Durable Medical Equipment, Home Health, Home Infusion Therapy, and Sleep Provider Orientation for Cigna Commercial customers

Program and Portal Training



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Empowering the Improvement of Care

Agenda

- eviCore healthcare Company Overview
- Overview of Programs
- Precertification Outcomes & Special Considerations
- Care Coordination
- Home Infusion Therapy
- PAP Therapy
- Claims Submission
- Provider Resources
- Portal

Company Overview

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Medical Benefits Management (MBM)

Addressing the complexity of the healthcare system



10 Comprehensive solutions



Evidence-based clinical guidelines



5k⁺ employees, including 1k+ clinicians



Advanced, innovative, and intelligent technology



Overview of Programs

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Overview of Key Changes

eviCore healthcare (eviCore) replaced CareCentrix (CCX) on February 1, 2021 for management of home health (HH), home infusion therapy (HIT) and durable medical equipment (DME) services for Cigna commercial customers. As a result of this transition, there are changes to network management, clinical review and precertification, claim payments and ordering of services.

ΤΟΡΙϹ	RESPONSIBLE PARTY
Network Management	eviCore will manage a network of HH, HIT & DME providers for Cigna commercial customers
Precertification Request Intake	Home Health & DME Services: eviCore or Cigna Home Infusion Therapy: Cigna
Clinical Review and Determination	Cigna
Notification of Services	Providers are not required to notify eviCore or Cigna for codes that do not require precertification
Claim Payments	Providers should submit claims directly to Cigna or to the Payor
Co-payments	It is the responsibility of the rendering provider to educate the customer on their anticipated co-payment and to bill the customer for their delegated co-payment amount
How to Order Services	Referring providers can use any participating rendering provider of their choice as long as contracted services have been verified
Discharge Orders	Discharge orders are not required to submit precertification requests

Home Health, Durable Medical Equipment, and Home Infusion Therapy Precertification Services

Service	Services Include	Clinical Reviewer	How to Submit	Precertification Required Codes
Home Health	Nursing, home health aides, therapies, and social work	Cigna		
Durable Medical Equipment	Home based and medically necessary	Cigna Submit to eviCore		
Sleep Therapy	PAP therapy devices (E0470/E0471/E0601) do not require precertification but will require registration with eviCore and the PAP manufacturer	Cigna	Call: 800.298.4806 Fax: 888.444.1027	To find a complete list of DME, Home Health, and Home Infusion Therapy procedural codes which require
Specialty and Non-Specialty Home Infusion Therapy	Nursing, drugs, and supplies to support infusion therapy in the home or Ambulatory Infusion Suite (AIS)	Cigna	Home Infusion Therapy requests should be submitted directly to Cigna. Providers may call the number on the back of the customer's ID card and ask for a precertification intake representative. Drug and state specific forms can be found on Cigna's website at CignaforHCP.com>Get questions answered: Resource>Forms Center	precertification, please visit: https://www.evicore.com/resources/ healthplan/cigna

Benefits of eviCore Provider Portal

The provider portal allows you to go from a request to approval faster.

Following are some benefits & features:

- Saves time: Quicker process than phone or fax authorization requests
- Available 24/7: You can access the portal any time and any day
- Check case status in real-time
- Dashboard: View all recently submitted cases
- Precertification feature: Ability to add multiple procedure codes when submitting a request

Keys to Successful Precertification for DME

To obtain precertification on the very first submission, the provider submitting the request will need to gather four (4) categories of information:



Required Information for Home Health Requests

Precertification Details	 Site of Care demographics Patient demographics Services requested Home Health ordering physician demographics (including phone and fax) Anticipated date of discharge
Clinical Information	 ICD10 code Clinical progress notes Medication list Wound or incision/location and stage (if applicable) Discharge summary (when available) Time Audit Tool-required for PDN services*
Mobility and Functional Status	 Prior and current level of functioning Focused therapy goals: PT/OT Therapy progress notes including level of participation Discharge plans (include discharge barriers, if applicable)

* Form can be found on eviCore's resource page: https://www.evicore.com/resources/healthplan/cigna

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Precertification Outcomes & Special Considerations

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Home Health, Durable Medical Equipment, and Home Infusion Therapy Precertification Outcomes and Special Considerations

Program	When Additional Information is Needed	Determinations	Denials
Home Health	Hold letter will be faxed to the		When a request does not most
Durable Medical Equipment	requesting provider requesting additional documentation.The Provider should submit the additional information to Cigna	The timeframe to process a standard request will vary by the service type requested, plan and/or state mandates. Precertification approvals will be	medical necessity based on evidence based guidelines, an adverse determination is made and the request is denied.
Specialty and Non- Specialty Home Infusion Therapy	The Provider should submit the additional information to Cigna within the timeframe specified on the letter.Cigna will review the additional documentation and reach a determination.	Communicated to the ordering physician and rending provider by Cigna. Customers will receive a precertification letter by mail.	Denial letter with rationale, reconsideration options, and rights will be issued to the provider and customer by Cigna.

Same Day and Retro Requests for Durable Medical Equipment and Home Health

Same day precertification and retrospective authorization requests should be submitted directly to Cigna by calling 1.800.88Cigna (800.882.4462) or the number on the back of the customer's card.

Same Day Precertification Requests (start of care date is the same as the current date)

- Providers will need to call Cigna and ask for escalation for same day precertification requests
- Providers should have all required clinical information on hand before making the call to obtain a timely precertification determination

Retrospective (Retro) Authorization Requests (after the date of service)

- Any authorization request submitted after the date of service
- Timeframe to submit a retro request may vary by plan and/or state regulations
- Retrospective determinations will be communicated by Cigna

Urgent Requests for Durable Medical Equipment and Home Health

Urgent requests with a start of care date the same as the current date should be submitted directly to Cigna by calling 1.800.88Cigna (800.882.4462) or the number on the back of the customer's card.

Urgent Precertification Requests

- Urgent requests with a date of service <u>after</u> the current date can be initiated on the eviCore provider portal or by calling: 800.298.4806, options: DME-3,1,2 / HH-2,1,2
- Cigna uses the NCQA/URAC definition of urgent: when a delay in decision-making may seriously jeopardize the life or health of the customer
- Cigna will make a decision on an urgent case that meets this definition within 72 hours.

Special Circumstances: Post-Decision Options

My case has been denied. What's next?

Reconsiderations

- A Reconsideration is a post-denial, pre-appeal opportunity to provide additional clinical information
- A reconsideration can be requested any time, up until an appeal is received
- Reconsiderations can be requested by phone, by calling the number indicated on the customer's ID card, or via a peer-to-peer consultation.

Appeal Process

- Cigna will process first-level appeals. Delegation of second level appeals will vary by plan and/or state regulations.
- The timeframe to submit an appeal request will be outlined on the determination letter and is typically within 180 days of the adverse decision*

Appeal Process (cont.)

- Appeal requests can be submitted to Cigna in writing via fax or US Mail. The Cigna appeal address and fax number will be provided on the determination letter.
- Customers or providers with appeal questions may call the number indicated on the customer's ID card
- The appeal determination will be communicated by Cigna to the ordering provider and customer
- Appeal turnaround times:*
 - Expedited 72 hours
 - Standard customer 30 days
 - Standard Provider 60 days

*May vary by plan and/or state regulations

Peer-to-Peer Request

- If a request is not approved and requires further clinical discussion for approval, Cigna offers peer-to-peer consultations with referring physicians
- Peer-to-peer consultations may result in either a reversal of decision to deny, or an uphold of the original decision
- A peer-to-peer consultation may be requested by calling the number indicated on the customer's ID card or via fax
- Your determination letter is the best source of information on how to schedule a peer-to-peer consultation



Care Coordination

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eviCore DME, Home Health and Home Infusion Therapy Care Coordination

eviCore Care Coordination will provide the following services:

- Assist ordering provider and customers to find a participating servicing provider
 - To find a participating provider, call eviCore at 800.298.4806 or go to: Cigna.com > Find a Doctor, Dentist or Facility
 - Note: For complex cases, eviCore may forward referral information to the rendering provider on behalf of the referring provider.
- Service validation with customer to verify start of care date and if the equipment or medical supply was delivered on expected arrival date
- Validate with customer that services received are meeting health care needs and if the customer has a clear understanding on how to use the equipment and/or supply
- Follow up with the servicing provider when there is an issue with the DME, home health or home infusion services or an issue with the delivery or service item received
- Work with Cigna Case Manager to ensure the customer receives ongoing services (when applicable) with focus on total health care needs



Home Infusion Therapy

Home Infusion Therapy (HIT)

Effective February 1, 2021, Cigna's agreement with CareCentrix for home infusion therapy services ended. As a result, HIT providers should review their contract with eviCore before providing home infusion services to Cigna commercial customers.

- Cigna's preferred specialty home infusion therapy provider is Accredo, a Cigna company, but we also have other providers who are contracted for specialty drugs
- Precertifications for home infusion are valid for one year
- Referring providers can use any **participating HIT** provider of their choice
- The precertification process does not confirm that the requested code is included in your contract
- Authorization from Cigna does not guarantee claim payment. Please verify the terms of the contract.



For any contract questions for home infusion therapy codes and fee schedules, please contact an eviCore dedicated provider services team member at 1.800.575.4517 (option 3) or email ClientServices@evicore.com



PAP Therapy

TherapySupportSM Workflow – Overview





TherapySupportSM Benefits:

- PAP compliance increased
- Improved patient outcomes
- Minimal additional work for DME providers

What does this mean for the DME Provider?

- To ensure that eviCore receives all of the customer's data, the DME provider will need to enter the patient information exactly as instructed on the very first day of setup
- During customer setup, data entry in the manufacturer's database is critical to proper monitoring of PAP compliance by eviCore and payment by the health plan
- Customer Compliance: The DME provider is encouraged to work with the patient during the first 90 days of PAP therapy to maximize customer compliance with PAP treatment
 - <u>Non-compliant customers</u>: eviCore will outreach to the DME provider and physician periodically to support compliance. Outreach contact points: 3d, 7d, 14d, 21d, 30d, 60d, 90d, and as driven by data. Support for non-compliant customers will allow time to become comfortable with PAP Therapy.
 - To reach the compliance goal, PAP usage data must demonstrate ≥ 4 hours per night for 70% of nights, within a 30 consecutive day period, within the first 90 days of PAP therapy

TherapySupportSM Set Up Guides

The program supports properly equipped machines from the following 3 major DME Manufacturers: ResMed, Respironics, and Fisher & Paykel

Customer set up instructional guides and video tutorials are available at: https://www.evicore.com/resources/healthplan/cigna for each of the DME Manufacturers



www.encoreanywhere.com

www.fpinfosmart.com

After review of the instructional guides and video tutorials, if providers still have questions regarding customer set up, contact our customer service at 800-298-4806 and ask to speak with an eviCore Sleep Educator.

Claims Submission

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Cigna Accounts Receivable Snapshot

- All claims should be submitted directly to Cigna or to the Payor. Check the customer ID card for claims address
- The Payor ID used to submit a claim to Cigna through electronic billing is 62308
- Providers are required to enroll in Electronic Fund Transfer (EFT) with both Cigna and eviCore in order to receive
 payment for services rendered. Please forward this information to the person in your organization who is responsible for
 this activity.
- Providers are encouraged to utilize Cigna's provider self-service tools to manage accounts receivable at <u>www.cignaforhcp.com</u> for:
 - Electronic Payment (EFT)
 - Remittance Reports & Claim Status Inquiry 835/837
- If the available self-service tools do not provide claim resolution, providers should contact Cigna through <u>www.cignaforhcp.com</u> or 1.800.88Cigna (800.882.4462). All inquiries regarding Cigna claims submissions should be directed to Cigna.

Detailed claims information is available on the Cigna website (CignaforHCP.com > Get questions answered: Resource > Reimbursement and Payment Policies)

Provider Resources

eviCore Online Resources & Web Support Services



Web Support Services-Available Monday – Friday 7am to 6pm CST

Dedicated Call Center

Precertification Call Center

• 800.298.4806 options: DME − 3,1 / HH − 2,1

Our call center is open Monday – Friday from 8am to 9pm EST Saturday – Sunday 10am to 6pm EST

Providers can contact our call center for the following:

- Request Precertification
- Check status on existing requests
- Request to speak with a Care Coordination agent
- Discuss questions regarding post decision options

Providers should contact Cigna Customer Service at 800.88Cigna (800.882.4462) if changes are needed to an existing case



Note: To ensure you have a successful experience in reaching the desired representative, please listen carefully to the phone prompts when calling the eviCore call center.

Client & Provider Operations Team

Client and Provider Services

Dedicated team to address provider-related requests and concerns including:

- Questions regarding Accreditation, and/or Credentialing
- Eligibility issues (customer, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues

How to Contact our Client and Provider Services team

- Email: <u>ClientServices@evicore.com</u> (preferred)
- Phone: 1.800.575.4517 (option 3)
- For prompt service, please have all pertinent information available. When emailing, make sure to include Cigna health plan in the subject line with a description of the issue; include customer, provider and case details when applicable.



Provider Resources

Cigna Provider Resource Pages

eviCore's Provider Experience team maintains provider resource pages that contain program specific educational materials to assist providers and their staff on a daily basis. The provider resource page will include, but is not limited to, the following educational materials:

- Training Sessions Schedule
- Provider Training Presentation
- List of CPT codes that require Precertification through eviCore
- Quick Reference Guide (QRG)
- Frequently Asked Questions (FAQ) Document

To access these helpful resources, please visit:

https://www.evicore.com/resources/healthplan/cigna

Detailed information is available on the Cigna DME, HH, Sleep, and HIT Program website (CignaforHCP.com > Precertification Process)



Provider Web Portal

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eviCore Provider Web Portal

WEB	evicore healthcare
	Sign in with your existing account Email Address Email Address
	Password Forgot your password? Password
	Sign in Don't have an account? Sign up now

The eviCore online portal <u>www.evicore.com/ep360</u> is the quickest and most efficient way to request precertification and check authorization status

First time users: Access the eviCore portal at: <u>www.evicore.com/ep360</u> Choose 'Sign up now' to complete registration process

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Submitting Requests for Home Health and Durable Medical Equipment

Start the Request for a Precertification for DME and HH Services

• After logging in, you will see the main screen and user dashboard. Choose "Request an Auth" to begin.

••••	Good Afternoon
eviCore healthcare	
🕐 Dashboard	
🗹 Request an Auth	
Request Care Coordination	
Search Request	
🐸 User Group Admin	
ථ Logout	

Initial Request Details for HH and DME

• Complete all fields and choose "Search"



Cigna Customers' Eligibility

- Once you hit Search on the previous screen, the system will run an eligibility check.
- For customer's with active coverage, you will see their insurance eligibility details

Member Name	DOB	Address	Member #	Insurance Category	Eligibility Dates
TESTFIRST TESTNAME	01/01/1990	123 MAINSTRE HARTFORD CT 06119	11111012301	Commercial	01-01-2015 to 12-31-9999

Some customer's plans are not delegated to be managed by eviCore. For those plans you will see the below message
that will direct you to either a specific phone number or the number on the back of the member's card. Those cannot be
submitted through the eviCore portal and you will not be able to move forward.

Member Not Delegated

Pre-certification is not required through eviCore healthcare. To check the member benefits, please contact the health plan using the phone number on the back of the member's card.

Enter Procedure Code(s)

- Next enter the procedure code(s).
- If eviCore is not delegated to manage a code, you will receive the below message in red as soon as you enter the code

Procedure codes						
eviCore is not delegated to manage procedure code "G0151 " for CIGNA. For more info, please call the number on the back of the member's card.						
Enter a code number or description in the field	d below.					
Procedure code	Quantity	Unit of Measure				
S9123 - NURSING CARE IN H	~	Visits 🗸				
S9122 - HOME HEALTH AIDE	~	Hours 🗸	×			
G0151 - Home Health Services	~	~	×			
Timeframe for services						
30			~			
		SAV	/E			

VICULE IS HUL DELEGALED LUTIALIAUE DIOLE	dura codo "E1200"	for CICNIA For more infr
lease call the number on the back of the	member's card.	for cronx. For more mic
r a code number or description in the fiel	d below.	
rocedure code	Quantity	Unit of Measure
K0898 - Power wheelchair, not	1	V Units V
	0	~
E1390 - Oxygen concentrator, s		

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Enter Provider Details

Use the gold arrows to navigate the screen to complete the Requesting Provider, Ordering Physician and Servicing Provider details. Complete and Save all fields, then choose "Continue" to submit the request.

\bigcirc	Please fill out the information below. All fields are mandatory.	\bigcirc
Requesting Provider	Ordering Physician	Servicing Provider
SMITH HOMECARE (PAR) MA MA Test Test Test Test S5555555 Ext. S55555555 Ext. S55555555 Ext.	Contact Person No Contact Person	there

Adding Clinical to a Pending Case

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Pending Clinical

• If the request requires clinical documentation, you will be directed to this screen. Click on "Submit Clinical info now" and you will be prompted to upload the supporting documents.



Attach Clinical and Submit

- You will see a pop up window to upload clinical documents
- You will navigate to your system to locate the documents and attach to the case
- All information will now be transmitted to eviCore to begin the precertification review process

Upload File ×	Copen	
	🕞 🚭 🗢 🔳 Desktop 🕨	Search Desktop
	Organize New folder	iii - 🗋 🧕
UPLOAD FILES Drag and drop your files in this area.	 Favorites Recent Places Desktop 	Name A
		PORTAL TEST DOCUMENTS
Add Files Upload limit 50 MB. Additional ways to Submit SUBMIT		
For the fastest determination, uploading clinical info is the best way to submit it. However, you can also submit clinical info via fax		
	File name:	

Registering a PAP Device

Begin Request for PAP Registration

- Choose Service Type as "Sleep" and subcategory as "PAP Therapy". Complete remaining fields and choose "Search"
- The Cigna customer info will populate at the bottom of the screen. Select "Continue".

Submit a Request for Service						Ca	ontinue
Member Search							
Healthplan		Date Of Service	Date Of Service		Patient		
Cigna	~	04/14/2021			123456789		Q.
Ghoose Requesting Service Type	This is an urger	This is an urgent request		↑ OR ↓			
Choose Requesting Service Type		This is a retro request			First Name	Last Name	
Sleep		Diagnosis G47.33 - Obstructive sleep apnea (adult) (pediatric 🕂			First Name	Last Name	Last Name
 PAP Therapy O Sleep Testing 					Date of Birth		
O DME Cho	ose Slee	ep/PAP by			mm/dd/yyyy		
 HomeHealth 	Therap						
O Don't see the service you're loo	king for?					Searc	h
Member Name DOB A	ddress		Member #	Insur Categ	ance gory	Eligibility Dates	
Test Member 01/01/1980 555 Mai	n Street NY	, NY 55555	123456789	Comme	ercial 01	-01-2020 to 07-31-2027	

Enter Service and Provider Details

• Complete all fields and choose "Continue"

.

Submit a Request for Service								
← <u>Back</u>								
Patient								
Test Member 01/01/1980 555 Main Street NY, NY 5555	5 123456789	Commercial 01-01-20	020 to 07-31-2027					
Please fill out	Please fill out the information below. Ordering Physician and Servicing Provider are mandatory.							
Procedure codes	Ordering Physician		Servicing Provider					
Enter a code number or description in the field below.	SETHI M JIGME	<u>Change</u>	TEST DME COMPANY	<u>Change</u>				
Procedure code E0601 - PAP device, or Positive Airway Pressure devic SAVE								

Complete Registration

- The next screen will confirm that the PAP device requires registration only. Click Submit to continue.
- You will get a review history with a notice that the device requires registration only again. Click Submit Request. •

Please answer the following questions before we can complete your Request:	Review History The requested service requires registration only. Please click submit to complete your request
The requested service requires registration only. Please click submit to complete your request	
Submit	

Submit Reque

Confirmation Details

.

ee all codes -	Confirmation of Registration	
Information		
Dates of Care START Feb 1	LAST -	PATIENT CAME FROM: TEST DME COMPANY test test - 6578432654
Requests & Reviews		Attachments & Notes
nequests concerts		
Chirag Test su (Initial)	ubmitted a Request for Authorization	No activity yet.

Searching a Submitted Request

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Status Request

- Choose Search Request on the left menu bar
- Then "Search by ID" or "Search by Patient"

eviCore healthcare	Search Search by: Search by Id Search by Patient ID/Number Request ID, Auth # or Member ID	Search by eviCore Request ID or Customer's Healthplan ID#	Q
n Dashboard			Search
🖌 Request an Auth			
Request Care Coordination	Search	Search by Customer's	
🔁 Search Request	Search by:	and DOB	
🐸 User Group Admin	First name	Last name	Date of birth
			mm/dd/yyyy
ပံ Logout			Search

Status Details

.

• Precertification status details will be shown here

BBPQWB2B5X request ID Status Status: Pending Clinical Review Crides: 95807 See all codes: •	us of request will populate
Sleep Testing Information	If approved, from and through dates of precertification will be populated
Apr	PATIENT CAME FROM: SLEEPING CLINICS OF AMERICA INC test test - 555555555
Requests & Reviews	Attachments & Notes
APR 6 Chirag Test submitted a Request Authorization (Initial) 4/6/2021 (Today) at 2:43 pm Request for Sleep Testing (subr via Web)	APR Chirag Test attached Clinical Information (Initial) 4/6/2021 (Today) at 2:46 pm mitted TEST DOCUMENT.docx

Portal Individual Account Registration

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Initial Registration

All portal users must register for an account. You may have an individual account or be part of a group of users. First we will review how to register as part of an organization's group.

- Your organization's admin will invite users to their group
- The users will get an email from eviCore with a link to join the group
- Users will follow that link and choose "Sign Up Now" at the login page
- Each user should receive a "join code" to become a part of that group



Portal Registration Process

· Begin by completing the registration process details for yourself







Join Code

• Enter the Join Code provided by your administrator

eviCore Platform	
The Administrator for your group, ADMIN, provided you with a 6-digit Join Key. Please enter that key below to continue.	Enter Join Code and click CONTINUE
Join Key	NUE

Joining Group

 Next you should accept the Terms & Conditions, click on Continue, and the system will respond to let you know you are joining the group



eviCore Dashboard

• Once you have successfully registered, and for subsequent logins, you will be directed to your eviCore dashboard



Portal Group Account Registration

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Administrator/User Registration

 If you are your organization's administrator, or want to create your own account, access the website and choose "Sign up now"



Portal Registration Process

• Begin by completing the brief registration process.







Administrator Group Creation

• If you are your organization's administrator, or want to create a group, choose "CREATE A NEW GROUP"



Group Demographics

• Complete demographics to create a group for your organization

Create Provider Group			
Enter your group details:			
Group Name			Mark Rendering
Test Group			Provider
○ Ordering Provider		Rendering Provider	
Address 1			
555 Main Street			
Address 2			
	Complete G	Group's	
City	Demogra State	ohics	Zip
NY	NY	~	55555
Phone		Fax	
555555555		555555555	
Back			

Adding Users to the Group

• Once user has successfully created a group, invite users to the group

eviCore Platform Provider User Group Administrati	on			Go to website
Office				
Test Group - Rendering	Ľ	Provider Group Join Code		
 ♀ 555 Main Street NY, NY 55555 ✔ (555) 555-5555 ⊮ (555) 555-5555 			YID015	Copy Generate New
		Invite U	Jsers to the	
Users		O Invite	Group	O Add
Name Status	Action	There are no Providers associated	a with this group. If you would like to add Provid	ders use the Add button.
Test Admin				
Add User				×
First Name:	Last Name	Make Admin: E	mail	
Test	User	⊖ Yes ● No	testuser@email.com	
	Add Fir	st and Last Name, and Email.	Valida	nte & Save
	Choose i	f you want user to be an alternate admin		

User Details and Join Code



Add Providers to the Group

- Next, add providers to your group
- Once Group page is complete, click Go to Website ____

eviCore Platform I	Provider User Group Administration					Go to website
Office						
Test Group - Rer 555 Main Street (555) 555-5555	ndering NY, NY 55555 🖬 (555) 555-5555	Ľ		Provider Group Join Code YID015	Add Providers to the	Copy Generate New
					3.00p	
Users		•	9 Invite	Providers		G Add
Name	Status	Action		There are no Providers associated with this group. If yo	ou would like to add Providers use the Add butt	ton.
Test Admin						
Test User	Add Provider				Enter TIN and NPI for provider associate	or each d with
	TIN:		NPI:		the group	
	TIN		NPI			
	Validate & Save					

Administrator's Dashboard

• You will be directed to your dashboard and Group creation is complete



Thank You!



