HOW-TO GUIDE
Creating a Prior Authorization Request with Multiple CPT Codes on the Web

eviCore’s web portal is the quickest and easiest way to create Prior Authorization requests and check existing case status.

These instructions are designed to help you submit multiple CPT codes for one case within a single request for prior authorization.

Before You Begin-

- Instructions apply to Radiology and Cardiology requests managed through eviCore healthcare only
- Requests must be for one member at one location and for one date of service
- Up to 10 CPT codes are allowed within a single prior authorization request
- To simplify, the same status will apply to all CPT codes within the request
- The areas of the request-build process remain the same:
  - Selecting a program
  - Choosing a physician
  - Selecting an insurance carrier
  - Entering contact information
  - Selecting a member

What to Expect from this Guide-

This guide provides step-by-step instructions on how to submit multiple CPT codes for one prior authorization request and how to check request status.
1. After logging-in to the website, select **CLINICAL CERTIFICATION** from the home page to start a new request for prior authorization. When you reach the screen where the procedure (CPT) code is collected (see 1a), you will enter a single (“Primary”) procedure code. Later in the process you will be asked for the additional CPT codes. Select **CONTINUE** to choose the site of service.

2. Once the request is built, you will see screen 2a just before entering the clinical pathway. Select **CONTINUE**.

3. For Urgent requests, select **NO** from screen 3a. The entire request (including all allowed procedures) will be treated as urgent. Clinical information will need to be uploaded on a subsequent screen.

4. Next, indicate whether you have additional CPT codes to add for this request. Select **YES** to add them (see screen 4a).

Remember, the additional CPT codes must be for the same patient, date of service, and site of service entered for the original CPT code.
5. Enter one additional CPT code on screen 5a and select SUBMIT.

6. If the CPT code does not pass validation, an onscreen message will inform you that the code is either out of scope, has been requested already, or requires the creation of a separate authorization request (see screen 6a).

7. Repeat steps 5 and 6 for each additional CPT code (up to 10 CPT codes allowed within the same case). After entering your last CPT code, select NO, then SUBMIT from screen 6a.

8. After successful completion, screen 8a will display: “Each of your requested procedure codes has been added to this authorization. You can also find the procedure codes associated to this request via ‘Authorization Lookup’ on the web.” From here, you can select SUBMIT or check the box to FINISH LATER.
9. The clinical portion of the pathway will address each procedure requested individually. Screens 9a and 9b will display for each CPT code added.

10. On screen 10a, upload the clinical documents needed to support all the procedures for the request. Select **UPLOAD** to save the clinical documents for the request. Selecting **SKIP UPLOAD** bypasses this screen entirely.

11. Once the clinical pathway is complete, an onscreen message will display the procedures and status (see 11a). At this point, the initial process has been completed.

**Congratulations!**
12. When accessing the **Authorization Lookup** screen (see 12a), the following bulleted information is available for the request, and is also included on the notification letters sent to members and providers (see screen 12b). The notification letters will provide language for each procedure code that has been denied, based on the criteria and policy(ies) specific to that procedure.

- All the procedure codes requested
- The quantity requested
- The quantity approved.

13. If specific CPT codes need to be changed, implement the change(s) at the line level (see screen 13a). Simply select the **CHANGE SERVICE CODE** button to display the **AUTHORIZATION LOOKUP** screen (see 13b) where all fields are required. Select **SUBMIT** to validate the change. (Note: additional information may be required.)