

# Working with Anthem®

## New Rehabilitation Program



# Overview

**“Rehabilitation is a \$30 billion market in the U.S. with a forecast Compound Annual Growth Rate (CAGR) of approximately 2 percent”** - IBISWorld -2016 data. <https://www.ibisworld.com>

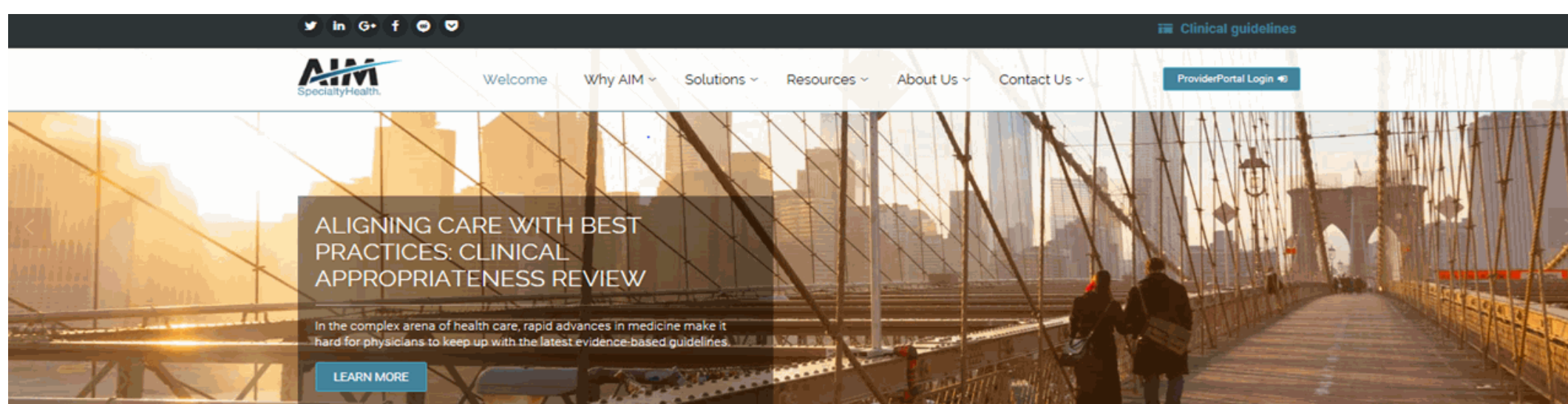
A new **Rehabilitation** Program to be managed by AIM Specialty Health® (AIM), a separate company, for Commercial fully insured and Medicaid members.

- Anthem BC commercial fully insured – effective **3/25/2019**
- Medicaid: IN, LA, NY, WNY, WI – effective **4/1/2019**

AIM works with leading insurers to improve healthcare quality and manage costs for today’s most complex and prevalent tests and treatments, helping to promote care that is appropriate, safe and affordable.

The following resources will be available as of **March 18**:

- **ProviderPortal** will be available for order request submission twenty-four hours a day, seven days a week, processing requests in real-time using clinical criteria
- AIM Call Center Monday through Friday 7:30 am – 7 pm (CT) at:
  - Anthem BC 877-291-0360
  - Medicaid 800-368-2312



## Clinical review programs:



### Shopper programs:

- › Imaging
- › Sleep
- › Surgical
- › Procedure

### Site of care programs:

- › Imaging
- › Specialty Pharmacy

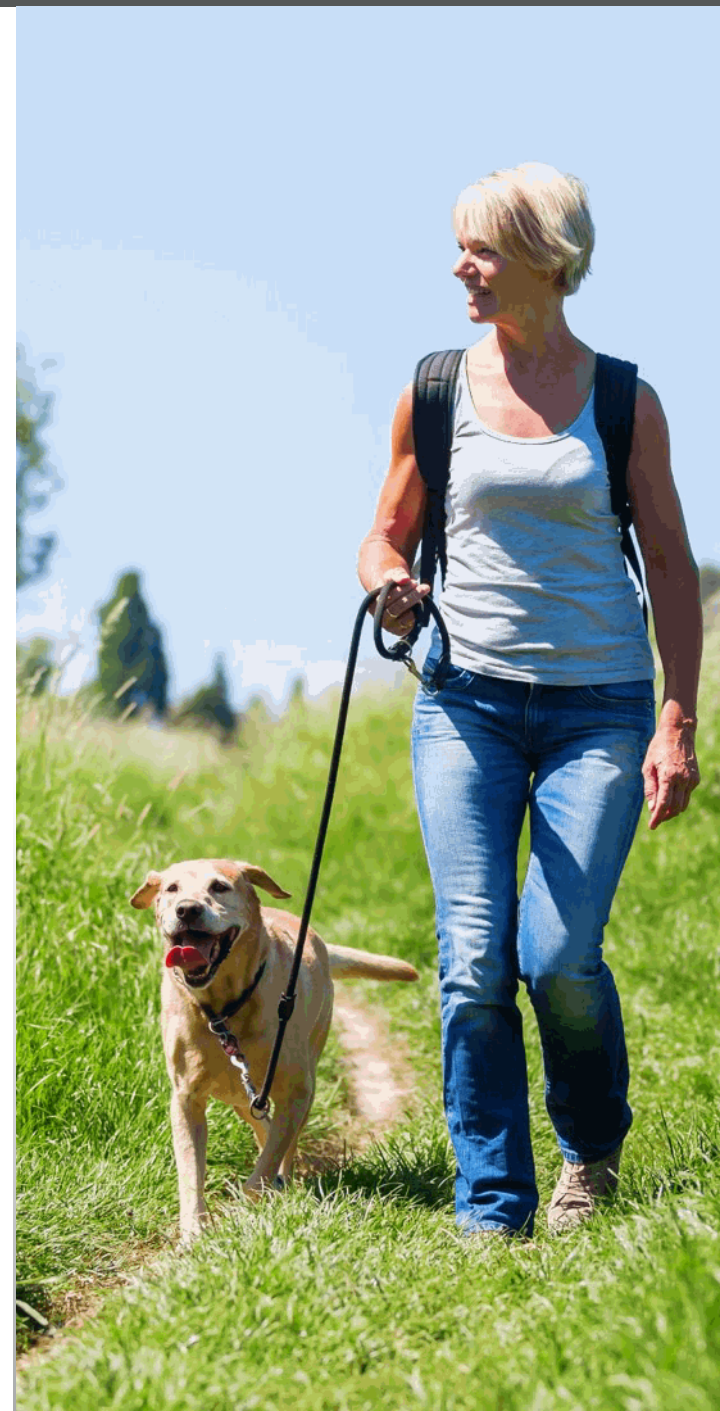
### Quality Program:

- › Cancer Care Quality Program

# Rehabilitation Program

The AIM Rehabilitative Program uses evidence-based clinical practice guidelines in the rehabilitative services industry to maximize a member's functional outcomes, coordinate integrative health care decisions, improve the member's total cost of care, and optimize provider satisfaction.

Our program provides a clinical appropriateness review process that encompasses the appropriate duration of rehabilitative services at the appropriate place of service, with the goal of maximizing the member's functional improvement, while at the same time enhancing and simplifying the provider's experience in the delivery of care.



# Rehabilitation clinical experts power our program

## Our clinical experts lead the way:

- An experienced team of therapists and physicians lead and support our Rehabilitation Program.
- Their expertise across numerous clinical specialties expands your organization's clinical brainpower and acumen immediately.

## Our clinician reviewers specialties include:

- Physical therapy
- Occupational therapy
- Speech therapy
- Physiatry
- Internal medicine / Orthopedics
- Pediatrics



**Dr. KERRIE  
REED**

Medical Director,  
Rehabilitation

Serves as the **clinical leader** and is responsible for the clinical strategy.



**GINA  
GIEGLING**

GM / VP, Rehabilitation  
and MSK

Serves as the **business leader** and is responsible for the business strategy and design.



**DISHA  
PATEL**

Director, Rehabilitation  
and MSK

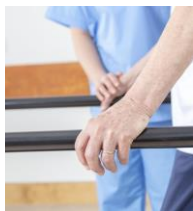
Serves as the **clinical architect** and is responsible for the clinical design.



# Program scope

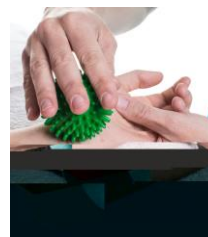
Disciplines included in the program

## Physical Therapy - CG-REHAB-04



- Supervised Modalities
- Constant Attendance Modalities
- Therapeutic Procedures
- Adaptive Equipment Training
- Wound care and lymphedema Treatment
- Other Physical therapy services
- Unlisted Procedures not covered

## Occupational Therapy - CG-REHAB-05



- Supervised Modalities
- Constant Attendance Modalities
- Therapeutic Procedures
- Adaptive Equipment Training
- Wound care and lymphedema Treatment
- Other Occupational therapy services
- Biofeedback not covered
- Unlisted Procedures not covered

## Speech Therapy - CG-REHAB-06



- Speech Fluency
- Speech sound production
- Language comprehension and expression
- Oral and pharyngeal swallowing function
- Auditory processing

*Please note: Procedure codes may vary by lines of business or may be managed by the local health plan*

# Episode of care

An episode of care is the managed care provided for a specific injury, surgery, condition or illness during a set time period.

AIM will provide an authorization with a visit allocation for those requests where the member meets medical necessity.

If after delivering the authorized number of visits, the member still needs additional therapy, the provider can return to the AIM provider portal and create a new request. Because these requests are treating the same medical problem/condition, the system will consider both requests (cases) under the same episode of care.

The system will take into consideration that the provider is continuing treatment and the clinical questions will be presented to capture the progress made in order to render a determination (i.e., initial vs second vs recurring request)



# Clinical appropriateness review

## Basis for visit allotment

- Primary treatment diagnosis
- Comorbidities
- Evaluation Date
- Functional Tool Score
- Member's response to treatment
- Member's attainment of goals
- Member's improvement in Functional Tool Score

*Please note: Additional documentation may be required when requesting additional visits (e.g. progress notes, initial evaluation/re-evaluation, etc.)*

## Included settings:

- Independent clinics
- Outpatient hospital
- Freestanding outpatient facilities

*Check to see if the facility is in network for the member before starting therapy*



# Clinical appropriateness review process



# Review responsibilities



will perform...

- Prospective reviews
- ≤2 Day retro review for outpatient requests\*
- Reconsiderations up to 10 business days with additional information\*
- Valid timeframe for requests are based on the number of visits that are allocated



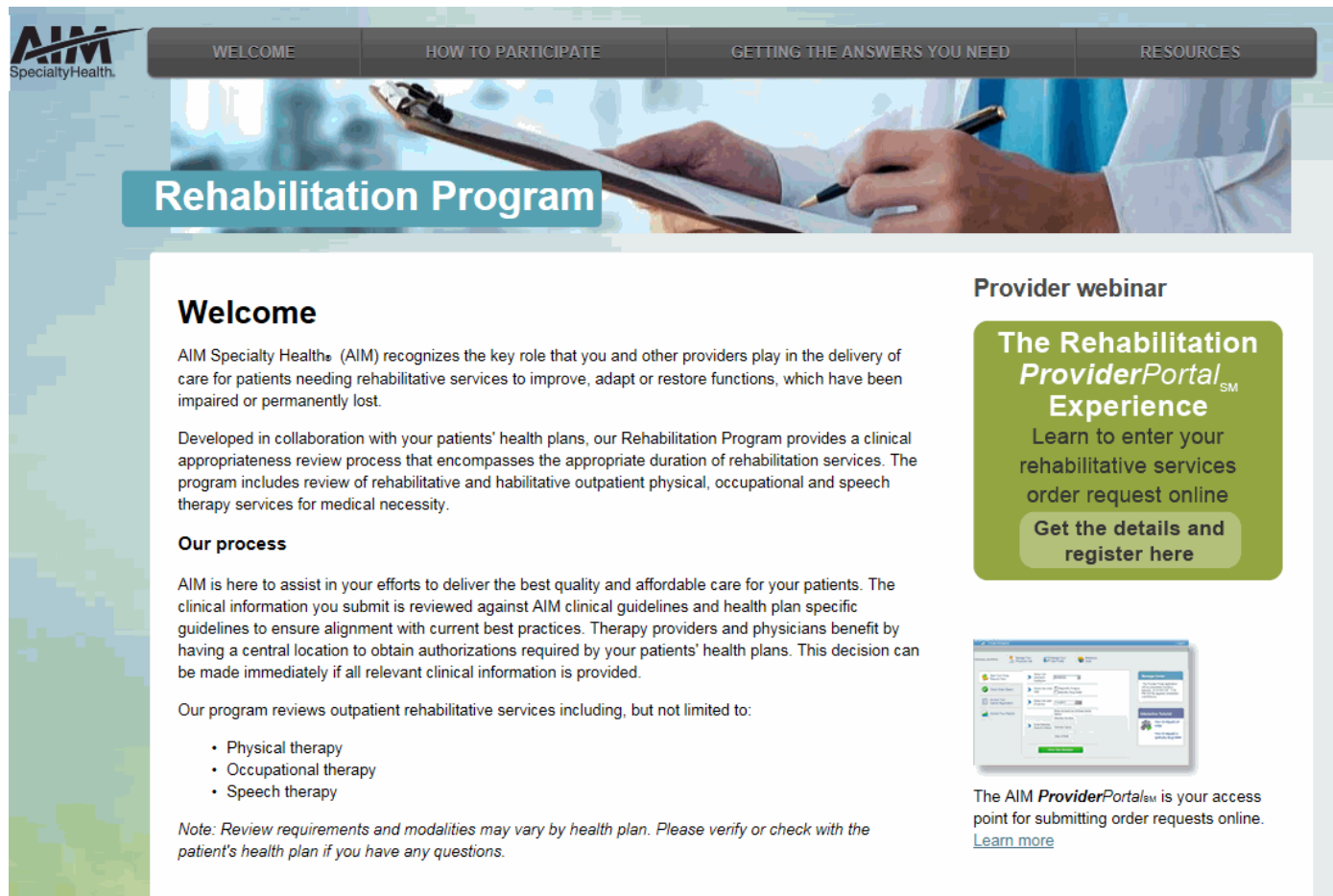
will perform...

- Inpatient and home health requests
- Unspecified codes not managed by AIM
- >2 Day retro review
- Appeals
- Pre-Authorization\Claims prior to AIM's effective date

\*Where applicable, may vary by state and line of business

# Rehabilitation microsite

<http://www.aimproviders.com/rehabilitation>



**Rehabilitation Program**

## Welcome

AIM Specialty Health® (AIM) recognizes the key role that you and other providers play in the delivery of care for patients needing rehabilitative services to improve, adapt or restore functions, which have been impaired or permanently lost.

Developed in collaboration with your patients' health plans, our Rehabilitation Program provides a clinical appropriateness review process that encompasses the appropriate duration of rehabilitation services. The program includes review of rehabilitative and habilitative outpatient physical, occupational and speech therapy services for medical necessity.

### Our process

AIM is here to assist in your efforts to deliver the best quality and affordable care for your patients. The clinical information you submit is reviewed against AIM clinical guidelines and health plan specific guidelines to ensure alignment with current best practices. Therapy providers and physicians benefit by having a central location to obtain authorizations required by your patients' health plans. This decision can be made immediately if all relevant clinical information is provided.

Our program reviews outpatient rehabilitative services including, but not limited to:

- Physical therapy
- Occupational therapy
- Speech therapy


*Note: Review requirements and modalities may vary by health plan. Please verify or check with the patient's health plan if you have any questions.*

### Provider webinar

#### The Rehabilitation ProviderPortal<sup>SM</sup> Experience

Learn to enter your rehabilitative services order request online

**Get the details and register here**



The AIM **ProviderPortal<sup>SM</sup>** is your access point for submitting order requests online. [Learn more](#)

## Comprehensive Provider Microsite

- Overview of the program
- Resources with checklists containing the information needed for requests
- FAQs
- CPT Codes included in the program
- Available webinars
- Information on how to register for portal



# ProviderPortal registration

AIM dedicated Rehab provider website - [www.aimproviders.com/rehabilitation](http://www.aimproviders.com/rehabilitation)

WELCOME HOW TO PARTICIPATE GETTING THE ANSWERS YOU NEED RESOURCES

## Rehabilitation Program

### AIM *ProviderPortal*<sup>SM</sup> Registration

Each member of your staff who enters rehabilitative services requests will need to register in the AIM *ProviderPortal*. Here's how to do it:

- Step 1:** Go to [providerportal.com](http://providerportal.com) and select "Register Now" to launch the registration wizard
- Step 2:** Enter User Details and select User Role as "Ordering Provider"
- Step 3:** Create user name and password
- Step 4:** Enter the Tax ID numbers for your providers
- Step 5:** Check your inbox for an email from AIM. Click on the link to confirm

#### What you need to register

- Your email address
- The Tax ID number for the providers whose orders you will be entering
- Your phone and fax number

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# *ProviderPortal* demo



# Portal home page

The screenshot shows the AIM Specialty Health Provider Portal home page. At the top left is the AIM Specialty Health logo, and at the top right is the ProviderPortal logo. Below the logo is a blue navigation bar with a home icon, the text "Order Request", and a "Logout" link. The main content area has a "Welcome" message and three icons: "Manage Your Physician List", "Manage Your User Profile", and "Reference Desk". On the left side, there is a sidebar with four links: "Start Your Order Request Here" (with a green plus icon), "Check Order Status" (with a green checkmark icon), "View Order History" (with a green document icon), and "Access Your Optinet Registration" (with a blue document icon). The central area contains a search form for finding a member. It includes a date selector for "Select the date of service", a search type selector with radio buttons for "Member ID + DOB" (selected) and "Member ID + Name", and input fields for "Member ID" (with a placeholder "Member Number") and "Date of Birth" (with a placeholder "MM/DD/YYYY"). A green "Find This Member" button is at the bottom of the form. On the right side, there is a "Message Center" box with a blue header. It contains two messages: one about application unavailability on Sundays and another about Medicare Appropriate Use Criteria Clinical Decision Support Program. At the bottom of the page, a footer states: "For all urgent requests, please contact AIM Specialty Health."

AIM SpecialtyHealth

ProviderPortal

Order Request Logout

Welcome

Manage Your Physician List

Manage Your User Profile

Reference Desk

Start Your Order Request Here

Check Order Status

View Order History

Access Your Optinet Registration

Select the date of service

Select the search type

Member ID + DOB

Member ID + Name

Member ID

Date of Birth

Find This Member


Message Center

The Provider Portal application will be unavailable Sundays between 12:30 PM CST - 6:00 PM CST for regularly scheduled maintenance.

If you have any questions regarding the new Medicare Appropriate Use Criteria Clinical Decision Support Program, see the Provider Resource links below. DO NOT call the health plans.

For all urgent requests, please contact AIM Specialty Health.


# Select member

 Order Request Logout

Step: 1 2 3 4 5

Step 1: Please select the member from the list below.

Member Search Results

Records Per Page 10 

Member Name	Member Number	Relation	Sex	Date of Birth	State	Health Plan
Black, Bob	0000000000	Employee	M	xx/xx/xxxx	NY	BCBS

Total Number of Records Found: 1

Change Member Search Criteria Delete This Request

# Select Rehabilitation

ProviderPortal.

Order Request

Step: **1** 2 3 4 5

BLACK, BOB Edit [Show Details](#)

Select the order type for this request. Then click Continue below.

 <a href="#">View Code List</a> <b>Diagnostic Imaging</b> <i>Includes:</i> Angiography, Bone Density CT, CTA, MRA, MRI, Nuclear Medicine, PET	 <a href="#">View Code List</a> <b>Cardiovascular</b> <i>Includes:</i> Angiography, percutaneous coronary revascularization, arterial ultrasound	 <a href="#">View Code List</a> <b>Sleep Management</b> <i>Includes:</i> HST, In Lab, Titration, APAP/BPAP/CPAP, Oral Appliance, MSLT, MWT
 <a href="#">View Code List</a> <b>Musculoskeletal</b> <i>Includes:</i> Joint Surgery, Spine Surgery & Interventional Pain Management	 <a href="#">View Code List</a> <b>Specialty Drugs</b> <i>Includes:</i> Asthma, Botulinum Toxin, Enzymes, Factors, Immune Modulators, IVIG, Retinal conditions	 <a href="#">View Code List</a> <b>Radiation Therapy</b> <i>Includes:</i> 2D/3D, Brachytherapy, IGRT, IMRT, IORT, Proton, Stereotactic (SRS/SBRT), SIRT
 <a href="#">View Code List</a> <b>Chemotherapy and Supportive Drugs</b> <i>Includes:</i> Review of cancer drugs, side effect management and treatment pathways	 <a href="#">View Code List</a> <b>Genetic Testing</b> <i>Includes:</i> Laboratory testing for the inheritance or management of genetic conditions	 <a href="#">View Code List</a> <b>Other Surgical Procedures</b> <i>Includes:</i> Arthroscopy, Colonoscopy & Endoscopy
 <a href="#">View Code List</a> <b>Rehabilitation</b> <i>Includes:</i> Physical Therapy, Occupational Therapy and Speech Therapy		

# Condition (ICD10) and service (CPT) selection

Tracking Number: 0FCF XBGCD

Date of Birth:  
Male

Age: |

Member ID:

CANCEL REQUEST

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

## Enter Condition & Services

**Condition \***

*Enter an ICD code or description to search*

Condition Search Tips ^

- Type at least two characters
- Enter one ICD code or description
- Searching by ICD Code typically provides the best results
- Searching by description may provide less precise results
- A condition selection is required to continue

**Services \***

Service Search Tips ^

- Type at least two characters
- Enter one CPT code, HCPCS code, or description at a time
- Multiple Services can be entered

CONTINUE

# Enter ICD code or description

Member

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

Enter Condition & Services

Condition \*

m75.5

M75.50 – Bursitis of unspecified shoulder

M75.51 – Bursitis of right shoulder

M75.52 – Bursitis of left shoulder

Searching by free text typically provides the best results

• Searching by description may provide less precise results

• A condition selection is required to continue

Services \*

Service Search Tips ^

• Type at least two characters

• Enter one CPT code, HCPCS code, or description at a time

• Multiple Services can be entered

BACK TO MEMBER

CONTINUE



\_\_\_\_\_

Condition & Service(s)	Ordering Provider	Servicing Provider(s)	Clinical	Review
<h3>Enter Condition &amp; Services</h3> <div><div><b>Condition *</b> M75.50 – Bursitis of unspecified shoulder ✕</div><div><b>Services *</b> 97111 97110 - Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes 97112 - Therapeutic procedure to re-educate brain-to-nerve-to-muscle function, each 15 minutes 97113 - Water pool therapy with therapeutic exercises to 1 or more areas, each 15 minutes 97116 - Walking training to 1 or more areas, each 15 minutes</div></div> <div>CONTINUE</div>				

# Identify therapy type

Some CPT Codes are associated with multiple therapy disciplines

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

Enter Condition & Services

Condition \*

M75.50 – Bursitis of unspecified shoulder ✕

Services

[Service Search Tips ^](#)

- Type at least two characters
- Enter one CPT code, HCPCS code, or description at a time
- Multiple Services can be entered

Rehabilitation (1)

What is the therapy type for the service requested? (97110 Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes) \*

☐ Occupational Therapy

☐ Physical Therapy

DELETE SERVICE

SAVE THERAPY TYPE

CONTINUE

# Selection of physical therapy

Condition & Service(s)	Ordering Provider	Servicing Provider(s)	Clinical	Review
<h2>Enter Condition &amp; Services</h2>				
<b>Condition *</b> M75.50 – Bursitis of unspecified shoulder ✕	<b>Services</b> <div></div> <p><i>Service Search Tips</i> ^</p> <ul style="list-style-type: none"><li>• Type at least two characters</li><li>• Enter one CPT code, HCPCS code, or description at a time</li><li>• Multiple Services can be entered</li></ul>			
<h2>Rehabilitation (1)</h2>				
<b>What is the therapy type for the service requested? (97110 Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes) *</b>			<div>DELETE SERVICE</div> <div>SAVE THERAPY TYPE</div>	
<p><input type="radio"/> Occupational Therapy</p> <p><input checked="" type="radio"/> Physical Therapy</p>				
<div>CONTINUE</div>				

# Therapy start date selection

### Enter Condition & Services

Condition \*

M75.50 – Bursitis of unspecified shoulder ✕

Services

[Service Search Tips ^](#)

- Type at least two characters
- Enter one CPT code, HCPCS code, or description at a time
- Multiple Services can be entered

### Rehabilitation (1)

Service Date

!

 Confirm the Service Date to enter additional services.

Service Date \*

03

←

March 2019

→

SUN	MON	TUE	WED	THU	FRI	SAT
24	25	26	27	28	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

TODAY

CLEAR

otion

ercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes

CONTINUE

# Episode of care metrics

The system will request information on the current metrics for the member

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

## Physical Therapy

Was an evaluation performed by a therapist? \*

☐ Yes

☐ No

CONTINUE



# Episode of care metrics – continued

Condition & Service(s)	Ordering Provider	Servicing Provider(s)	Clinical	Review
<b>Physical Therapy</b>				
<b>Was an evaluation performed by a therapist? *</b>				
<input checked="" type="radio"/> Yes				
<input type="radio"/> No				
<b>What was the Evaluation Date? *</b>				
<input type="text" value="mm/dd/yyyy"/>				
<b>Has the patient received treatment since the evaluation? *</b>				
<input type="radio"/> Yes				
<input type="radio"/> No				
<b>Select the Functional Tool used from the groups provided. Up to two (2) functional tool scores can be entered.*</b>				
<b>0 - 9</b> A - C   D - F   G - K   L - P   Q - Z   TOOL NOT LISTED				
<input type="radio"/> 10MWT - 10 meter walk test				
<input type="radio"/> 12 Item MS Walking Scale				
<input type="radio"/> 2MWT - 2 Minute walk test				
<input type="radio"/> 6MWT - 6 Minute Walk Test				
				<b>CONTINUE</b>

# Tool selection – Example using DASH

Condition & Service(s)	Ordering Provider	Servicing Provider(s)	Clinical	Review
<b>Physical Therapy</b>				
<b>Was an evaluation performed by a therapist? *</b>				
<input checked="" type="radio"/> Yes				
<input type="radio"/> No				
<b>What was the Evaluation Date? *</b>				
<input type="text" value="03/17/2019"/>				
<b>Has the patient received treatment since the evaluation? *</b>				
<input type="radio"/> Yes				
<input checked="" type="radio"/> No				
<b>Select the Functional Tool used from the groups provided. Up to two (2) functional tool scores can be entered.*</b>				
<input type="radio"/> 0 - 9 <input type="radio"/> A - C <input checked="" type="radio"/> D - F <input type="radio"/> G - K <input type="radio"/> L - P <input type="radio"/> Q - Z <input type="radio"/> TOOL NOT LISTED				
<input checked="" type="radio"/> DASH - Disabilities of Arm, Shoulder, Hand				
<input type="radio"/> Dizziness Handicap Inventory				
<input type="radio"/> Dynamic Gait Index				
<input type="radio"/> ESDM - Early Start Denver Model				
<input type="radio"/> FIM - Functional Independence measure				
<input type="radio"/> Foot and Ankle Ability Measure				
<input type="radio"/> Functional Gait Assessment				
<input type="button" value="ADD TOOL"/>				

## Enter score

Condition & Service(s)	Ordering Provider	Servicing Provider(s)	Clinical	Review
<h2>Physical Therapy</h2> <p><b>Was an evaluation performed by a therapist? *</b></p> <p> <input checked="" type="radio"/> Yes           <input type="radio"/> No         </p> <p><b>What was the Evaluation Date? *</b></p> <p>03/17/2019</p> <p><b>Has the patient received treatment since the evaluation? *</b></p> <p> <input type="radio"/> Yes           <input checked="" type="radio"/> No         </p> <p><b>Select the Functional Tool used from the groups provided. Up to two (2) functional tool scores can be entered.*</b></p> <p> <a href="#">+ Select Additional Functional Tool</a> </p> <div> <p><b>DASH - Disabilities of Arm, Shoulder, Hand *</b></p> <p> <input type="text"/> </p> <p><b>X Remove Tool</b></p> </div> <p><small>           ⓘ If an additional Functional Tool Score was used, add the tool and provide the score.         </small></p>				

# Ordering provider selection

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

▼ Ordering Provider Search

Last Name

First Name

Address

City

State \*

ZIP Code

California ▼

▶ More Search Options

SEARCH


Provider Results

Name	Address	City	State	NPI	TIN
Search for providers to see results					

# Specify if ordering and treating therapist are the same

[← Show Search Results](#)

Ordering Provider Information

 **PATEL, D**

Address  
City, State Zip Code

Phone: (XXX) XXX-XXXX

Individual NPI: 1234567890

Fax: (XXX) XXX-XXXX

TIN: 123456789

Email

Client Provider ID:

Ordering Provider is also the:

☐ Treating Therapist

BACK

CONTINUE



# Facility search

Search for facility and specify if it is the billing entity

Condition & Service(s)


Ordering Provider

Servicing Provider(s)

Clinical

Review


Servicing Facility (Billing Provider)

 **In Progress** ✓

Will the Servicing Facility be billing for the request? ? \*

☒ Yes ☐ No

Treating Therapist

 **PATEL, D**

[Change Treating Therapist](#)

▼ Servicing Facility Search

Provider Name

Address

City

State \*

ZIP Code

[▶ More Search Options](#)

SEARCH

Provider Results

Facility	Address	City	State	ZIP Code	Mileage	Phone	TIN	NPI	Network
Search for providers to see results									

BACK TO ORDERING PROVIDER

# Facility place of service selection

**Confirm the Place of Service type for the Servicing Facility \***

Select ▼

Select

Office

Outpatient Hospital

Independent Clinic

# Treating therapist selection (optional)

Search for the treating therapist if they are the billing entity otherwise unknown is acceptable

▼Treating Therapist Search

Last Name

First Name

Address

City

State \*

ZIP Code

California ▼

► More Search Options

UNKNOWN TREATING THERAPIST

SEARCH

Provider Results

Facility	Address	City	State	ZIP Code	Mileage	Phone	TIN	NPI	Network
No providers were returned in your search. Please try again.									

# Clinical entry

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

Rehabilitation (1)

START CLINICAL

Condition:

M75.50 Bursitis of unspecified shoulder

Code	Description	Clinical
97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes	Not Started

BACK TO SERVICING PROVIDER(S)

CONTINUE

# Clinical entry

Condition & Service(s)

Ordering Provider

Servicing Provider(s)

Clinical

Review

Rehabilitation (1)

Condition:

M75.50 Bursitis of unspecified shoulder

Code	Description	Clinical
97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes	In Progress →

Clinical Questions

What is the complexity level of the evaluation that was completed for this request?

☐ Low complexity (CPT 97161)

☐ Moderate complexity (CPT 97162)

☐ High complexity (CPT 97163)

☐ Unknown

CLOSE

BACK TO SERVICING PROVIDER(S)

CONTINUE

# Clinical entry

Servicing Provider(s)	Clinical	Review
<div><div>Clinical Questions</div><div><div>⌵ Expand All</div><div><b>What is the complexity level of the evaluation that was completed for this request?</b><div>Show Answers ⌵</div></div><div>Moderate complexity (CPT 97162)</div><div><b>Which of the following best describes the primary purpose of therapy?</b><div><div><input type="radio"/> Developing age appropriate skills which were previously undeveloped or keeping functions which are at risk of being lost</div><div><input type="radio"/> Improving, restoring, or adapting functional mobility or skills</div><div><input type="radio"/> Maintaining the current level of function, range of motion, strength, pain, or balance</div><div><input type="radio"/> Enhancing athletic performance or for recreational capability</div><div><input type="radio"/> Providing massage therapy</div><div><input type="radio"/> Elastic therapeutic taping (eg, Kinesio Tape)</div><div><input type="radio"/> None of these apply</div></div></div></div></div>		
<div><div>CLOSE</div><div>CONTINUE</div></div>		

# Clinical entry

Servicing Provider(s)

Clinical

Review

Clinical Questions

⌵ Expand All

What is the complexity level of the evaluation that was completed for this request?

Moderate complexity (CPT 97162)

Show Answers ⌵

Which of the following best describes the primary purpose of therapy?

Improving, restoring, or adapting functional mobility or skills

Show Answers ⌵

Is therapy needed to achieve this purpose?

☐ Yes

☐ No

☐ Unknown

CLOSE

CONTINUE

# Clinical entry

SAVE & EXIT CANCEL REQUEST

Servicing Provider(s) Clinical Review

Clinical Questions

Expand All

What is the complexity level of the evaluation that was completed for this request?

Moderate complexity (CPT 97162)

Show Answers

Which of the following best describes the primary purpose of therapy?

Improving, restoring, or adapting functional mobility or skills

Show Answers

Is therapy needed to achieve this purpose?

Yes

Show Answers

Did the patient have a surgical procedure in the last three (3) months related to the conditions for which services are being requested?

Yes

No

Unknown

CLOSE

CONTINUE



# Clinical entry

## Clinical Questions

⌵ Expand All

**What is the complexity level of the evaluation that was completed for this request?**

Show Answers ⌵

Moderate complexity (CPT 97162)

**Which of the following best describes the primary purpose of therapy?**

Show Answers ⌵

Improving, restoring, or adapting functional mobility or skills

**Is therapy needed to achieve this purpose?**

Show Answers ⌵

Yes

**Did the patient have a surgical procedure in the last three (3) months related to the conditions for which services are being requested?**

Show Answers ⌵

No

**Select all conditions that apply.**

- ☐ BMI > 40
- ☐ Chronic obstructive pulmonary disease (COPD)
- ☐ Cognitive impairment
- ☐ Diabetes mellitus
- ☐ Arthritis conditions
- ☐ Neurological condition
- ☐ Immunosuppression
- ☐ None of these apply
- ☐ Unknown

Continue ⌵

# Clinical Attestation

Please attest to the following:	Attest	Do not Attest
There is a complete plan of care documented	<input type="radio"/>	<input type="radio"/>
It is expected that functional improvement will be achieved and documented over a reasonable and predictable timeframe	<input type="radio"/>	<input type="radio"/>
The services will be delivered by a licensed provider of physical therapy	<input type="radio"/>	<input type="radio"/>

CLOSE

SAVE

# Order preview – review information collected

Member Contact Information

Confirm the Member's Phone Number and Email Address

Phone \*

Phone Type \*

Email \*

Email Type \*

Home

Select

☐ Unable to confirm phone

☐ Unable to confirm email

Rehabilitation Order Preview

WITHDRAW ORDER

Review the information for this case to make any changes and submit to confirm the Pre-authorization number or if additional review is needed.

Services Requested (1)

All requested services meet criteria

Hide Details

Service Date

03/25/2019

Edit Condition & Services

Edit Clinical

Condition

M75.50 Bursitis of unspecified shoulder

Physical Therapy Service(s)

Code

Description

97110

Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes

WITHDRAW SERVICE

Ordering Provider

PATEL, D

Change Ordering Provider

Hide Details

Servicing Facility (Billing Provider)

THERAPY

Change Servicing Facility

Hide Details

Treating Therapist

Change Treating Therapist

Hide Details

BACK TO CLINICAL

SAVE & EXIT

SUBMIT ORDER

# Order summary (after request is submitted)

## Rehabilitation

**Order Number:** 0V76CPG3G

**Valid Dates:** 3/25/2019 - 4/25/2019

**Order Status:** OPEN

*Order ID only applies to the Physical Therapy service(s) requested. Other services for this request will have a separate Order ID if Approved.*

### Rehabilitation Visits

**Approved Visits:** 5

If additional services are needed following this authorization, please have the evaluation, plan of care, functional tool score, and progress note ready to reference. Refer to request checklists for additional information.



# Frequently asked questions (FAQs)

- Is the initial treatment included in the Evaluation Authorization for the first visit?
  - ✓ Yes, Anthem allows treatment to be included in the first visit with the evaluation
- How do I get my authorization results?
  - ✓ Initiating a request on the ProviderPortal for PT/OT/ST and entering all the requested clinical questions will allow you to receive an immediate determination. If the request is approved, you will receive the Order ID, the number of visit and valid time frame.
- What if I already have an authorization that is valid through March 2019?
  - ✓ If Anthem has issued an authorization for visits that extends through the go-live date, they will honor that authorization and those visits will get paid. If patient still requires skilled services beyond that date, you will need to request an authorization from AIM.
- What if the member did not previously require pre-cert but are in the middle of treatment as of AIM go-live date?
  - ✓ The provider should initiate a pre-auth request for the treatment as of the AIM go-live date
- Can a member receive an authorization for more than one discipline (PT, OT, ST) at the same time?
  - ✓ Yes, if the member meets the clinical criteria, AIM will issue separate authorizations for each discipline, even if these disciplines belong to the same facility/billing entity

# Frequently asked questions (FAQs)

- Is there any change to the reimbursement contracting, for example fee for service or daily case rates?
  - ✓ No, AIM is not involved in any contracting or networking negotiations, and nothing has changed relative to the implementation of this AIM Program.
- What if I utilize a Functional Tool that is not listed in the AIM portal?
  - ✓ AIM has incorporated a very comprehensive list of Functional Tools, and feel strongly that every practitioner should incorporate a functional assessment into their treatment plan. However, there is an option to add a different tool and the associated score.
- Can I receive an authorization if I am an out of network provider?
  - ✓ Yes, if the clinical criteria is met and the member has out of network benefits, but the ordering provider will be informed they are out of network and that the member may have a higher out of pocket expenses. If the member does not have out of network the request will be denied.
- How can I discuss my case with a clinician or participate in a peer-to-peer?
  - ✓ If your request went for clinical review and you would like to discuss it, you can call AIM and discuss the request with a like-discipline reviewer, or subsequently a physician for a peer-to-peer.

# Frequently asked questions (FAQs)

- Do I have to submit modifiers to AIM to get my pre-authorization?
  - ✓ You would continue to submit claims with the appropriate modifiers required for your billing based on payer and line of business.
  - ✓ AIM does not require you to provide the modifier when submitting your pre-authorization request.
  - ✓ Per Anthem's clinical guidelines, if the request is for habilitation services, we will pass the appropriate modifier to Anthem.
- What if I have questions after the webinar?
  - ✓ Just email the support email box @ [RehabProgram@aimspecialtyhealth.com](mailto:RehabProgram@aimspecialtyhealth.com)



QUESTIONS



# Provider training

Providers can register for one of five webinar dates from the provider microsite:

[www.aimproviders.com/rehabilitation/](http://www.aimproviders.com/rehabilitation/)

Dates:

- Jan 24<sup>th</sup>, Thursday - 10 AM central time
- Jan 30<sup>th</sup>, Wednesday - 2 PM central time
- Feb 6<sup>th</sup>, Wednesday - 2 PM central time
- Feb 26<sup>th</sup>, Tuesday - 2 PM central time
- March 20<sup>th</sup>, Wednesday - 1 PM central time

## Provider webinar

### The Rehabilitation *ProviderPortal*<sup>SM</sup> Experience

Learn to enter your  
rehabilitative services  
order request online

Get the details and  
register here

# Thank you for attending!

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