ImpediMed Reimbursement Services

Provided by MCRA Reimbursement

Patient Access Program

The Patient Access Program is designed to increase patient access to SOZO® tests for lymphedema assessment through coverage of CPT-93702. It is offered to ImpediMed customers at no cost. MCRA Reimbursement experts will work directly with your staff to:

- Expedite insurance coverage and appeals
- Manage all stages of pre-authorization and appeal of denied claims
- Exhaust all appeal options

Coding and Reimbursement Hotline

- Credentialed coders respond to all inquiries to limit unnecessary denials
- 99% of coding inquiries are handled on the first call
- Ensures HIPAA and medical reimbursement compliance
- Available Monday through Friday from 8:30am to 7:00 pm Eastern

Comprehensive Coverage Access Support

- General coding and reimbursement questions
- Prepare and submit patient specific benefits verifications, pre-authorizations and appeals
- Incorporates payer guideline changes
- Available Monday through Friday from 8:30am to 5:00 pm Eastern

Phone: 855.357.8679 Fax: 240.238.9836 Email: impedimed@MCRA.com

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Benefits Verification – (1-2 days)

All payers

- Verify availability of benefits upon receipt of the patient information including demographics, insurance information, and procedure codes

Pre-Authorization Assistance – (1-15 days)

All commercial payers & Medicare Advantage Plans (Note: Medicare does not pre-authorize procedures)

- Draft pre-authorization request letters
- Submit pre-authorization request to health plan
- Provide frequent status updates

Peer to Peer or Subspecialty Review – (1– 3 days)

All commercial payers & Medicare Advantage Plans

- Facilitate discussion of medical necessity with a Medical Director at the health plan

Internal Appeals 1 or 2 Levels – (3–30 days)

All commercial payers & Medicare Advantage Plans

- Draft appeal letters
- Submit appeal to health plan
  - Opportunity to request a Medical Director that did not review the pre-authorization request
- Provide frequent status updates

External & Post Claim Denial Appeal (PCDA) – (5–60 days)

All commercial payers & Medicare Advantage Plans

- Following all internal appeal denials, the patient should pursue an external appeal with the appropriate State Department of Insurance
- MCRA supports patient appeals through the Patient Advocacy Department

Privacy and Compliance

- A Business Associate Agreement (BAA) is established directly with MCRA, no Protected Health Information (PHI) is shared with ImpediMed
- Case managers provide appropriate identification when interacting with insurers
- There are no assurances of pre-authorization or successful appeal of denied claims
- Only available for on-label use which follows the SOZO FDA cleared indication for use for lymphedema assessment

About MCRA Reimbursement

The Patient Access Program is designed to increase patient access to SOZO® tests for lymphedema assessment through MCRA is the leading industry-specialized, multi-service, employee-based, integrated business that assists clients in the entire technology life cycle, from research and development, through commercialization. MCRA's more than 150 years of combined expertise lies in clinical research, clinical reimbursement, regulatory and compliance.

Learn more: www.mcra.com

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