

EVICORE BY EVERNORTH

Intro to Web Portal Training

Registration & Web Portal Navigation
Reference Guide

EviCore
By EVERNORTH

Benefits of Web Authorizations



Did you know that most providers are already saving time submitting prior authorization requests online?

We have been listening to you and have incorporated a number of enhancements that will streamline your online experience, allowing you to go from request to approval faster!

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Save time

Web authorization requests take 3 minutes on average.
Phone authorization requests take 12 minutes on average.

24/7 access

You can access the web authorization service at anytime, on any day. Phone authorizations have to be requested during business hours.

View and print authorization information

Approval details and the approval number are easily available online, and can be printed at your convenience.

Save your progress

Need to step away? Need to obtain additional information? Save your authorization request progress and come back to it.

Other online features

Features include the ability to access clinical criteria, check member eligibility, upload additional clinical information and schedule Clinical Consultations.

EviCore

By EVERNORTH

Account Registration And Login

EviCore Provider Portal – Access and Compatibility

+ Most providers are already saving time submitting clinical review requests online vs. telephone.

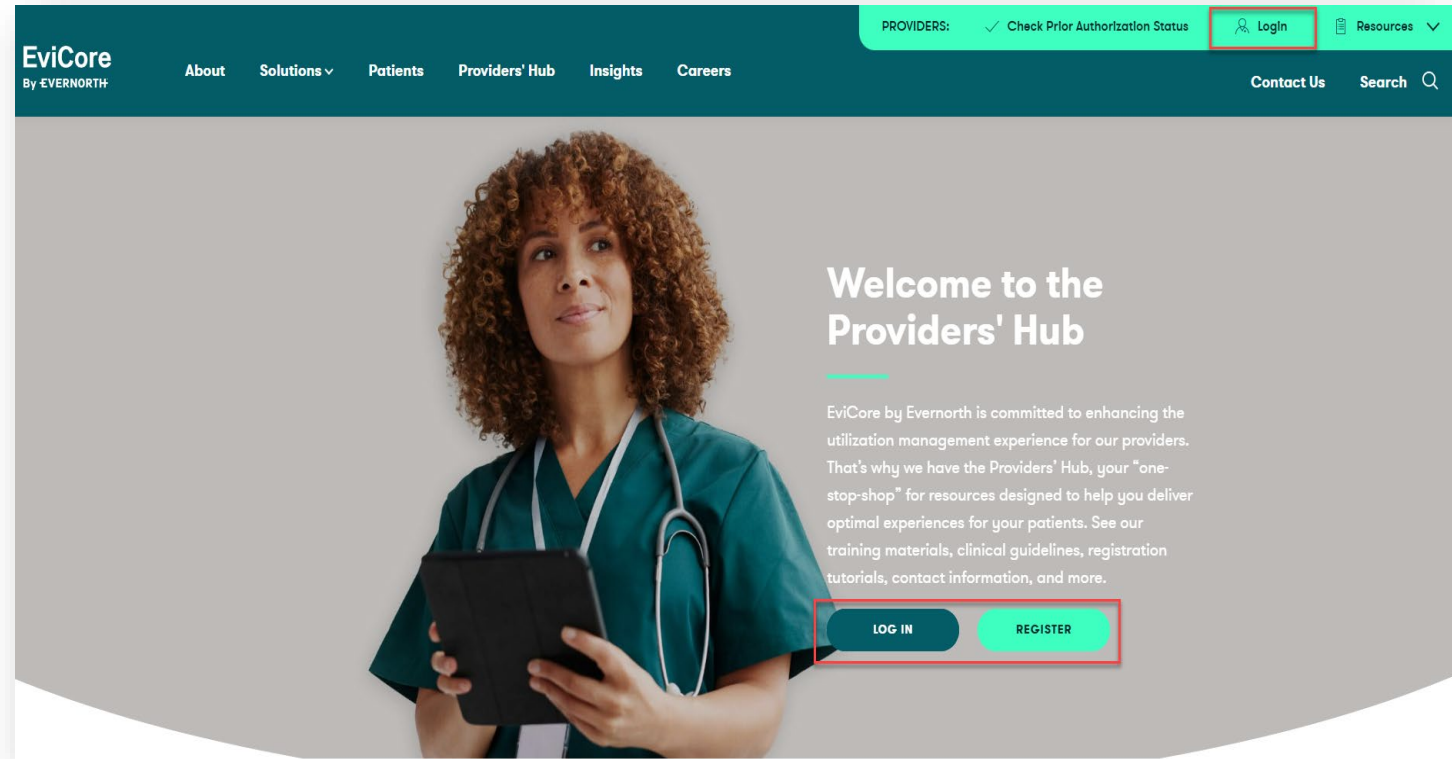
To access resources on the EviCore Provider Portal, visit [EviCore.com](https://www.evicore.com)

Already a user?

Log in with User ID & Password.

Don't have an account?

Click **Register**.



EviCore's website is compatible with **all web browsers**. If you experience issues, you may need to **disable pop-up blockers** to access the site.

Creating an EviCore Provider Portal Account

The image shows two screenshots of the EviCore provider portal registration process. The left screenshot is the login page, and the right screenshot is the registration form. A red arrow points from the 'Register' button on the login page to the registration form.

Left Screenshot (Login Page):

- Logo: EviCore By EVERNORTH
- Text: Welcome
- Text: Log in with your EviCore account
- Input field: Username*
- Text: Forgot username?
- Buttons: Next (dark teal), Register (blue, circled)

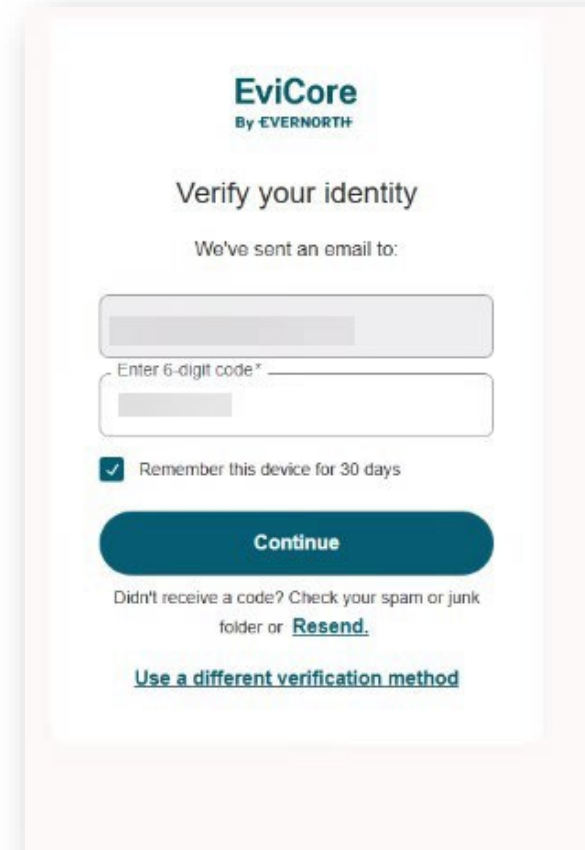
Right Screenshot (Registration Form):

- Header: EviCore By EVERNORTH
- Section: User Information
- Buttons: Next (grey)
- Fields:
 - First Name: Enter first name
 - Last Name: Enter last name
 - User Name: Create user name
 - Contact Info:
 - Email: Enter email
 - Confirm Email: Confirm email
 - Phone: Phone number
 - Ext (optional): Extension
 - Physician/Facility Information:
 - Individual NPI: Enter NPI

- + **Complete** the User Information section in full and **Submit Registration**.
- + You will immediately be sent an email with a **link to verify** your account and **create a password**. Once you have created a password, you will be redirected to the **login page**.

Setting Up Multi-Factor Authentication (MFA)

- + To safeguard your patients' private health information (PHI), we have implemented a multi-factor authentication (MFA) process.
- + After you log in, you will be prompted to register your device for **MFA**.
- + Choose which authentication method you prefer: Email or SMS. Then, **enter your email address or mobile phone number**.
- + Once you select **Send PIN**, a 6-digit pin will be generated and sent to your chosen device.
- + After **entering** the provided **PIN** in the portal display, you will **successfully** be authenticated and logged in.



The screenshot shows a mobile application interface for EviCore, a brand by Evernorth. The screen is titled "Verify your identity" and indicates that an email has been sent to the user. There are two input fields: the first is for the email address, and the second is for a 6-digit code. Below the code field is a checkbox labeled "Remember this device for 30 days" which is checked. A prominent blue "Continue" button is located below the checkbox. At the bottom, there is a link for "Resend" and a link for "Use a different verification method".

Unified Dashboard

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Hello,

Authorization Lookup Request An Authorization Worklist Portals Help / Contact User Access

My Worklist

Pending Approved Partially Approved Denied Cancelled All Statuses

Start typing to search...

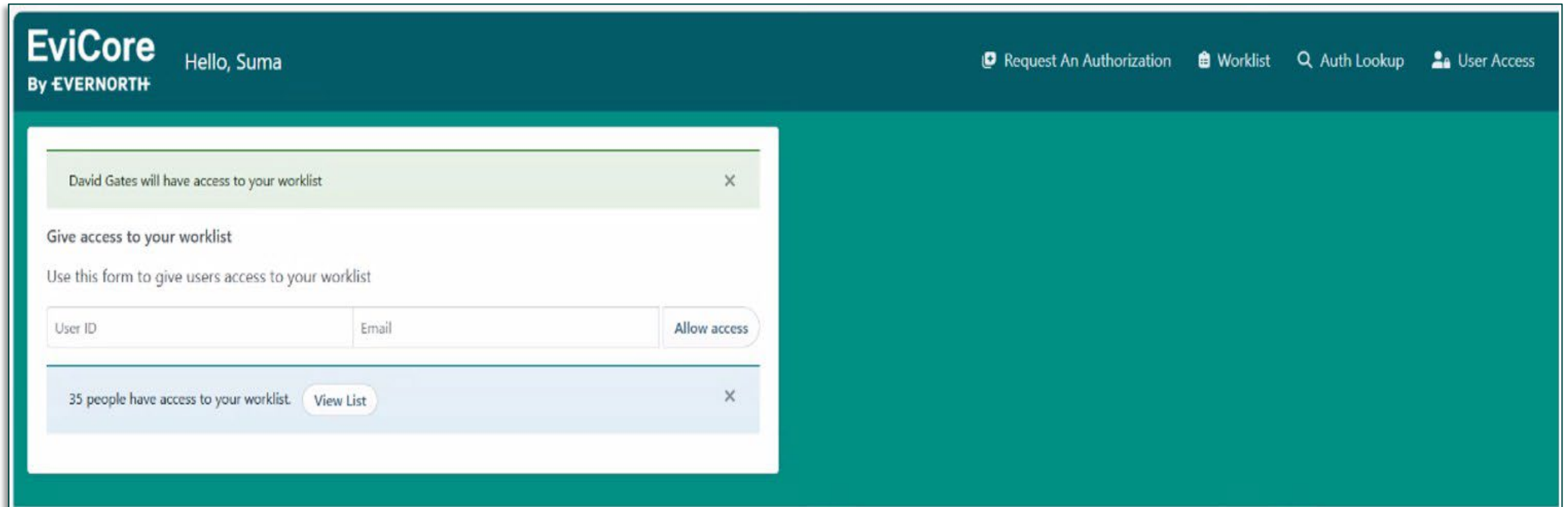
Request ID	Authorization ID	Patient	Status	Submitted	End Date	Procedure	Ordering Provider	Site of Service	Insurer
No Data Available									

Feedback

- + **View** the full EviCore **Unified** Provider Dashboard training at www.EviCore.com/provider under **Video Resources**.
- + **EviCore** Unified Provider Experience Dashboard Frequenty Asked Questions [UPX Dashboard](#)

Provider Shared Worklist

To allow others to view your worklist while you are out of the office, you can add them by selecting **User Access** and add their user ID and email address. They must have an EviCore account to be added.



Profile Update in Dashboard

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Authorization Lookup ▾ Request An Authorization Worklist Portals ▾ Help / Contact ▾ User Access Hello

- Profile
- Logout

User Profile

User Details

First Name: [Redacted] Last Name: [Redacted]

Profile Password

Password: [Redacted] [Change Password](#)

MFA Devices

Email [Redacted] [Change Email](#)

Mobile Phone [Add Phone](#)

[Feedback](#)

Web Portal Overview

Legacy CareCore National Portal

Welcome Screen

EviCore
By EVERNORTH

Monday, November 24, 2025 10:09 AM

Welcome to the CareCore National Web Portal. You are logged in as

Case search (Callout for Authorization Lookup)

Start a new Case (Callout for Clinical Certification)

MSK Provider Reports (Callout for MSM Practitioner Perf. Summary Portal)

Add Providers to your account (Callout for Add Provider)

User specific worklist (Callout for Home)

Check authorization requirements (Callout for Eligibility Lookup)

Worklist of saved for later cases (Callout for Certification Requests In Progress)

Toggle to Medsolutions (Callout for MedSolutions Portal)

New Unified Dashboard (Callout for Unified Dashboard)

Navigation Menu: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Perf. Summary Portal, Resources, Add Provider, MedSolutions Portal, Unified Dashboard, Help / Contact Us

Buttons:

- REQUEST AN AUTH
- RESUME IN-PROGRESS REQUEST
- ENTER PHARMACY CASE NUMBER
- SUMMARY OF AUTH
- AUTH LOOKUP
- MEMBER ELIGIBILITY

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Adding Providers

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- Home
- Certification Summary
- Authorization Lookup
- Eligibility Lookup
- Clinical Certification
- Certification Requests In Progress
- MSM Practitioner Perf. Summary Portal
- Resources
- Add Provider**
- MedSolutions Portal
- Unified Dashboard
- Help / Contact Us

Monday, November 17, 2025 10:22 AM

Add Practitioner

Enter Practitioner information and find matches.
*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip

Practitioner NPI

Practitioner State

Practitioner Zip

FIND MATCHES **CANCEL**

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Name	NPI	
Dr. Surabi	0670083794	REMOVE NPI
MARZEC, JAMES	0600000080	REMOVE NPI
WALSH, JEFFREY D	0000000000	REMOVE NPI

Initiating A Case- Program & Provider Search

- To begin, click the **Clinical Certification** or **Request an Auth** tab from the home screen or **Request an Auth** from the **Unified Dashboard**.
- Select the program of the case you'd like to submit.

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Home Certification Summary Authorization Lookup Eligibility Lookup Clinical Certification

Request an Authorization

To begin, please select a program below:

- Durable Medical Equipment(DME)
- EviCore Medical Oncology Pathways
- Gastroenterology
- Gene Therapy
- Home Health
- Lab Management Program
- Medical Specialty Drugs
- Musculoskeletal Management
- Pharmacy Drugs (Express Scripts Coverage)
- Radiation Therapy Management Program (RTMP)
- Radiology and Cardiology/Vascular Intervention
- Sleep Management

CONTINUE

[Click here for help](#)

- Next, Select your ordering provider from the list.
- If the provider is not listed, simply search the provider's NPI in the field at the bottom of the page.

Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI: **SEARCH** **CLEAR SEARCH**

	Provider
SELECT	XXXXXXXXXX IS XXXX
SELECT	XXXXXXXXXX XXXXX XXXX
SELECT	XXXXXXXXXX XXXXXXXXXX

If the provider's NPI is not listed above, please use the search feature below to add a new provider and continue with case build.

Search By NPI: **SEARCH**

BACK **CONTINUE**

[Click here for help](#)

Initiating A Case – Insurer, Contact Info, & Member Lookup

- Select the insurance company from the drop down menu.
- Next, pick the ordering provider's address.

Choose Your Insurer

Requesting Provider: [REDACTED]

Please select the insurer for this authorization request.

[REDACTED] ▼
Please Select an Address ▼

BACK **CONTINUE**

[Click here for help](#)

- Complete the contact information box with your name, phone #, fax #, and your email for case correspondence.
- Click the check mark box if you would like to receive email updates of case status changes.

Add Your Contact Info

Provider's Name:* [REDACTED] [?]

Who to Contact:* [REDACTED] [?]

Fax:* [REDACTED] [?]

Phone:* [REDACTED] [?]

Ext.: [REDACTED] [?]

Cell Phone: [REDACTED]

Email: [REDACTED]

Receive notification of case status changes

Please review the fax and phone numbers presented for accuracy. Change as necessary and click "Confirm Fax and Continue" to confirm they are correct. Changes apply only to this specific request. If you wish the change to be permanent, please contact the Health Plan.

BACK **CONFIRM FAX AND CONTINUE**

- Search & select your patient using their health plan member ID, date of birth, & last name.

Patient Eligibility Lookup

Patient ID:* [REDACTED]

Date Of Birth:* [REDACTED] MM/DD/YYYY

Patient Last Name Only:* [REDACTED] [?]

When entering patient details, please review and confirm the spelling of the patient's name. Verify accuracy of the patient's ID and date of birth.

LOOKUP AGAIN

Search Results

	Patient ID	Member Code	Name	DOB	Gender	Address
SELECT	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	M	[REDACTED]

BACK

Initiating A Case- CPT & ICD-10/Diagnosis Codes

- Using the drop down menu, select the **CPT code** for your patient's request.
- Enter the patient's **ICD10 code** by using the actual code itself or you can search by keyword/description.

Requested Service + Diagnosis

This procedure has not been performed. **CHANGE**

Radiology Procedures

Select a Primary Procedure by CPT Code[?] or Description[?]

▼ ▼

Don't see your procedure code or type of service? [Click here](#)
Additional Procedure codes will be collected/presented during the clinical questionnaire

Diagnosis

Select a Primary Diagnosis Code (Lookup by Code or Description)

LOOKUP

Trouble selecting diagnosis code? Please follow [these steps](#)

Select a Secondary Diagnosis Code (Lookup by Code or Description)
Secondary diagnosis is optional for Radiology

LOOKUP

BACK

[Click here for help](#)

- Search & select the **facility** where the imaging or services will be performed.
Try searching by the site NPI number only.

Add Site of Service

Specific Site Search

Use the fields below to search for specific sites. For best results, search by NPI or TIN. Other search options are by name plus zip or name plus city. You may search a partial site name by entering some portion of the name and we will provide you the site names that most closely match your entry.

NPI: Zip Code: Site Name:

TIN: City:

Exact match
 Starts with

LOOKUP SITE

Site Email (optional)

	Name	Address
SELECT	ST. JOSEPH'S MEDICAL CENTER	1000 N. 10TH AVE MILWAUKEE, WI 53233
SELECT	ST. JOSEPH'S MEDICAL CENTER	1000 N. 10TH AVE MILWAUKEE, WI 53233
SELECT	ST. JOSEPH'S MEDICAL CENTER	1000 N. 10TH AVE MILWAUKEE, WI 53233

BACK

Initiating A Case – Attestation

Proceed to Clinical Information

You are about to enter the clinical information collection phase of the authorization process.

Once you have clicked "CONFIRM AND CONTINUE," you will not be able to edit the Provider, Patient, or Service information entered in the previous steps. Please be sure that all this data has been entered correctly before continuing.

In order to ensure prompt attention to your online request, be sure to complete the clinical review before exiting the system. Even if you will be submitting additional information at a later time, please continue through the final summary page. Failure to formally submit your full request will cause the record to expire with no additional correspondence from eviCore.

I acknowledge that the clinical information I am about to submit for this authorization request is accurate and specific to this member, and that all information will be provided for this request.

BACK

CONFIRM AND CONTINUE

[Click here for help](#)

- Verify all information entered up to this point and make changes if needed. You will not have the opportunity to edit this information past this step.
- Click the check mark box to acknowledge the attestation.

Initiating A Case - Urgent

- Select yes or no to the **urgency indicator question**.
 - If your request is a standard request- select YES.
 - **If your request is URGENT- select NO.**

- If the case is marked urgent, you will be given this pop up. Please answer the question as indicated for your patient.
 - If none of the above is selected, your case will be processed as a standard case.

- Once a case is marked urgent, you will then be prompted to **upload clinical information**. This step is **REQUIRED**, in order to process the case appropriately.

- After the upload is complete, you will continue into the pathway questions, just like standard requests.

Proceed to Clinical Information

Is this case Routine/Standard?

YES **NO**

Proceed to Clinical Information

Urgency Indicator

If the case you are submitting is found NOT to meet one of the two conditions below, your case will be processed as a standard/routine, non Urgent request. If you have clinical information and this request meets the criteria for urgent, please indicate below.

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case. If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Please indicate if any of the following criteria are true regarding urgency of this request :

- A delay in care could seriously jeopardize the life or health of the patient or patient's ability to regain maximum function.
- A delay in care would subject the member to severe pain that cannot be adequately managed without the care or treatment requested in the prior authorization.
- None of the above

Clinical Upload

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case.

If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Required Medical information checklist

Browse for file to upload (max size 25MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

No file chosen

No file chosen

No file chosen

No file chosen

No file chosen

UPLOAD

Initiating A Case – Standard Request & Pathway Questions

➤ Select yes to the **urgency indicator question**, to request a standard review case.

Proceed to Clinical Information

Is this case Routine/Standard?

YES **NO**

➤ Complete the **clinical pathway questions**, as they pertain to your patient.

➤ Click **submit** to proceed to the next page.

Proceed to Clinical Information

1 Will there be any additional procedures needing prior authorization for the same patient, date of service, and site of service?
 Yes No

1 Which anatomy will be examined with the requested study?
 Shoulder
 Elbow
 Wrist

1 Which anatomy will be examined with the requested study?
 Shoulder
 Elbow
 Wrist

1 Which side will be examined with the requested study?
 Left Right

1 Which one of the following best describes the reason for the requested study?

1 Has there been an in-person evaluation with any provider for the current episode of this condition?
 Yes No Unknown

SUBMIT

Certification Requests in Progress & New Survey Feature

Example Questions

- + **Clinical Certification** questions may populate based upon the information provided
- + You can **save** your request and finish it **later** if needed
(**Note:** You **must** complete the request by **End of business that day**)
- + Select **Certification Requests in Progress** to resume a saved request
(this function is **not available** for single sign on (SSO) users)

Proceed to Clinical Information

Will there be any additional procedures needing prior authorization for the same patient, date of service, and site of service?
 Yes No

SUBMIT

Attention!

Is this a request for a bilateral procedure of a previously requested authorization?

YES

NO

Proceed to Clinical Information

Which anatomy will be examined with the requested study?

Hip Knee Ankle

Submit

Show Review History

Review History:

Which anatomy will be examined with the requested study?

[Knee](#) ←

Which side will be examined with the requested study? [Left](#) ←

Finish Later

Did you know?

You can save a certification request to finish later.

+ **New Feature:** Edit your responses to clinical questions prior to case submission by clicking the link for the related question.

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Uploading Clinical Documentation

Clinical Upload

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case.
If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Required Medical information checklist
Browse for file to upload (max size 25MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

No file chosen

No file chosen

No file chosen

No file chosen

No file chosen

EviCore requires name (first and last) and one additional identifier from the list below:

- + ***Date of birth***
- + ***Correct case number/Episode ID***
- + ***Member identification number***
- + ***Full address (Street, City, State and zip code)***
- + ***Full phone number including area code***
- + ***Driver's license number or other government-issued ID.***

Although it is desirable, Patient Identity Verifiers are not required on every page. If there are no conflicting identifiers present, it is acceptable to assume each page is a continuation of the prior page. A Cover Page with two Patient Identifiers present will satisfy HIPAA verification if no Patient discrepancy is present within subsequent pages.

Initiating A Case- Medical Review Case Summary

Once the pathway questions are completed and the case is submitted, you will receive a **case summary** with the case information and medical review determination.

This example case was sent to **medical review**.

Reference **Case number** when calling to speak with EviCore Customer Service

Summary of Your Request

Please review the details of your request below and if everything looks correct click CONTINUE

Your case has been sent to Medical Review. **Case Status**
The prior authorization you submitted, Case [REDACTED], has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.

Provider Name:	[REDACTED]	Referring Provider Information	Contact:	[REDACTED]
Provider Address:	[REDACTED]		Phone Number:	[REDACTED]
			Fax Number:	[REDACTED]
Patient Name:	[REDACTED]	Patient Information	Patient Id:	[REDACTED]
Insurance Carrier:	[REDACTED]			
Site Name:	[REDACTED]	Rendering Facility Information	Site ID:	[REDACTED]
Site Address:	[REDACTED]			
Primary Diagnosis Code:	[REDACTED]	Detailed Case Information	Description:	[REDACTED]
Secondary Diagnosis Code:	[REDACTED]		Description:	[REDACTED]
Date of Service:	[REDACTED]		Description:	[REDACTED]
CPT Code:	[REDACTED]	Case Number		
Case Number:	[REDACTED]			
Review Date:	[REDACTED]			
Expiration Date:	[REDACTED]			
Status:	Your case has been sent to Medical Review. The prior authorization you submitted, Case [REDACTED], has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.			

CANCEL PRINT CONTINUE

[Click here for help](#)

Initiating A Case- Approved Case Summary

Once the pathway questions are completed and the case is submitted, you will receive a **case summary** with the case information and medical review determination.

This example case was **approved**.

Summary of your request

Please review the details of your request below and if everything looks correct, click CONTINUE

You case has been Approved.
The Prior authorization you submitted, Case [REDACTED], has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.

Provider Name:	[REDACTED]	Contact:	[REDACTED]
Provider Address:	[REDACTED]	Phone number:	[REDACTED]
		Fax number:	[REDACTED]
Patient Name:	[REDACTED]	Patient ID:	[REDACTED]
Insurance Carrier:	[REDACTED]		
Site Name:	[REDACTED]	Site ID:	[REDACTED]
Site Address:	[REDACTED]		
Primary Diagnosis code:	[REDACTED]	Description:	[REDACTED]
Secondary Diagnosis code:	[REDACTED]	Description:	[REDACTED]
Date of service:	[REDACTED]	Description:	[REDACTED]
CPT code:	[REDACTED]		
Case Number:	[REDACTED]		
Review Date:	[REDACTED]		
Expiration Date:	[REDACTED]		
Status:	You case has been Approved. The Prior authorization you submitted, Case [REDACTED], has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.		

CANCEL **PRINT** **CONTINUE**

Certification Summary Tab

	Authorization Number	Case Number	Member Last Name	Ordering Provider Last Name	Ordering Provider NPI	Status	Case Initiation Date	Procedure Code	Service Description
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="text"/>	
1	NA					Pending Clinical Review			CT THORAX W/O CONTRAST
2	NA					Pending Clinical Review			MRI UPPER EXTREMITY JOINT W/O

Page 1 of 1 10

Single Status
Show All

Filter By Multiple Statuses
Show All

Date
7 days

Submit Close

- **The Certification Summary Tab** is a user specific work list, designed to make status checks and basic portal functions as quick and easy as possible.
- This tab can be used **to track status updates, change facility, upload clinical, schedule peer to peer reviews, & view correspondence.**
- **Filter** options are also available for certain **statuses** and time frames.

Authorization Lookup

Authorization Lookup

Search by Member Information | **Search by Authorization Number/NPI** | **OnePA: Prior Authorization Portal for Providers** | **Search by Claim Number/Health plan**

Search by Member Information

Required Fields

Healthplan:

Provider NPI:

Patient ID:

Patient Date of Birth:
MM/DD/YYYY

Optional Fields

Case Number:

or

Authorization Number:

or

Plan Of Care:

Search by **Member Information** requires:

- + Health plan name
- + Provider NPI
- + Patient ID
- + Patient date of birth
- + Optional- Case #, Auth #, or Plan of Care #

Search by Authorization Number/NPI

Required Fields

Provider NPI:

Auth/Case Number:

SEARCH

Authorization # & Provider NPI search requires:

- + Provider NPI
- + Auth/Case #

OnePA: Prior Authorization Portal for Providers

Required Fields

Healthplan:

Provider NPI:

SUBMIT

OnePA Search is a tool for users coming from the Express Scripts portal.

Search by Claim Number/Health plan

Required Fields

Healthplan:

Claim ID#:

SUBMIT

Search by **Claim # & Health plan** requires:

- + Health plan name
- + Claim ID processed by EviCore

➔ The **authorization lookup** screen has several options available to search for an existing case.

Authorization Lookup

➔ Approved Case Search

Authorization Lookup

Authorization Number: [REDACTED]
 Case Number: [REDACTED]
 Patient Name: [REDACTED]
 DOB: [REDACTED]
 Status: Approved
 P2P Status:
 Approval Date: [REDACTED]
 Service Code: 70553
 Service Description: MRI Brain W/ & W/O CONTRAST
 Site Name: [REDACTED]
 Start Date:
 Expiration Date:
 Date Last Updated:
 Correspondence: [REDACTED]

Auth #
P2P AVAILABILITY → **Check Peer to Peer availability**
Auth effective dates
UPLOADS & FAXES → **View uploads, letters, & faxes**

REFRESH

Procedures

Procedure	Description	Qty Requested	Qty Approved	Modifier(s)
70553 CHANGE CODE	Magnetic resonance imaging (MRI) (a special kind of picture) of your head before and after contrast (dye)	1	1	

Change CPT Code

PRINT

➔ Denied Case Search

Authorization Lookup

Authorization Number: [REDACTED]
 Case Number: [REDACTED]
 Patient Name: [REDACTED]
 DOB: [REDACTED]
 Status: Denied
 P2P Status:
 Approval Date:
 Service Code: 73221
 Service Description: MRI UPPER EXTREMITY JOINT W/O
 Site Name: [REDACTED]
 Start Date:
 Expiration Date:
 Date Last Updated:
 Correspondence: [REDACTED]

Case Number
P2P AVAILABILITY → **Check Peer to Peer availability**
ALL POST DECISION OPTIONS → **Check available post decision options**
UPLOADS & FAXES → **View uploads, letters, & faxes**

REFRESH

Procedures

Procedure	Description	Qty Requested	Qty Approved	Modifier(s)
73221 CHANGE CODE	Magnetic Resonance Imaging (MRI), a special kind of picture of your arm joint (wrist, elbow or shoulder) without contrast (dye)	1	0	

PRINT

Authorization Lookup

➤ Upload Additional Clinical

Authorization Lookup

Authorization Number: NA
Case Number: **P2P AVAILABILITY**
Patient Name:
DOB:
Status: Additional Information Required **WITHDRAW** *Withdraw Option*
P2P Status:
Referring Provider:
Referring Provider NPI:
Approval Date:
Service Code: 70450
Service Description: CT HEAD/BRAIN W/O CONTRAST
Site Name:
Site NPI:
Site Address:
Site City:
Site State:
Site Zip:
Start Date: 10/31/2025
Expiration Date:
Date Last Updated:
Correspondence: **UPLOADS & FAXES**
Clinical Upload: **UPLOAD ADDITIONAL CLINICAL** *Upload Additional Clinical Option*
[Run Clinical Questionnaire](#)

REFRESH

Procedures

Procedure	Description	Qty Requested	Qty Approved	Modifier(s)
70450 CHANGE CODE	Computed tomography (CT), special picture of your head or brain without contrast (dye)	1	0	

PRINT

[Click here for help](#)

➤ Change Site

Authorization Lookup

Authorization Number:
Case Number: **P2P AVAILABILITY**
Patient Name:
DOB:
Status:
P2P Status:
Approval Date:
Service Code:
Service Description:
Site Name: **CHANGE SITE**
Start Date:
Expiration Date:
Date Last Updated:
Correspondence:

REFRESH

Procedures

Procedure	Description	Qty Requested	Qty Approved	Modifier(s)
73718 CHANGE CODE	Magnetic resonance imaging (MRI) (a special kind of picture) of your leg without contrast (dye)	1	1	

PRINT

[Click here for help](#)

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Withdrawing Cases on the Portal

The screenshot shows the EviCore portal interface. At the top, there is a navigation bar with the EviCore logo and the text 'By EVERNORTH'. Below the logo, there are several menu items: Home, Certification Summary, Authorization Lookup (which is currently selected), Eligibility Lookup, Clinical Certification, and Certification Requests In Progress. The date and time 'Wednesday, April 16, 2025 4:32 PM' are displayed below the navigation bar. The main content area is titled 'Authorization Lookup' and contains a form with various fields for case information. On the right side of the form, there are three buttons: 'P2P AVAILABILITY', 'WITHDRAW' (which is highlighted with a red rectangular border), and 'UPLOADS & FAXES'. Below these buttons, there are two more buttons: 'UPLOAD ADDITIONAL CLINICAL' and 'Run Clinical Questionnaire'.

We are happy to announce we've recently implemented a new process that allows the capability of withdrawing applicable cases on the website! This option will only be available for Commercial or Medicaid cases on the CareCore National Platform. The MSK program & Medicare members are excluded from this online capability, due to special case handling processes already in place requiring an agent's assistance.

- + In order to proceed with this process, the case must be in a **pending status**. Cases in physician review or already in a final status (**approved, denied, or canceled**) are **excluded**.
- + If the withdraw option is **missing**- the case **doesn't qualify** to be withdrawn.
- + **Only** the user that created the case will have **permission** to withdraw the case.

Training Resources

Training Resources

Remember to visit www.Evicore.com/provider and go to the Training Resources section to view 'Facility Change Enhancement,' 'How to Guide: How to Create a Prior Authorization Request with Multiple CPT Codes,' and other training materials.

- + Checklist on How To Speed Up Prior Authorization
- + EviCore Provider Experience Territory List
- + EviCore Provider Engagement
- + Required Medical Information Checklist
- + Gastroenterology Screening vs. Surveillance
- + Health Plan Contact Information
- + FAQ for Specialized Therapy Providers
- + Tips to Improve Therapy Efficiency
- + Massage Therapy corePath Training Presentation
- + EviCore Unified Provider Experience Dashboard
- + Benefits of Web Authorization
- + How To Guide: How to Create a Prior Auth Request with Multiple CPT Codes
- + EviCore PAC Provider Experience Territory List
- + How To Avoid Peer-to-Peer Phone Calls
- + Facility Change Enhancement
- + EviCore General FAQ
- + Peer-to-Peer Scheduling Tool
- + Pharmacy Drug Portal Guide
- + EviCore Vascular Billing Groups Reference Guide

EviCore

By ~~EVERNORTH~~



Web Portal Overview

Legacy MedSolutions Portal

Announcements

EviCore
By EVERNORTH

MCNET Online Chat Logout

Announcements Home Search/Start Case Claim Search CareCore National Portal Post Acute Care Unified Dashboard

Announcements [Print] [Download] [Help]

Highmark Radiology and Cardiology De-implementation- Posted on: 02 Oct 2025
Effective 12/2/2025, EviCore will cease processing for Radiology and Cardiology prior authorization requests on behalf of Highmark. For any prior authorization requests submitted on or after 12/2/2025, please submit via the Highmark provider portal.

Alabama Medicaid Migration- Posted on: 22 Sep 2025
Effective **October 1, 2025**, all Radiology requests for Alabama Medicaid must be submitted using the CareCore National Portal. Please click the CareCore National Portal tab at the top to toggle over to submit your authorization request. You may still utilize the MedSolutions Portal to lookup older authorization requests that were submitted prior to October 1, 2025.

Cigna Healthcare Update- Posted on: 30 May 2025
Cigna Healthcare is removing 96 codes from the list of services that require prior authorization. Cigna Precertification Requirements are available within the ProviderNewsroom.com. In an effort to reduce paperwork and time providers spend seeking approvals for more routine services, Cigna Healthcare will remove 96 codes from the list of services requiring prior authorization, effective May 31, 2025. EviCore has published the lists of CPT Codes requiring prior authorization within the program folders located under the Solution Resources tab at EviCore.com. If unfamiliar with EviCore's Cigna Resource page, go to www.eviCore.com, in the upper right corner of the homepage, there is a Resources dropdown, select Provider Resources, this will take you to the Provider Resources page. Enter Cigna and search. Under the Solution Resources tab, select a program folder, within you will find the current CPT list which will indicate if a prior authorization is required.

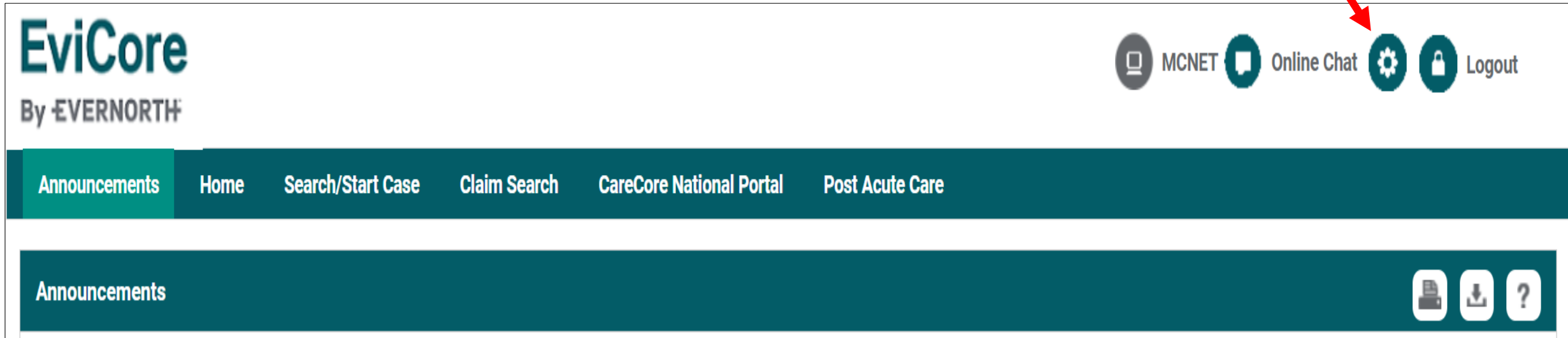
Feedback

View upcoming notices on the MedSolutions Announcements page.

Note: You can access the CareCore National Portal at any time without having to provide additional log-in information. Click the CareCore National Portal or Unified Dashboard button in the top bar to seamlessly toggle back and forth between the two portals.

Account Settings

- + The **Options Tool** allows you to access your Account Settings to update information:
- + Add additional Tax ID numbers of Physicians or Facilities



Account Settings

- + Adding **Preferred Tax ID numbers** will allow you to view the summary of cases submitted for those providers:
- + Search for a Tax ID by clicking **Physician** or **Facility**.
- + Confirm you are authorized to access PHI by clicking the check box, and hit Save.
- + Tax ID's will dictate which authorization requests the user is allowed to view

EviCore

By EVERNORTH

Preferences

Please set up Preferred Provider Tax IDs for your account. You can search and add a Physician or Facility Tax ID. Adding preferred tax id would allow you to view the summary of cases submitted for these provider Tax IDs. The Case Summary can be viewed via Case Lookup, Patient History and Recently Submitted grids. It also allows you to view the Claims details of your preferred Facilities.

Physician Facility

Tax ID*

Preferred Tax IDs on my account

Tax ID	Provider Type
--------	---------------

Before proceeding, you must confirm that you are authorized to access Protected Health Information (PHI) as defined under the Health Insurance Portability and Accountability Act on behalf of the Tax ID/s added.

You must also agree to limit your access to the minimum amount of information necessary to perform a permitted treatment or other health care operations activity.

In the event you obtain access to information that you are not authorized to view, please notify eviCore immediately.

Failure to comply with these terms may result in immediate termination of you and your organization's access to eviCore' website.

Privacy Breaches: Be very careful to check the ordering physician's full name, their specialty and the last four digits of their TIN or NPI before selecting them in this system. By sending patients' Protected Health Information (PHI) to physicians who are not the ordering physicians, you may be in violation of HIPAA Privacy regulations.

* I hereby agree that I have read and understood the above message

Home Tab

The Home Page will have two worklists: **My Pending Worklist** and **Recently Submitted Cases**

+ My Pending Worklist

- Save case information and complete case at a later time
- Double click on request to continue with case submission

+ Recently Submitted Cases

- Cases that are pending review and/or cases recently approved or denied
- Double click on case to view case summary

The screenshot displays the EviCore By EVERNORTH Home Tab interface. The top navigation bar includes the EviCore logo, a navigation menu with 'Home' selected, and utility icons for MCNET, Online Chat, and Logout. Below the navigation bar, the 'My Pending Worklist' section is active, showing a header with a count of 0 and a warning message. The table below has columns for Case Number, Insurer Name, Patient Name, Date Of Birth, CPT Codes, ICD Codes, ICD Version, Referring Physician, Facility, Start Date, and Pending. The table is currently empty. Below this is the 'Recently Submitted Cases' section, also with a count of 0. It includes date filters for Start Date (08/12/2024) and End Date (08/13/2024), and a checkbox for 'Only My Portal Cases'. The table columns include Case Number, Insurer Name, Patient Name, Date Of Birth, Case Status, Case Activity, Submit Date, Authorization Number, Effective Date, Expiration Date, and Referring Physician. This table is also empty. A vertical 'Feedback' button is visible on the right side of the interface.

Search/Start Case

Search/Start Case – Member Lookup

The screenshot shows the EviCore web application interface. At the top left is the EviCore logo with 'By EVERNORTH' underneath. On the top right, there are icons for MCNET, Online Chat, settings, and Logout. A dark teal navigation bar contains links for Announcements, Home, Search/Start Case (which is highlighted), Claim Search, CareCore National Portal, and Post Acute Care. Below this is a 'PATIENT & CASE LOOKUP' section with a search icon and a 'Patient Search Result(s)' header with a question mark icon. The main content area is divided into two sections: 'Patient Lookup' and 'Case/Auth Lookup'. The 'Patient Lookup' section has a form with the following fields: 'Insurer*' (a dropdown menu showing 'MEDSOLUTIONS DEM'), 'Member ID:' (a text input field containing 'xyz00002'), an 'OR' button, 'First Name:', 'Last Name:', and 'Date of Birth:' (with a calendar icon). There are 'Reset' and 'Search' buttons at the bottom of this section. A red arrow points from a callout box to the Member ID field. The 'Case/Auth Lookup' section has radio buttons for 'Case ID' (selected) and 'Auth Number', followed by a text input field and a 'Search' button. A red arrow points from a second callout box to the Case ID radio button. A vertical 'Feedback' button is on the right side of the page.

Patient Lookup

Insurer:* MEDSOLUTIONS DEM

Member ID: xyz00002

OR

First Name:

Last Name:

Date of Birth:

Reset Search

*Select the Insurer (and) enter either the Member ID (or) Patient First Name, Last Name and Date of Birth

Case/Auth Lookup

Case ID Auth Number

Search

To conduct a **Patient Lookup**, first select the appropriate insurance company from the *Insurer* drop down. Next, enter the *Member ID* or *First Name, Last Name* and *Date of Birth* for the result to be returned.

For **Case/Auth Lookup**, you will only need to enter the *Case ID* or *Authorization Number* at the bottom of the page and tab over to hit **Search**.

Search/Start Case – Member Lookup

PATIENT & CASE LOOKUP

Patient Lookup

Insurer:* MEDSOLUTIONS DEM

Member ID: xyz00002

OR

First Name:

Last Name:

Date of Birth:

Reset Search

*Select the Insurer (and) enter either the Member ID (or) Patient First Name, Last Name and Date of Birth

Case/Auth Lookup

Case ID Auth Number

Search

Patient Search Result(s)

Member ID	Patient Name	Date Of Birth	Gender	Address	Program	Program Effective Date	Program Term Date
XYZ00002	HILL, BOBBY	2/1/1974	MALE	101 MAIN ST, FRANKLIN, TN, 37067	MSI DEMO PROGRAM - PA REQ	1/1/2009	12/31/2999

1 - 1 of 1 items

PLEASE MAKE SURE YOU ARE SELECTING THE CORRECT PATIENT BY VERIFYING THE PATIENT'S NAME AND DATE OF BIRTH BEFORE STARTING A NEW REQUEST

Patient Detail Information

Member ID:	XYZ00002	Gender:	MALE	Program:	MSI DEMO PROGRAM - PA REQ
Name:	HILL, BOBBY	Address:	101 MAIN ST, FRANKLIN, TN, 37067	Program Effective Date:	1/1/2009
Date of Birth:	2/1/1974	Insurer:	MEDSOLUTIONS DEMO	Program Term Date:	12/31/2999

This is a eviCore DEMO Program

Create Case

Patient History - 164 Records found

Case ID	Auth Number	Submit Date	Case Status
		7/29/2024	Canceled
		7/5/2024	Canceled
		6/28/2024	Approved
		6/22/2024	Approved
		6/11/2024	Canceled

Clear Filters Refresh Data

If there are cases associated with the patient, they will populate once the patient is selected. Double click on a case ID in the Patient History to open that case.

Case Creation – CPT/ICD Codes

- + Begin typing the **CPT** and **ICD codes** or descriptions, then click the appropriate option with your cursor. Modifier selections will populate for the code, if applicable. The portal allows selection of unlimited CPT and ICD codes.
- + A box will populate allowing you to enter the retro date of service **if retrospective requests** are able to be initiated **via the web** for the **health plan specified**.
- + If the **CPT** code is entered and a message is displayed stating the **CPT code** does not exist, please (1) **Check** the contracted CPT code list in the provider resources (2) **Verify** you are processing the case on the correct platform

The screenshot displays the EviCore 'CASE DETAIL' page. The top navigation bar includes 'Announcements', 'Home', 'Search/Start Case', 'Claim Search', 'CareCore National Portal', and 'Post Acute Care'. The 'Patient & Case Lookup' sidebar on the left contains fields for Insurer (MEDSOLUTIONS DEM), Member ID (xyz00002), and patient name and birth date. The main 'CASE DETAIL' section shows member information: Insurer: MEDSOLUTIONS DEMO, Member ID: XYZ00002, Health Plan/Program: MSI DEMO PROGRAM - PA REQ, First Name: BOBBY, Last Name: HILL, Date of Birth: 2/1/1974, Gender: MALE. Below this, the 'CPT/ICD' section has two search boxes. The 'CPT Codes' search box shows a result for code 73721, 'MRI Lower Extremity, any joint, without contrast material(s)', with a modifier dropdown set to 'LT'. The 'Diagnosis' search box shows a result for code M25.562, 'Pain in left knee'. At the bottom, there is a 'Please select the Date Of Service' field and a 'Save & Next' button. A red error message at the bottom states: 'Please do not Enter a Date of Service if the test is being performed today or in the future.'

Case Creation – Ordering Physician/Procedure to be performed at Requesting Physician Office

- + Select from a default **Physician** or search by **Name**, **Tax ID**, or **NPI** number.
- + Once the correct physician displays, select by clicking on the record. Then hit **“Save & Next.”**
- + There is the option to **“Procedure to be performed at Requesting Physician’s office,”** if appropriate.

The screenshot displays the 'CASE DETAIL' interface. On the left is a 'PATIENT & CASE LOOKUP' sidebar with fields for Insurer (MEDSOLUTIONS DEM), Member ID (xyz00002), and search options for Patient First Name, Last Name, and Date of Birth. The main area shows 'CASE DETAIL' with member information: Insurer: MEDSOLUTIONS DEMO, Member ID: XYZ00002, Health Plan/Program: MSI DEMO PROGRAM - PA REQ, First Name: BOBBY, Last Name: HILL, Date of Birth: 2/1/1974, Gender: MALE. Below this is 'CPT/ICD' information: CPT Codes: 73721, ICD Codes: M25.562. The 'Physician' section features a 'Physician Preferences' table with one entry: TEST DOCTOR, 730 COOL SPRINGS BLVD, FRANKLIN, TN, 370677289, 7417417410, *****6789. A red arrow points to a checkbox labeled 'Procedure to be performed at Requesting Physician's Office'. Below is a 'Physician Search' section with input fields for First Name (test), Last Name (doctor), Tax ID, and NPI, and a 'State' dropdown set to 'Select State'. A 'Lookup Physician' button is present. A table below the search fields lists search results, with the first row highlighted in green: TEST DOCTOR, 730 COOL SPRINGS BLVD, FRANKLIN, TN, 370677289, 7417417410, *****6789. A vertical 'Feedback' button is on the right edge.

First Name	Last Name	Address	City	State	Zip Code	NPI	Tax ID
TEST	DOCTOR	730 COOL SPRINGS BLVD	FRANKLIN	TN	370677289	7417417410	*****6789

First Name	Last Name	Address	City	State	Zip Code	NPI	Tax ID
TEST	DOCTOR	730 COOL SPRINGS BLVD	FRANKLIN	TN	370677289	7417417410	*****6789
TEST	DOCTOR	730 COOL SPRINGS BLVD	FRANKLIN	TN	370677289	7417417410	*****6789
TEST	DOCTOR	730 COOL SPRINGS BLVD	FRANKLIN	TN	370677289	7417417410	*****6789
TEST	DOCTOR	730 COOL SPRINGS BLVD	FRANKLIN	TN	370677289	7417417410	*****6789

Case Creation – Facility

- + Select from a default **Facility** or search by clicking the **Search Facility** button and entering the **Facility Name**, **Tax ID**, or **NPI** number.
- + Once the correct facility displays, select by clicking on the record. Then select **“Save & Next.”**

Facility

Facility Search

Name: Tax ID: NPI:

Street Address: Zipcode:

Enter the Facilities Name, Street Address, ZIP Code, Tax ID or NPI Lookup Facility

Please choose one of the following facilities:

Facility Name	Address	Distance	Equipment	Tax Id	NPI	Taxonomy Codes
TEST FACILITY FOR PORTAL	PO, NASHVILLE, AA, 37211	9.47	3D CONFORMAL, ARTHROGRAM, BRACHYTHERAPY, COMP JOINT, COMP MSK, COMP SPINE, CT, GEN XRT, IMRT, MRI, MYELOGRAM, NCM, NEUTRON BEAM, OPEN MR, PAIN MGMT, PET, PET/CT, PROTON BEAM, SPECT, SPINE FUSION, TEE, US, USGENERAL, USGUIDEDPROC, USGYN, USOB	*****6789		

1 - 1 of 1 items

Back Save & Next

Feedback

Case Creation – Review and Submit

- + You can **edit** the CPT/ICD codes, Physician, and Facility information by clicking the “Edit” icons next to the field that needs to be updated.
- + Review the case information, then **click Submit**. Case details cannot be changed on the portal once you hit this button. Any changes after submission would need to be made via phone.
- + Once you select Submit, you may receive an automatic **approval**, or you may be asked to **upload the patient’s medical record**, or you may be prompted to respond to the clinical questions for additional information.
- + We are happy to announce a new feature on this page for status change **e-notifications!** This allows you to receive an email (e-notification) for any updates to status for this case.

EviCore
By EVERNORTH

Announcements Home Search/Start Case Claim Search CareCore National Portal Post Acute Care

PATIENT & CASE LOOKUP

Patient Lookup

Insurer: MEDSOLUTIONS DEMO

Member ID: xyz00002

OR

First Name: Last Name: Date of Birth:

Reset Search

* Select the insurer (and) enter either the Member ID (or) Patient First Name, Last Name and Date of Birth

Case/Auth Lookup

Case ID Auth Number

Search

CASE DETAIL

Member Insurer: MEDSOLUTIONS DEMO Member ID: XYZ00002 Health Plan/Program: MSI DEMO PROGRAM - PA REQ
First Name: BOBBY Last Name: HILL Date of Birth: 2/1/1974 Gender: MALE

CPT/ICD CPT Codes : 73721 ICD Codes : M25.562

Physician Physician Name: DOCTOR , TEST , Tax ID : ****6789 , NPI : 7417417410

Facility Facility Name: TEST FACILITY FOR PORTAL , Tax ID : ****6789 , NPI :

Please review the case details before submitting the case. You can edit the CPT/ICD, Physician and Facility information. The case details can't be changed once you press the 'Submit' button. Once the case is submitted, you may be presented with a Survey to answer few questions about this request.

All Fax notifications for this case will be sent to (000) 000-0000. Please verify that it is correct. If you would like to change your Fax number, please click on the gear icon on the top right of the page for the Account Info screen.

Until a case number appears for this request, it is not a submitted case and it will not be reviewed for medical necessity. Please ensure all steps are completed in order to receive a case number.

I acknowledge that the clinical information submitted to support this authorization request is accurate and specific to this member, and that all information has been provided. I have no further information to provide at this time.

I would like to receive email notifications when there is a change to the status of this case.

Notifications will be emailed to _____, please verify that is the correct email. If you would like to change your email address, please update now. _____ This email will also be updated on the account info screen in the eNotification Email ID field.

Submit

New feature! This option allows you to receive e-notification updates for case status updates/changes.

Feedback

Initiating A Case - Urgent

- Select yes or no to the **urgency indicator question**.
 - If your request is a standard request- select YES.
 - **If your request is URGENT- select NO.**

- If the case is marked urgent, you will be given this pop up. Please answer the question as indicated for your patient.
 - If none of the above is selected, your case will be processed as a standard case.

- Once a case is marked urgent, you will then be prompted to **upload clinical information**. This step is **REQUIRED**, in order to process the case appropriately.

- After the upload is complete, you will continue into the pathway questions, just like standard requests.

Proceed to Clinical Information

Is this case Routine/Standard?

YES NO

Survey Submit Later

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case. If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

If the case you are submitting is found NOT to meet one of the two conditions below, your case will be processed as a standard, non-Urgent request. If you have clinical information and this requests meets the criteria for urgent, please indicate below:

- A delay in care could seriously jeopardize the life or health of the patient or patient's ability to regain maximum function
- A delay in care would subject the member to severe pain, the cause of which could not be adequately managed without the care or treatment requested in the prior authorization
- None of the above

Submit

Show Review History

Review History:

Is this case Routine/Standard? [No](#)

Upload Additional Clinical Documentation

Additional Documentation ?

In order for this case to be processed as urgent, clinical documentation must be uploaded. Warning! Please be sure and review that the attachments or notes apply to this case. Adding clinical information to the wrong case could result in a HIPAA violation.

File Name Browse

No attachments saved

Apply Cancel

Providing Clinical Information

- + If **applicable**, you will be asked a series of **questions** beginning with a reason for the request.
- + Select from the dropdown, or enter a rationale in the text box if none of the options are applicable.
- + **Respond** to the clinical **questions** that populate based upon the answers provided. You may save/print this information and come back at a later time, if needed. Cases will remain in your pending work list for **seven calendar** days.
- + Select **“Submit”** to submit the survey answers.

Survey Submit Later

Note: Please complete questions below to receive an immediate notification as to whether the case is approved or if additional clinical information is required.

1 Which anatomy will be examined with the requested study?
 Hip Knee Ankle

* 73721 MRI of lower extremity joint (ankle, knee or hip) without dye

Please select "Submit" to continue

Providing Clinical Information

- + Once the **survey questions** have been submitted, you may receive an approval based upon the **answers/information** provided.
- + If additional review is required, the decision criteria will **populate**, and you can print the **criteria guidelines** if needed.

Based on the clinical information provided, this is consistent with eviCore Evidence based Clinical Guidelines.

① Which action would you like to take?

- Continue
- Voluntarily Cancel Request

Providing Clinical Information

- + You can choose to “**Submit for Additional Review**” to proceed to the clinical upload and review process, or you may “**Voluntarily Cancel Request**.”
- + Cancelling the request ensures there will not be a denial in the patient’s history.

Based on the clinical information provided, this is

Which action would you like to take?

- Continue
- Voluntarily Cancel Request

Request for Additional Clinical Documentation

Request for Additional Clinical Documentation

Your request will require additional Medical Review. Additional Clinical information relevant to this request will help avoid delays in the review process.

(Examples of Clinical Information : Recent Member History, Physical Exam Results, Lab Results, Prior Imaging Results, Prior Treatment)

You must select one of the following:

- Attach / Add additional clinical information now (If Urgent/Expedited case, upload is required. If no document is uploaded, the case will be saved in your home page under "My Pending Worklist". Urgent cases pended to the worklist will expire the end of the day the case was created.)
- Will Fax or Call to provide additional clinical information
- There is no additional clinical information to provide

Depending upon the health plan, specific options for providing clinical will be available. You will then be asked to attach the electronic clinical information available.

Continue

Providing Clinical Information

Upload Additional Clinical Documentation [X]

Additional Documentation [?]

In order for this case to be processed as urgent, clinical documentation must be uploaded.
Warning: Please be sure and review that the attachments or notes apply to this case. Adding clinical information to the wrong case could result in a HIPAA violation.

File Name

No attachments saved

Note Text

Maximum Character limit on each note is 5000.

No notes saved

You can attach clinical notes or documents by clicking Browse and selecting the correct file(s) located on your computer.

You can type in free text notes as clinical information. Hit save for any notes entered in the text box.

Hit Apply to continue or Cancel to add additional information at a later time.

Case Summary Page – Pending Case

- + Once you submit a case for medical review, you will be redirected to the **Pending Case Summary Page** where you'll be able to view case information including **Case number/Service order number** and current status/activity.

CASE SUMMARY

The Case has been Cancelled.

Case/Authorization

Service Order: **Case Number** Initiated Date: 10/01/2024 Case Status: Date Of Service:

Patient

First Name: BOBBY
Last Name: HILL
Date of Birth: 02/01/1974
Address: 101 MAIN ST, FRANKLIN, TN, 37067
Phone: 000/000-0000
Member ID:
Insurer:
Program:

Referring Physician

First Name:
Last Name:
Address:
Phone :
Fax :
Specialty:
Tax ID:
NPI:

Requested Facility

Name:
Address:
Phone:
Fax:
Equipment:
Tax ID:
Taxonomy Code:
NPI:

CPT Codes

CPT Code	Units	Description	CPT Status	Cpt Modifier
70336	1	MRI Temporomandibular joint(s), TMJ	Pending	

Diagnosis Codes

ICD Code	ICD Version	Description
S12.100D	10	UNSPECIFIED DISPLACED FRACTURE OF SECOND CERVICAL VERTEBRA, SUBSEQUENT ENCOUNTER FOR FRACTURE WITH ROUTINE HEALING

Additional Documentation

File Name
CDSValid _

[View](#)

Clinical Notes

Note Text
IF YOU HAVE ALREADY SUBMITTED THE REQUESTED INFORMATION FOR THIS CASE, PLEASE DISREGARD THIS RE...

[View](#)

Case Summary Page – Approved Case

+ The **Approved Case Summary Page** will provide case information such as the **authorization number** and **effective/end date of the authorization**.

Case/Authorization			
Service Order:	Authorization Number:	Auth Effective Date: 06/28/2024	Auth End Date: 08/27/2024
Initiated Date: 06/28/2024	Decision Date: 06/28/2024	Decision Type: Initial	Case Status: Approved
Date Of Service:			

Patient	Referring Physician	Requested Facility
First Name: BOBBY Last Name: HILL Date of Birth: 02/01/1974 Address: 101 MAIN ST, FRANKLIN, TN, 37067 Phone: 000/000-0000 Member ID: Insurer: Program:	First Name: TEST Last Name: DOCTOR Address: 730 COOL SPRINGS BLVD, FRANKLIN, TN, 370677289 Phone : 999/999-9999 Fax : 999/999-9999 Specialty: ALLERGY,OPTICIAN Tax ID: NPI:	Name: TEST FACILITY FOR PORTAL Address: PO, NASHVILLE, AA, 37211 Phone: 123/123-1231 Fax: 123/123-1231 Equipment: 3D Conformal,Performs Arthrograms,Brachytherapy,Comprehensive Joint,Comprehensive Musculoskeletal,Comprehensive Spine,CT Scan,General Radiation Therapy,IMRT,MRI Scan,Performs Myelograms,Nuclear Medicine study,Neutron Beam Treatment,Delivery,MRI Open and Closed,Pain Management,PET Study,PET/CT Scanner,Proton Beam Therapy,Spine Surgery – Spine Fusion,Ultrasound Tax ID: Taxonomy Code: NPI:

CPT Codes				
CPT Code	Units	Description	CPT Status	Cpt Modifier
70551	1	MRI BRAIN (head); without contrast	Approved	

Diagnosis Codes		
ICD Code	ICD Version	Description
	10	

Additional Documentation	Clinical Notes
File Name	Note Text

Feedback

Case Summary Page – Denied Case

+ The **Denied Case Summary Page** will provide case information as well as the denial rationale. Case Summary reports can be accessed/printed at any time.

+ **P2P Availability** Option

CASE SUMMARY 🔄 ? 🖨️

Thank you for submitting your preauthorization request. The Case has been Denied.

Case/Authorization

Service Order: Initiated Date: 06/23/2025 Decision Date: 06/24/2025 Decision Type : Initial

Case Status: Denied Date Of Service:

P2P AVAILABILITY ←

Patient

First Name:
Last Name:
Date of Birth:
Address:
Phone:
Member ID:
Insurer:
Program:

Referring Physician

First Name:
Last Name:
Address:
Phone :
Fax :
Specialty:
Tax ID:
NPI:

Requested Facility

Name:
Address:
Phone:
Fax:
Equipment:
Tax ID:
Taxonomy Code:
NPI:

CPT Codes

CPT Code	Units	Description	CPT Status	Denial Rationale Description	Cpt Modifier
71260	1	CT CHEST; with contrast	Denied	Your doctor told us that you have a cough. The request cannot be approved because:	

Diagnosis Codes

ICD Code	ICD Version	Description
J98.4	10	Other disorders of lung

Peer to Peer Scheduling

How to Schedule a Peer-to-Peer (P2P) Request

- Log into your account at www.EviCore.com
- Perform Authorization Lookup on [CareCore](#) or Search/Start on [MedSolutions](#) to determine the status of your request.
- Click on the **P2P Availability** button to determine if your case is eligible for a Peer-to-Peer conversation:
 - + If your case is eligible for a Peer-to-Peer conversation, a link will display allowing you to proceed to scheduling without any additional messaging.

Authorization Number:	NA
Case Number:	P2P AVAILABILITY
Patient Name:	
DOB:	
Status:	Denied
P2P Status:	CareCore National

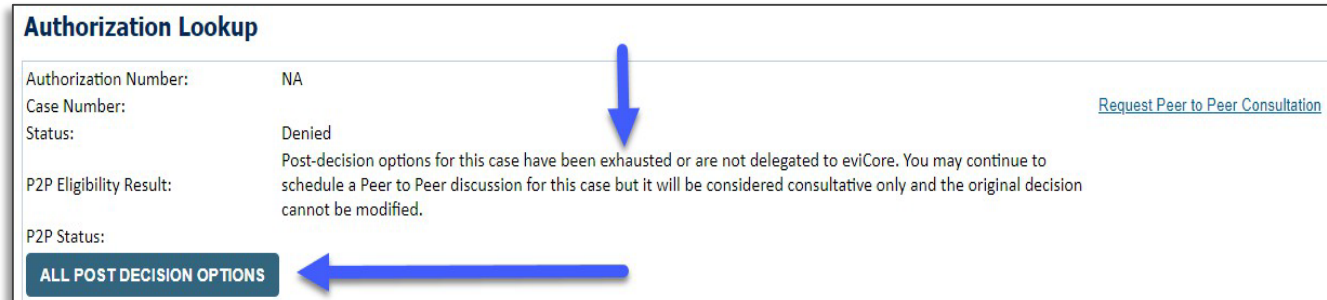
CASE SUMMARY	
Thank you for submitting your preauthorization request. The Case has been Denied.	
Case/Authorization	
Service Order:	Initiated Date: 06/23/2025
Case Status: Denied	Date Of Service:
P2P AVAILABILITY ←	

MedSolutions

P2P AVAILABILITY	Request Peer to Peer Consultation
-------------------------	---

How to Schedule a Peer-to-Peer Request

- Pay attention to any messaging that displays. In some instances, a Peer-to-Peer conversation is allowed, but the case decision cannot be changed. When this happens, you can still request a Consultative Only Peer-to-Peer. You may also click on the **All Post Decision Options** button to learn what other action may be taken.



Authorization Lookup

Authorization Number:	NA
Case Number:	Request Peer to Peer Consultation
Status:	Denied
P2P Eligibility Result:	Post-decision options for this case have been exhausted or are not delegated to eviCore. You may continue to schedule a Peer to Peer discussion for this case but it will be considered consultative only and the original decision cannot be modified.
P2P Status:	

ALL POST DECISION OPTIONS

- Once the **Request Peer-to-Peer Consultation** link is selected, you will be transferred to our scheduling software via a **new browser window**.

*If you experience issues, you may need to **disable pop-up blockers** to access the site.*

How to Schedule a Peer-to-Peer Request

New P2P Request

EviCore
By EVERNORTH

Case Reference Number Case information will auto-populate from prior lookup

Member Date of Birth

+ Add Another Case

Lookup Cases >

- Upon first login, you will be asked to confirm your default time zone.
- You will be presented with the case number and member date of birth (DOB) for the case you just looked up.
- You can add additional cases for the same Peer-to-Peer appointment request by selecting **Add Another Case**.
- To proceed, select **Lookup Cases**.

- You will receive a confirmation screen with member and case information, including the Level of Review for the case in question. Click **Continue** to proceed.

New P2P Request

EviCore
By EVERNORTH

Case Ref #: Remove ✓ P2P Eligible

! Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.

Member Information	Case P2P Information
Name	Episode ID
DOB	P2P Valid Until 2020-11-11
State	Modality MSK Spine Surgery
Health Plan	Level of Review Reconsideration P2P
Member ID	System Name ImageOne

Continue

How to Schedule a Peer to Peer Request

Case Info

1st Case

Case #

Episode ID

Member Name

Member DOB

Member State

Health Plan

Member ID

Case Type MSK Spine Surgery

Level of Review Reconsideration P2P

Questions

Please indicate your availability

Preferred Days

Mon	Tues	Wed	Thurs	Fri
✓	✓	✓	✓	✗

Preferred Times

Morning					Afternoon						
7:00 to 8:00	8:00 to 9:00	9:00 to 10:00	10:00 to 11:00	11:00 to 12:00	12:00 to 1:00	1:00 to 2:00	2:00 to 3:00	3:00 to 4:00	4:00 to 5:00	5:00 to 6:00	6:00 to 7:00
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Time Zone

US/Eastern

[Continue >](#)

You will be prompted with a list of EviCore **appointment** options per your **availability**. Select any of the listed appointment times to **continue**.

You will be prompted to **identify your preferred Days and Times** for a Peer to Peer conversation. All opportunities will automatically present. Click on any **green check** mark to deselect the option and then click **Continue**.

The list of physicians returned are all trained and prepared to have a Peer to Peer discussion for this case.

← Prev Week 5/18/2020 - 5/24/2020 (Upcoming week) Next Week →

1st Priority by Skill

Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
6:15 pm EDT	-	-	-	-	-	-
6:30 pm EDT	-	-	-	-	-	-
6:45 pm EDT	-	-	-	-	-	-

1st Priority by Skill

Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
3:30 pm EDT	2:00 pm EDT	4:15 pm EDT	3:15 pm EDT	-	-	-
3:45 pm EDT	2:15 pm EDT	4:30 pm EDT	3:30 pm EDT	-	-	-
4:00 pm EDT	2:30 pm EDT	4:45 pm EDT	3:45 pm EDT	-	-	-
4:15 pm EDT	2:45 pm EDT	5:00 pm EDT	4:00 pm EDT	-	-	-
Show more...	Show more...	Show more...	Show more...	-	-	-

How to Schedule a Peer to Peer

Confirm Contact Details

- + Contact Person **Name** and **Email Address** will auto-populate per your user credentials

The screenshot displays a four-step process: Case Info, Questions, Schedule, and Confirmation. The 'Schedule' step is active. On the left, 'P2P Info' shows the date (Mon 5/18/20) and time (6:30 pm EDT). Below it, 'Case Info' lists details for the '1st Case', including Case #, Episode ID, Member Name, Member DOB, Member State, Health Plan, Member ID, Case Type (MSK Spine Surgery), and Level of Review (Reconsideration P2P). The main 'P2P Contact Details' section contains several fields: 'Name of Provider Requesting P2P' (Dr. Jane Doe), 'Contact Person Name' (Office Manager John Doe), 'Contact Person Location' (Provider Office), 'Phone Number for P2P' ((555) 555-5555), 'Phone Ext.' (12345), 'Alternate Phone' ((xxx) xxx-xxxx), 'Phone Ext.' (Phone Ext.), 'Requesting Provider Email' (droffice@intemet.com), and 'Contact Instructions' (Select option 4, ask for Dr. Doe). A 'Submit >' button is at the bottom right. Blue arrows point to the provider name, phone number, and contact instructions fields.

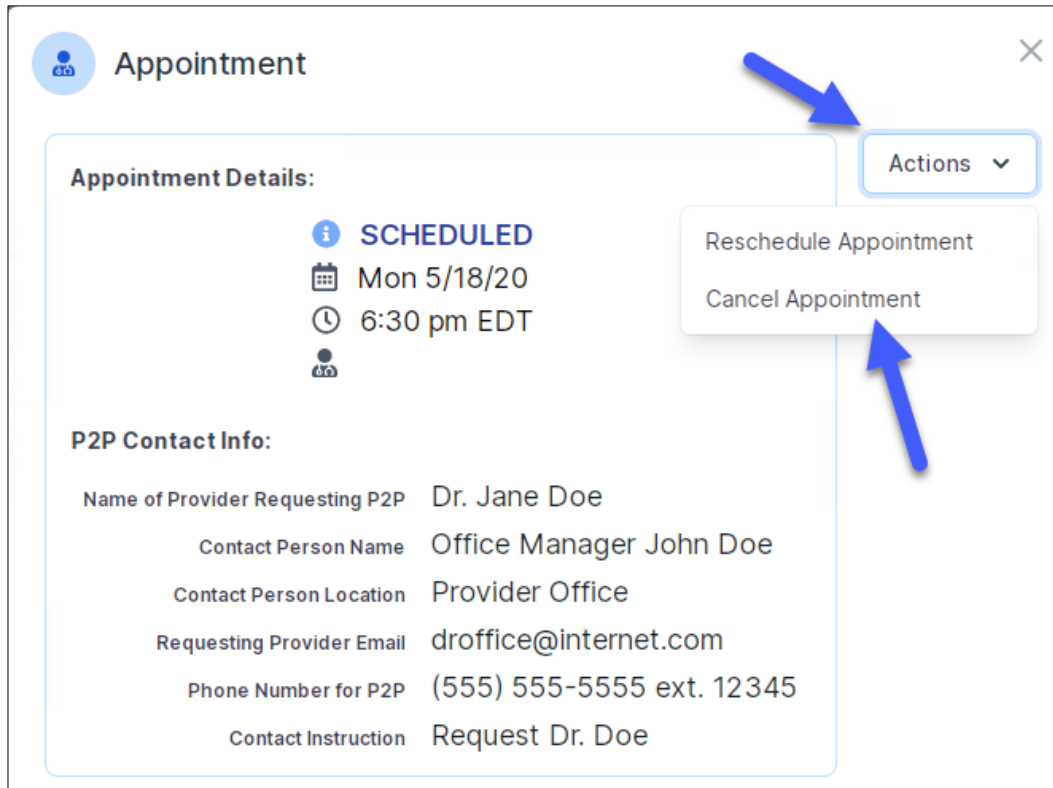
- Be sure to update the following fields so that we can reach the right person for the Peer to Peer appointment:

- + Name of Provider Requesting
- + P2P Phone Number for P2P
- + Contact Instructions

- Click submit to schedule appointment. You will be presented with a summary page containing the details of your scheduled appointment.

The screenshot shows a 'Scheduling' summary page. It includes a calendar icon and the text 'Scheduled'. Below this, a date and time are listed: 'Mon 5/18/20 - 6:30 pm EDT'. A 'SCHEDULED' status is shown in a red-bordered box with a white background.

Provider Resources | Cancel or Reschedule a P2P Appointment



The screenshot shows a window titled "Appointment" with a close button (X) in the top right corner. The window is divided into two main sections: "Appointment Details" and "P2P Contact Info".

Appointment Details:

- Status: **SCHEDULED** (indicated by an information icon 'i')
- Date: **Mon 5/18/20** (indicated by a calendar icon)
- Time: **6:30 pm EDT** (indicated by a clock icon)

P2P Contact Info:

Name of Provider Requesting P2P	Dr. Jane Doe
Contact Person Name	Office Manager John Doe
Contact Person Location	Provider Office
Requesting Provider Email	droffice@internet.com
Phone Number for P2P	(555) 555-5555 ext. 12345
Contact Instruction	Request Dr. Doe

On the right side of the "Appointment Details" section, there is an "Actions" drop-down menu. A blue arrow points to this menu, and another blue arrow points to the "Cancel Appointment" option in the expanded menu. The "Reschedule Appointment" option is also visible in the menu.

To cancel or reschedule an appointment:

- Access the scheduling software and select **My P2P Requests** on the left-pane navigation
- Select the request you would like to modify from the list of available appointments
- When the request appears, click on the schedule link. An appointment window will open
- Click on the **Actions** drop-down and choose the appropriate action
 - **If choosing to reschedule**, select a new date or time as you did initially
 - **If choosing to cancel**, input a cancellation reason
- Close the browser once finished



Provider Resources

EviCore Communication Relationship Management (ECRM)

For program-related questions or concerns, please submit inquiries via the **EviCore Communication Relationship Management (ECRM)** application. Common issues addressed through ECRM include:

- Questions regarding accreditation and/or credentialing
- Requests for an authorization to be sent to the health plan
- Complaints and grievances
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues
- Issues with EviCore provider portal

ECRM is available **24/7**. Users can login or register **[HERE](#)**.

Additional Information about ECRM can be found on the **[Providers' Hub](#)**.



Continued Learning: Provider Training Opportunities



Get More Out of the EviCore Portal—Join a Free Training Session

Whether you're just getting started or have been using the EviCore portal for a while, our **free, live training sessions** can help you work more efficiently and confidently. In just **one hour**, you'll learn tips, tools, and best practices you can use right away.

Sessions are offered on **multiple dates and times**, making it easy to fit training into your schedule.

Training Options & Frequency

- + [Intro to Web Portal Training](#)– Offered **twice per week**
- + [Intro to EviCore Online Resources](#)– Offered **twice per month**
- + [Therapy Provider Training](#) (*for therapy providers*) – Offered **twice per quarter**
- + [Post-Acute Care Portal Training](#) (*for hospitals and post-acute care providers*) – Offered **once per week**

How to View Sessions & Register

1. Click on the training session you would like to attend.
2. Select your preferred date and time by checking the radio button.
3. Complete the registration form.
4. Look for a confirmation email with session details.

Have questions? The training host's contact information will be included in your confirmation email.

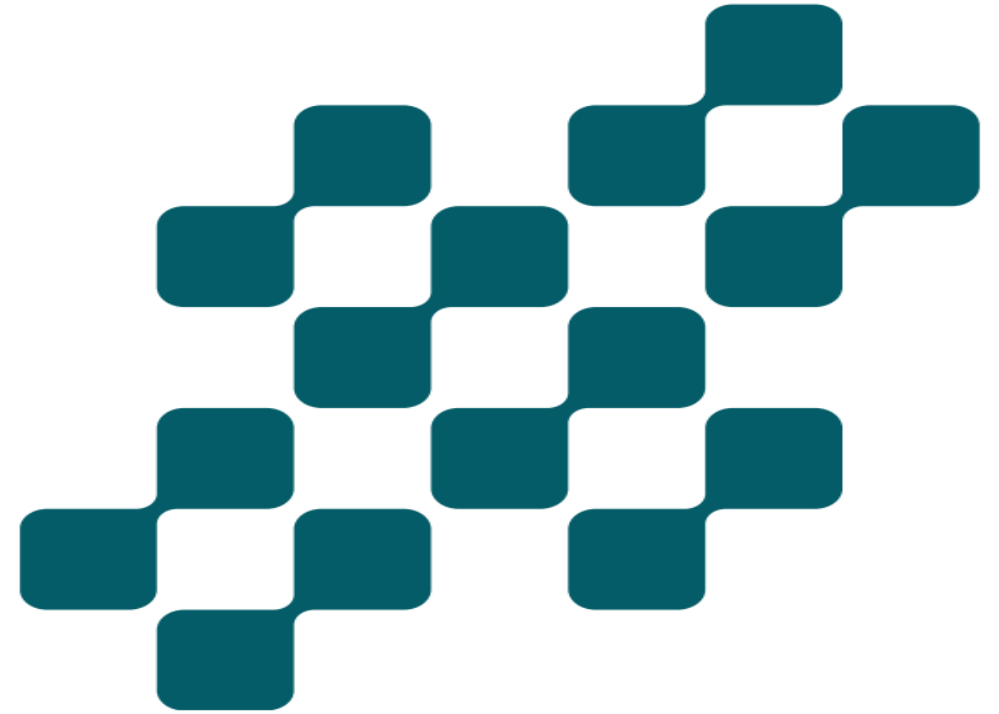
We look forward to seeing you at an upcoming training session!

Provider Newsletter

Stay Updated With Our Free Provider Newsletter

EviCore's provider newsletter is sent out to the provider community with important updates and tips. If you are interested in staying current, feel free to subscribe:

- Go to EviCore.com
- Scroll down and add a valid email to subscribe
- You will begin receiving email provider newsletters with updates



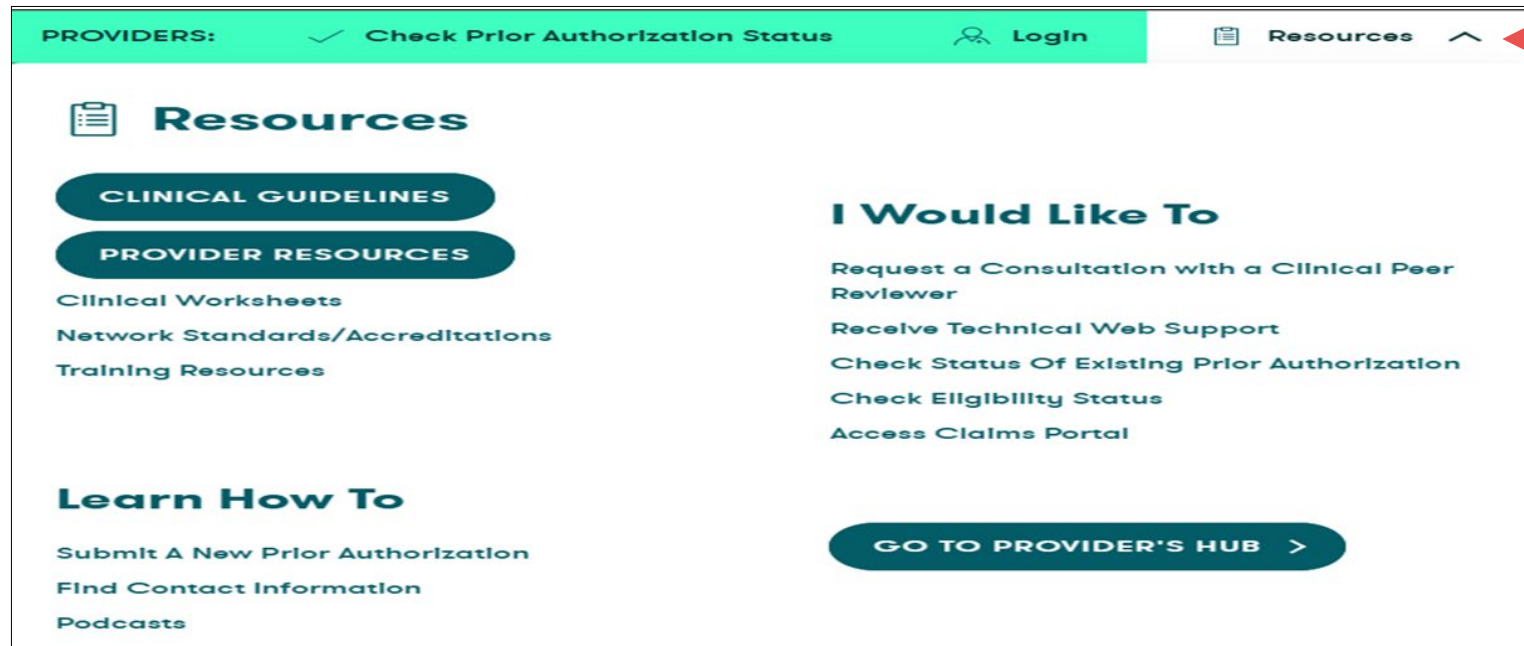
Stay Updated With Our Provider Newsletter

Your email address

SUBSCRIBE →

Provider's Hub

Providers and their staff can access **important tools** and **resources** at www.EviCore.com



- + Open the **Resources menu** in the top right hand of the browser to view **Clinical Guidelines**, Clinical Worksheets, **Provider Resources**, and Training Resources.

Web Portal Services-Assistance

Web-Based Services and Portal Support

- Live chat
- ECRM: [ECRM](#)
- Phone: **800-646-0418** (option 2)

Live Chat is available Monday – Friday 7AM – 7 PM EST



Additional Information

If you are initiating a prior authorization for one of the plans below, please access your web portal account on the appropriate site listed.

Health Plan	Phone	Website
Americhoice	866-842-3278	www.uhcprovider.com
BCBS of AL	205-220-6899	https://providers.bcbsal.org/portal/
BCBS of MI	855-237-3501	www.bcbsm.com
BCBS of MN	800-282-4548	www.availity.com
Empire	866-842-3278	www.uhcprovider.com
Excellus	800-278-1247	www.excellusbcbs.com
Highmark (Exception: Highmark Medicaid DE only www.EviCore.com)	888-482-8057	www.navinet.net
NHP (UHC Plan)	866-842-3278	www.uhcprovider.com
Oxford	866-842-3278	www.uhcprovider.com
Priority Health	800-942-4765 opt 6	www.priorityhealth.com/provider
River Valley	800-842-3278	www.uhcprovider.com
Summa Care	800-996-8401	https://summacare.myplacentral.com
UHC	866-842-3278	www.uhcprovider.com
UHC Community	866-842-3278	www.uhcprovider.com
UHC West	855-359-9999	www.uhcwest.com

Thank you