

# Minutes

**2009 Physicians' Advisory Committee Meeting**  
March 19, 2009  
11:00 AM – 2:00 PM  
Location: Richardson, TX 901 South Central Exp.

<b>Meeting called by:</b>	Thomas Love Settlement
<b>Facilitators:</b>	Dr. Kim Reed- Chairperson
<b>Attendees:</b>	Dr. Charles Derus (IL) Dr. Mary D. Peterson ( TX) Dr. William Mitchell (NM) Dr. Lawrence Wilson (NM) Dr. Nick Knutson (OK) Dr. Matthew Fontana (NM) Lee Ann Shuptrine Rick Haddock Celeste Stewart Dale Meyer JeTaun Mitchell

<b>Agenda Topics</b>	
Welcome and Introductions	Dr. Kim Reed
HCSC Medical Policy Development	Lee Ann Shuptrine
Overview of the AIM program – High Tech Imaging Review	Rick Haddock & Celeste Stewart
Open Discussion	ALL

## Minutes

### HCSC Medical Policy Development

Lee Ann gave a detailed presentation on how medical policy is developed. The information was well received from the physicians. The question was posed “what can we do better?” Some suggestions were that external physicians could be more involved in the development process and better communication. A handout of the current medical policy was distributed. Lee Ann explained that we use the industry standard along with scientific research to make determinations.

There are currently approximately 390 active medical policies. Those that will no longer be reviewed are indicated on the policy. They will no longer be reviewed because there hasn't been any change for several years. Please keep in mind that not all denials are based on medical policy. Some procedures are simply not a benefit of the member's policy.

### Overview of AIM- High Tech Imaging Review

Celeste explained the current program we utilize, RQI, the Radiology Quality Initiative Program is a utilization management and quality improvement program established to ensure that providers order the most appropriate outpatient diagnostic imaging tests for the diagnosis in question, and maximize service to members through the efficient use of their health plan. This program is used in all plans with the exception of Oklahoma. The RQI process takes about 3-4 minutes from start to finish. AIM (American Imaging Management) is the vendor that maintains this program. HCSC uses its own criteria to process requests. While PPO denials are rare, HMO does require pre-authorization.

#### RQI Request Process

- Ordering physician staff provides patient and clinical information to AIM Referral Specialists (RS).
- If the information provided meets AIM's clinical criteria, the RS directs the case to a BCBSIL contracting imaging provider and assigns the request an RQI number.
- If all criteria are not met or additional information or review is needed, the case is forwarded to a Registered Nurse (RN) who uses additional clinical experience to evaluate the request against clinical guidelines.
- If an RQI number still cannot be assigned, the case is forwarded to an AIM Physician Reviewer (MD) who contacts the ordering physician directly to discuss the case and diagnostic imaging guidelines prior to issuing the RQI number.

Rick introduced a new product, OptiNet, which is currently being utilized by Wellpoint and Aetna. This program is not currently on HCSC 2009 horizon however we are interested in what the physicians think about the program. OptiNet has an enhanced credentialing process that reviews the equipment, level of experience among other things and provides a score. This score is transmitted to the health plan to help the plan determine what providers to use for imaging services. While the program is intriguing there wasn't much interest from the physicians attending the meeting.

Open Discussion

Dr. Derus brought up the topic of excessive paperwork. How can we work better together, physicians and HCSC to eliminate some of the unnecessary paperwork? Hours are wasted on the phone on both ends trying to get forms completed and faxed. Resources can be better utilized. Some suggestions include streamlining the claims processing process, creating a workgroup comprised of both communities the provider as well as the health insurance companies to work together to save time and effort on all ends of the process. Can we make forms available online; this will also help cut overhead cost.

Dr Fontana stated that those are some excellent suggestions; HCSC is currently working towards improvements as well as looking at current medical policy. We are also looking into auto-populating information using previous records to cut down on time and effort.

NPI is still a problem for Oklahoma physicians; they are suffering tremendously due to substantial problems with NPI specifically within the months of December and January.

Next Meeting:

September 17, 2009 in Albuquerque, New Mexico  
5701 Balloon Fiesta Pkwy NE