Radiology and Cardiology
Frequently Asked Questions

Who is eviCore healthcare?
evCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for Horizon BCBSNJ.

Which members will eviCore healthcare manage for the Radiology and Cardiology program?
evCore will manage prior authorization for Horizon NJ Health and Horizon NJ Total Care members.

What is the relationship between eviCore and Horizon?
Beginning on 12/16/2019, eviCore will manage Radiology and Cardiology services for Horizon BCBS NJ Health for dates of service 1/1/2020 and beyond.

What is eviCore healthcare’s Radiology and Cardiology program?
eviCore’s Radiology and Cardiology Program consist of Prior Authorization for advanced radiological and cardiology services.

Which Radiology and Cardiology services require prior authorization for Horizon?

Radiology
- CT, CTA (Computed Tomography, Computed Tomography Angiography)
- MRI, MRA (Magnetic Resonance Imaging, Magnetic Resonance Angiography)
- PET (Positron Emission Tomography)
- Diagnostic Ultrasounds

Cardiology
- Cardiac MR
- Cardiac CT
- Cardiac PET
- Nuclear Stress (Myocardial Perfusion Imaging)
- Echo
- Stress Echo
- Diagnostic Heart Catheterization
- CRID (Cardiac Rhythm Implantable Devices)

How do I check the eligibility and benefits of a member?
Member eligibility and benefits should be verified on eviCore.com before requesting prior authorization through eviCore.
Who needs to request prior authorization through eviCore?
All physicians who perform radiology and cardiology services are required to obtain a prior authorization for services prior to the service being rendered in an office or outpatient setting.

How do I request a prior authorization through eviCore healthcare?
Providers and/or staff can request prior authorization in one of the following ways:

Web Portal
The eviCore portal is the quickest, most efficient way to request prior authorization and is available 24/7. Providers can request authorization by visiting www.evicore.com

Call Center
eviCore’s call center is open from 7 a.m. to 7 p.m. local time. Providers and/or staff can request prior authorization and make revisions to existing cases by calling 866-496-6200.

Do Radiology and Cardiology services performed in an inpatient setting at a hospital or emergency room setting require prior authorization?
No. Radiology and Cardiology studies performed in an emergency room, while in an observation unit, or during an inpatient stay do not require prior authorization through eviCore.

How do I check an existing prior authorization request for a member?
Our web portal provides 24/7 access to check the status of existing authorizations. To check the status of your authorization request, please visit www.evicore.com and sign in with your login credentials.

What information is required when requesting prior authorization?
When requesting prior authorization, please ensure the proprietary information is readily available:

Member
- First and Last Name
- Date of Birth
- Member ID

Ordering Provider
- First and Last Name
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Number

Rendering (Performing) Provider
- Facility Name
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Street Address

Clinical(s)

Radiology:
- Requested Procedure Code (CPT Code)
- Signs, symptoms and physical exam findings
- Relevant Imaging/X-ray reports and lab work
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- Treatment such as medications, physical therapy, surgery; chemotherapy
- Working diagnosis
- Medical history, family history, including current office notes

Cardiology:
- Current office notes
- Lipid panels
- Report of current electrocardiograms (EKGs) signed by doctors
- Reports of previously performed left heart catheterizations, nuclear stress tests, routine exercise stress tests, echocardiograms and stress echocardiograms (as applicable).

**Note:** eviCore suggests utilizing the clinical worksheets when requesting authorization for Radiology and Cardiology services

**What is the most effective way to get authorization for urgent requests?**
Urgent requests are defined as a condition that is a risk to the patient’s health, ability to regain maximum function and/or the patient is experiencing severe pain that require a medically urgent procedure. Urgent requests may be initiated on our web portal at [evicore.com](http://evicore.com) or by contacting our contact center at 866-496-6200. Urgent requests will be processed within 24 hours from the receipt of complete clinical information.

**Where can I access eviCore healthcare’s clinical worksheets and guidelines?**
eviCore’s clinical worksheets and guidelines are available online 24/7 and can be found by visiting one of the following links:
- [Clinical Worksheets](http://www.evicore.com/provider/online-forms)
- [Clinical Guidelines](http://www.evicore.com/provider/clinical-guidelines)

**When will I receive the authorization number once the prior authorization request has been approved?**
Once the prior authorization request has been approved, the authorization information will be provided to the ordering and rendering provider via fax. The member will receive an approval letter by mail.

**How will the authorization determinations be communicated to the providers?**
eviCore will fax the authorization and/or denial letter to the requesting provider. Providers may also visit [www.evicore.com](http://www.evicore.com) to view the authorization determination.

**Note:** The authorization number will begin with the letter ‘A’ followed by a nine-digit number.

**If denied, what follow-up information will the referring provider receive?**
The referring and rendering provider will receive a denial letter that contains the reason for denial as well as Reconsideration and the appeal rights process.

**Note:** The referring provider may request a Clinical Consultation within three (3) business days with an eviCore Medical Director to review the decision.
How can the accepting provider confirm that the prior authorization number is valid?
Providers can confirm that the prior authorization is valid by logging into our web portal, which provides 24/7 access to view prior authorization numbers. To access the portal, please visit www.evicore.com.

To request a fax letter with the prior authorization number, please call eviCore healthcare at 866-496-6200 to speak with a customer service specialist.

How long is a Radiology and Cardiology authorization valid?
Authorizations are valid for 45 days. If the service is not performed within the timeframe provided, please contact eviCore healthcare.

Note: Authorizations performed outside of the authorized timeframe’s can possibly lead to a denial of claims payment.

Do Radiology and Cardiology services performed in the Emergency Room (ER) require authorization?
Prior authorization is not required for imaging services provided in an ER, observation, or urgent care setting.

What if an authorization is issued and revisions need to be made?
The requesting provider or member should contact eviCore with any change to the authorization. It is very important to update eviCore healthcare of any changes to the authorization in order for claims to be correctly processed for the facility that receives the member.

How do I determine if a provider is in network?
Participation status can be verified to Horizon BCBSNJ 800-682-9091.

Providers may also contact eviCore healthcare at 866-496-6200. eviCore receives a provider file from Horizon BCBSNJ with all independently contracted participating and non-participating providers.

Where do I submit my claims?
All claims will continue to be filed directly to Horizon BCBSNJ.

How do I submit a program related question or concern?
For program related questions or concerns, please email: clientservices@evicore.com.

Where can I find additional educational materials?
For more information and reference documents, please visit our resource page at https://www.horizonnjhealth.com/