TurningPoint

Surgical Quality & Safety Program for:







Proprietary & Confidentiality Notice

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Improving the quality & affordability of healthcare

TurningPoint Healthcare Solutions offers support and care oversight for your patients at the times they need it the most.

- Better surgical outcomes by reviewing up front the patient's lifestyle, other illnesses and overall health
- Faster recovery times
- Lower risk for additional surgery

- High-quality care at the right time and in the right setting for the patient
- Fewer complications
- Y Fewer infections
- ✓ More affordable care





Introducing a program that helps support patient care

PROGRAM RESULTS

21-33%+

Reduction in **ER Post-Operative Utilization**

30%+

Cases with **Utilization Behavior Change**

24-64%+

Reduction in **Skilled Nursing (SNF)**

68%

Reduction in **Hip & Knee Surgical Revision Rates**

30%+

Reduction in **Inpatient**Readmission Post-Operatively



We improve patient care for a wide breadth of Musculoskeletal and Spinal surgical procedures

MUSCULOSKELETAL

Orthopedic Surgical Procedures

Including all associated partial, total, and revision surgeries

- Knee Arthroplasty
- Unicompartmental and Bicompartmental Knee Replacement
- Hip Arthroplasty
- Hip Arthodesis
- Shoulder Arthroplasty
- Elbow Arthroplasty
- Ankle Arthroplasty
- Wrist Arthroplasty
- Acromioplasty and Rotator Cuff Repair

- Anterior Cruciate Ligament Repair
- Knee Arthroscopy
- Hip Resurfacing
- Hip Osteotomy
- Meniscal Repair
- Femoroacetabular Arthroscopy
- Ankle Fusion
- Shoulder Fusion
- Wrist Fusion
- Osteochondral Defect Repair
- MPFL Reconstruction

Spinal Surgical Procedures

Including all associated partial, total, and revision surgeries

- Spinal Fusion Surgeries
 - Cervical
 - Lumbar
 - Thoracic
 - Sacral
 - Scoliosis
- Disc Replacement
- Laminectomy/Discectomy

- Kyphoplasty / Vertebroplasty
- Sacroiliac Joint Fusion
- Implantable Pain Pumps
- Spinal Cord Neurostimulator
- Spinal Decompression



Clinical Categories:

- Orthopedics
- Spine

Clinical Coding:

Clinical coding specific to the procedures included in the program may be accessed by:

https://procedurelookup.caresource.co m/. Please note the coding is subject to regular updates/changes as CPT/HCPCS coding is added or deleted



Clinical Experts & Medical Policies



Nationally Recognized Clinical Experts

TurningPoint's difference starts with our clinical leadership team that guides the quality and cost effectiveness of patient care



Our Peer Review Specialists Include:

- Six former presidents of the American Academy of Orthopaedic Surgeons (AAOS)
- Former presidents of the American Board of Orthopedic Surgery
- Past president of the North American Pediatric Society
- Two of AAOS's former Board representatives to CMS for all spine related billing and coding changes
- Multiple past regional and state orthopedic association presidents, including the former President of the New Jersey Orthopaedic Association, and AAOS Board Members
- Former Chief of Staff for the Houston Shriner's Children Hospital
- Past President and Current Board Member of the North American Spine Society



Our clinical policies and processes are based on the same standards utilized by national associations









To be <u>included</u>, a study had to meet the following selection criteria:

- Study was specific to the device type or procedure being reviewed
- Published in a peer-reviewed journal during or after 1966, in English
- Study must be completed on humans with a sample of 30 or more patients per treatment group
- Reported on 80% of the patient of the patient population of interest
- Study results were presented quantitatively
- ✓ Provided a full report of a clinical study
- ✓ Study treatment follow up period was > 4 weeks
- At least 80% of the enrolled study population were 19 years of age or older
- For any included study that used "paper-and-pencil" outcome measures (e.g. SF-36), only those that were validated were included
- "Paper-and-pencil" outcomes reported by a single group of investigators (i.e. a single study) were excluded
- Study was in vivo

Studies were **excluded** if any of the following criteria were met:

- X Studies of "Very Limited" evidence strength
- Retrospective non-comparative case series, medical records review, meeting abstracts, historical articles, editorials, letters, and commentaries
- Case series studies that gave patients the treatment of interest AND another treatment
- Case series studies that had non-consecutive enrollment of patients
- X Controlled trials in which patients were not stochastically assigned to groups AND in which there was heterogeneity in patient characteristics or outcomes at baseline AND where the authors did not statistically adjust for these differences when analyzing the results
- Composite measures or outcomes, even if they were patient-oriented
- Case series studies if no baseline values were reported
- X Study was performed on cadavers

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Submitting
Authorization
Requests &
Provider Portal Access



TurningPoint offers multiple tools to initiate prior authorization requests for procedures requiring pre-certification



Authorization Submission

Online Provider Portal

• Fax: 404-201-6624

• Phone: 678-528-2056 | 855-941-5310

Required Information

- Provider information
- Facility information
- Anticipated surgery date
- Health plan information

- Member demographics
- Requested procedures/diagnosis
- Clinical Information

TurningPoint Provider Portal Access



Direct Portal users must be registered before submitting requests



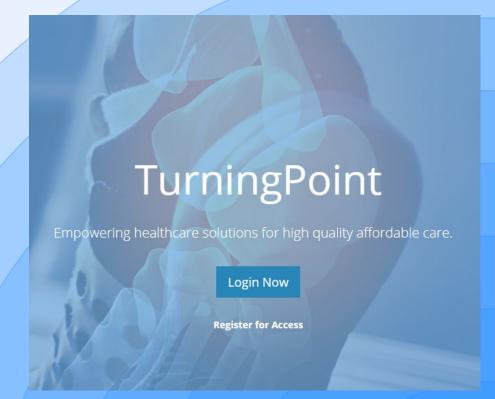
All providers will receive a notification of staff registered for portal access



Portal demonstrations can be set-up for your practice upon request

Note: To become a registered user of TurningPoint's Provider Portal, please go to www.myturningpoint-healthcare.com and register directly or contact the Provider Relations Team at 866-422-0800

Email: PortalRegistration@tpshealth.com



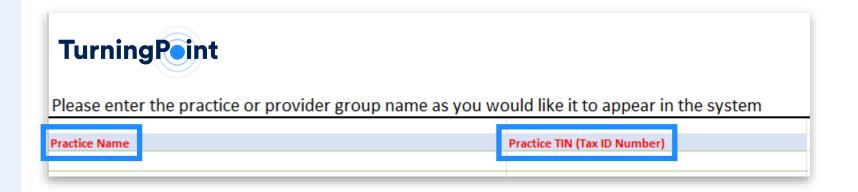
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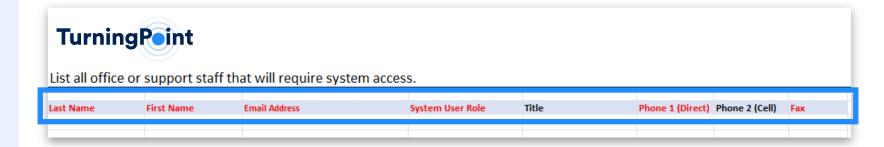
Requesting Provider Portal Access

When requesting access, TurningPoint will need:

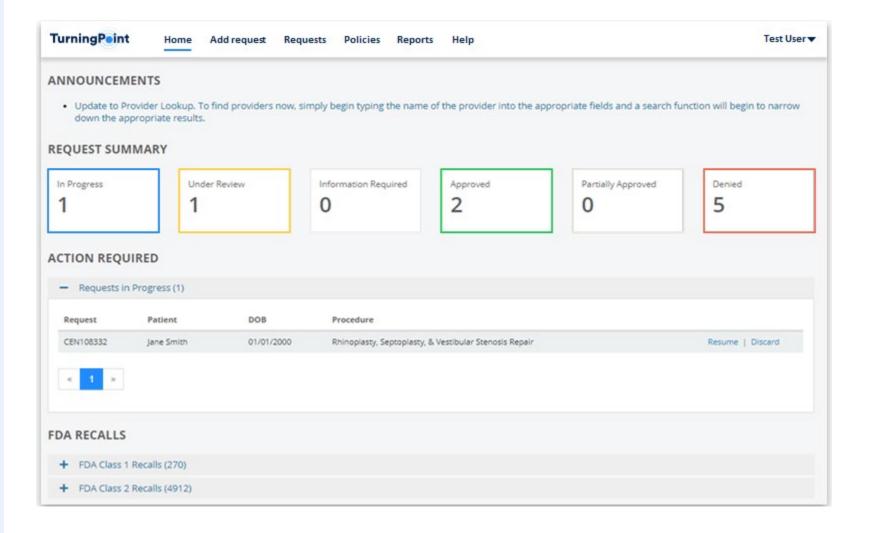
- Practice Name
- Tax ID
- Location(s)
- Practice Staff and Performing Physicians information

Submit Excel file to PortalRegistration@tpshealth.com

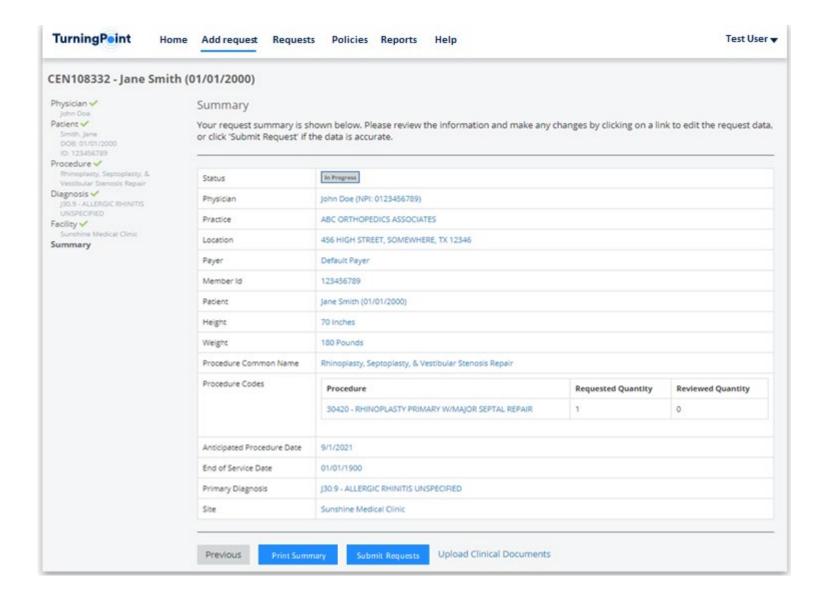




Our portal is the best process to initiate authorizations



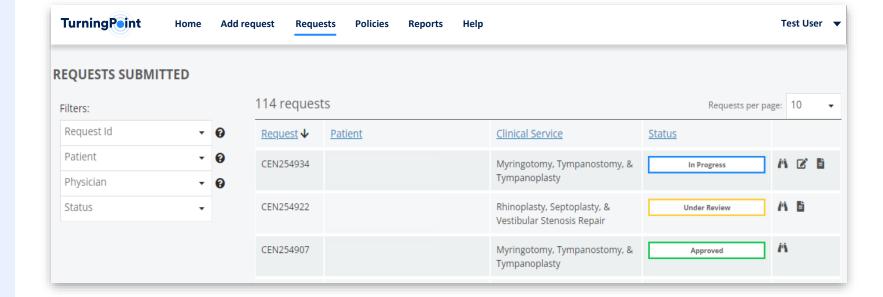
The portal allows you to initiate, track & retrieve case documents





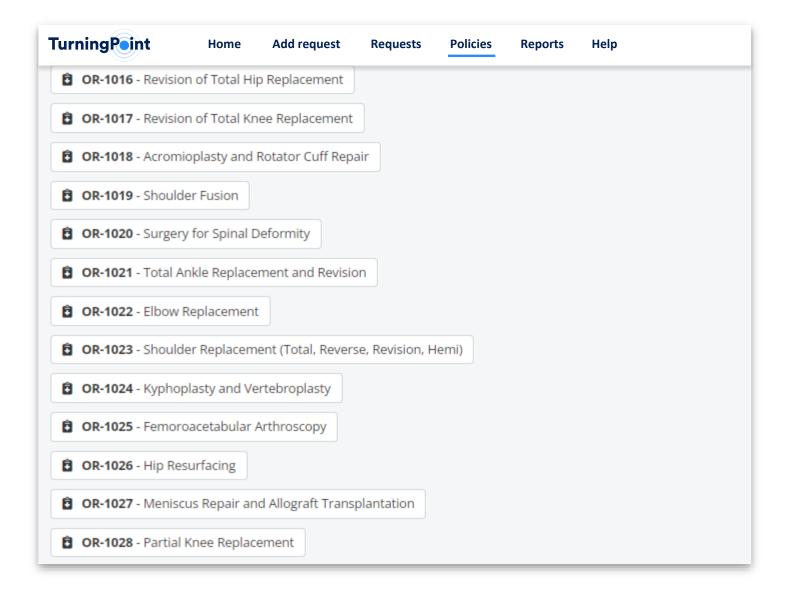
Authorization Status

- 1. Log in to the TurningPoint Provider Portal
- 2. Click Requests on the toolbar
- 3. Filter by Request ID, Patient, Physician or Status
- 4. See the "Status" column
- 5. Call Customer Service
 - Phone: 678-528-2056 or 855-941-5310
 - Obtain status of authorization requests through a Customer Service Representative





All medical policies and clinical guidelines are easily accessible on the portal





Required Documentation

- History of present illness
- Physical exam
- Past medical history
- Conservative therapies
- Imaging
- BMI
- Smoking status
- Surgical History
- Surgical plan with a risks and benefits discussion

*See GN-1002 Medical Record Documentation for documentation requirements. This documentation is included with all TurningPoint medical policies, which you can find in the TurningPoint Provider Portal.



Turnaround Times & Peer-to-Peer Process



Marketplace

TURNAROUND TIMES

Type of Request	Marketplace
Standard (non-urgent) requests	7 Calendar Days after TurningPoint receives complete information*
Expedited (urgent) requests	72 Hours
Retrospective requests	30 Calendar Days from the date on which TurningPoint received the authorization request

^{*}If you don't submit complete information, there may be delays in processing your request.

PEER-TO-PEER PROCESS

- Offered by TurningPoint during notification of denials
- May be requested by provider office
- TurningPoint will request three dates and times for scheduling to help navigate physician schedules
- Commercial peer-to-peer reviews are offered for reconsideration of final determinations to allow for review of supporting clinical documentation.
- Peer-to-peer reviews are unique in that they are conducted by specialized physicians in accordance with the procedure

Prior Authorizations are valid for 30 calendar days for outpatient procedures and 1 day inpatient for the day of planned admission.

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^{*}Turnaround time shall not exceed listed timeframes

Medicaid

TURNAROUND TIMES

Type of Request	Medicaid
Standard (non-urgent) requests	3 Business Days after TurningPoint receives complete information*
Expedited (urgent) requests	24 Hours
Retrospective requests	30 Calendar Days from the date on which TurningPoint received the authorization request

^{*}If you don't submit complete information, there may be delays in processing your request.

PEER-TO-PEER PROCESS

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Procedure Code Updates, Appeals & Claims



Procedure Code Update Process



PRE-PROCEDURE

Update procedure codes on an authorization **prior** to the date of service

Call TurningPoint. If medical necessity review is required for the new coding, a new request will be created and you may have to submit additional clinical documentation.



POST-PROCEDURE

Update procedure codes <u>after</u> a surgery has taken place

If a change was made to the procedure that was originally authorized, a Post Service Change Review can be submitted to TurningPoint to update the procedure prior to submitting the claim to the health plan. You may have to submit additional clinical documentation including post op notes.

*The PSCR form can be found in the "Help" tab within the TurningPoint Portal.





Appeals

TurningPoint is not delegated for appeals. Appeals should be submitted directly to the health plan. Final notification letter will provide detailed instructions for appeal submissions.



Claims

TurningPoint is not delegated to process claims. Providers should continue to submit claims as they do currently.

TurningPoint Market Launch

Program Effective Date

Members with a date of service on or after **01/01/2024**

TurningPoint will begin accepting these Pre-Authorization requests on **12/18/2023**

Provider Resources

- ✓ Program PowerPoint presentation
- ✓ Frequently Asked Questions (FAQ) document
- TurningPoint Provider Manual
- Instructional Webinars





Appendix

TurningPoint Provider Relations Support

Provider Relations Support

Phone: 866-422-0800 | Providersupport@tpshealth.com

Heather Shore, Provider Relations Representative

Phone: 407-602-3397 | hshore@tpshealth.com

Bethany Foxman, Manager Provider Relations

Phone: 407-233-3429 | bfoxman@tpshealth.com







Supporting your members when you need it most



Empowering Healthcare Solutions for High Quality Affordable Care



Improving Quality & Affordability

DCH Approved: 12/07/2023