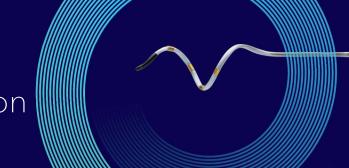
Medtronic

Symplicity™ blood pressure procedure

What to Expect: Supporting Prior Authorization



In support of the Medtronic Mission, we aim to help reduce economic barriers for our products and related therapies/procedures to ensure access to patients who need them. We are hopeful that our work will help you with accurate billing, leading to appropriate and timely reimbursement* of the Symplicity blood pressure procedure for indicated patients.

Disclaimer

Medtronic provides this information for your convenience only. It does not constitute legal advice or a recommendation regarding clinical practice. Information provided is gathered from third-party sources and is subject to change without notice due to frequently changing laws, rules, and regulations. As a result, Medtronic does not represent or guarantee that this information is complete, accurate, or applicable to any particular patient or third-party payer or guarantees payment.

The provider has the responsibility to determine medical necessity and to submit appropriate documentation, codes and charges for care provided. Medtronic makes no guarantee that the use of this information will prevent differences of opinion or disputes with Medicare or other payers as to the correct form of billing or the amount that will be paid to providers of service. Please contact your Medicare contractor, other payers, reimbursement specialists and/or legal counsel for interpretation of coding, coverage and payment policies and any applicable laws or regulations that may apply.

This document provides assistance for FDA approved or cleared indications. Where reimbursement is sought for use of a product that may be inconsistent with, or not expressly specified in, the FDA cleared or approved labeling (e.g., instructions for use, operator's manual or package insert), consult with your billing advisors or payers on handling such billing issues. Some payers may have policies that make it inappropriate to submit claims for such items or related service.

*Please note: For emerging therapies like the Symplicity Spyral™ renal denervation system, which is used during the Symplicity blood pressure procedure, it can take time to establish reimbursement.

Overview

Prior authorization (PA) is a utilization management process which requires healthcare providers to obtain payer approval for certain services/products[†] before these are provided to the patient and covered by the plan. PA is required for many non-Medicare Fee-For-Service payers and the general PA process is outlined below.

For recently approved therapies, it is not uncommon for payers to be silent (the payer does not have a policy that specifically includes or excludes coverage) or may have a noncoverage policy (the payer has a policy that specifically excludes coverage). However, prior authorization allows providers to request a one-time patient exception for coverage and is recommended for the Symplicity blood pressure procedure, also known as renal denervation. Please note PA denials are not uncommon as payer coverage policies evolve.

[†]Providers are responsible for contacting the payer to determine prior authorization requirements.

Steps in the prior authorization process

The following are verific	ed: PA request is submitted		Peer-to-Peer Review	Written Appeal	Subsequent Appeals
Patient eligibility & benef	its If approved, treatment is provided and a claim is	Appeal	Should occur promptly after denial	Refer to PA denial letter for rationale &	Refer to denial letter for next level appeal options.
PA requirements	' submitted.	al p	In some cases, may result in approved PA	appeal instructions	Some payers offer several.
Coverage policy	If denied, treatment may be postponed and appeal process initiated.	rocess	May not be available for all plans, then proceed with written appeal		
	14+ days to decision		1-2 days after denial	30+ days to decision	4+ months to decision

Additional Resources

The following resources are available to support your efforts in obtaining prior authorization. To access these resources, please contact your Regional Economic Manager (REM). Please note: Use of these resources does not guarantee authorization or payment.

- Reimbursement & Coding Guides
- Prior Authorization & Appeal Guide
- Documentation Best Practices

- Sample Prior Authorization Letter
- Physician Peer-to-Peer Guide
- Sample Appeal Letter

- Clinical Evidence Summary
- Product Brochure



To facilitate patient access, our Symplicity patient access support team can assist with education on and submission of prior authorizations and appeals for the Symplicity procedure. If you are a healthcare provider and would like additional information or assistance, please contact your regional economic manager (REM) or the patient access support team at <u>rs.symplicitypatientaccesssupport@medtronic.com</u>.

Who are the REMs?

The Regional Economic Managers (REMs) are a U.S. field based team with expertise in health economics, policy, claims, and reimbursement. The REMs are here to support customers with questions related to reimbursement for the Symplicity blood pressure procedure.

Meet the REMs





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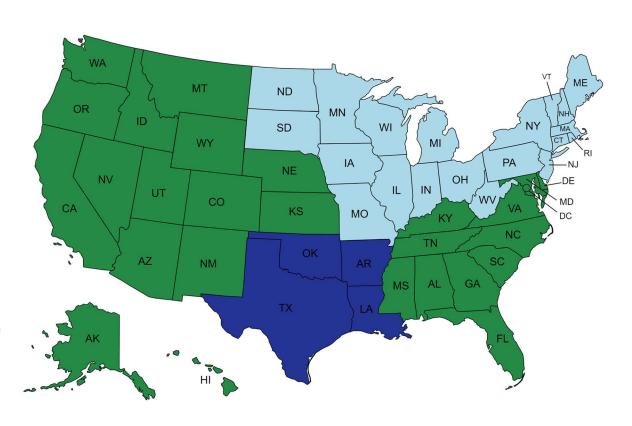


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