and not restrict provider from sending this relevant information		Questions are not clear about what clinical documentation is required. And there is a 350 character limit on how much information can be submitted – which is not sufficient
		Allow for submission of form electronically or faxed with supporting documentation	MET	
		Provide acknowledgement of receipt of the review request	NA	
		Able to print the completed request form and/or review on-line the information submitted on the request.	MET	AIM provides online access to answers
		Perform review for ALL submitted services that are valid per the BPR, not just those requiring a pre-authorization		• In cases of request for multiple images, even when criteria for each image is met, a peer-2-peer

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				 is still required even though they are always approved with the briefest of conversations between provider and AIM Only services that require a preauth will be reviewed by AIM. All others must be submitted by fax Fax number for provider is typically wrong has to be changed with each request
		Perform review without a provider signature on the request	MET	
		On web page, identify how changes are to be made to previous requests and how providers will be notified of decisions		
	Typically status is not checked	Provide status information on web site per the BPR	MET	
Checking Status of Request		Allow access to status information by the provider/organization that requested the services, the provider/organization that is doing the services and, as appropriate, the facility/organization where the services are to be done		Only the provider who submitted the request can view status