RADIATION THERAPY PROGRAM

Provider quick reference guide

Cigna works with eviCore healthcare (eviCore) to administer the precertification process for select outpatient radiation therapy services under our radiation therapy program. The following information outlines the highlights of this relationship.

Delegated services

- > Utilization management, including precertification
- > Appeals

Precertification

During the precertification process, eviCore reviews the complete treatment plan for coverage – rather than each procedure individually – to ensure consistency with the American College of Radiology/American Society for Radiation Oncology (ACR/ASTRO) coding guidelines.

Our precertification program helps ensure individuals receive coverage for cost-effective care based on established evidence-based guidelines.

Precertification is required for Cigna customers who receive these services in an outpatient setting and have a Cigna ID card that identifies a precertification requirement for outpatient procedures.

For a list of the procedures that require precertification through eviCore, log in to the Cigna for Health Care Professionals website (CignaforHCP.com > Resources > Clinical Reimbursement Policies and Payment Policies > Precertification Policies > Master Outpatient Precertification List).

Important notes

- It is the responsibility of the performing facility or provider to confirm precertification has been requested and approved prior to the service(s) being performed.
- Decisions for non urgent precertification requests are typically made within two business days of receipt of all necessary clinical information. All decisions are made within five business days.*
- If additional information is needed, eviCore will fax the request to the number provided by the provider.

Urgent services

- When radiation therapy services are required in less than 48 hours due to a medically urgent condition, the ordering provider must call eviCore for precertification approval.
- Urgent treatment requests can be made on the website or by phone.**
- > The provider must clearly indicate that the treatment is for medically urgent care.
- > Upon receipt of all necessary information, eviCore will make a decision within 24 hours.



Together, all the way."

Value to providers and customers

- eviCore reviews the entire treatment plan for coverage - rather than each procedure individually eliminating the need for multiple requests during the treatment regimen.
- viCore applies evidence-based clinical guidelines, developed by ACR/ASTRO, to help determine coverage and confirm the provider is delivering medically necessary care that is safe and effective.
- eviCore's case determination software platform supports providers by conducting an individualized evidence-based care analysis tailored to the customer's condition.

Contact information

Precertification (nonurgent requests)

- Website: www.eviCore.com/pages/providerlogin.aspx
- > Phone: 866.668.9250 (7:00 a.m. 7:00 p.m. ET)

Precertification (urgent requests)

> Phone: 866.668.9250

Dedicated website support

- > Phone: 800.646.0418 (option 2)
- > Email: portal.support@evicore.com

- eviCore's unique education approach includes "predictive intelligence" technology, which provides nearly instant precertification approval in areas where a provider consistently practices within evidencebased guidelines.
- Providers have access to licensed, board-certified clinicians who can assist them with radiation therapy treatment options. These clinicians have the same specialty expertise as the treating provider.

Clinical support

eviCore welcomes requests for clinical discussions and can assist providers in considering all radiation therapy options.

> Phone: 866.668.9250

Radiation therapy guidelines

> Website: eviCore.com/Cigna

Disputes and appeals

Providers should refer to the denial notification for instructions on where to submit appeals.



Tools and resources

Visit eviCore.com/healthplan/Cigna for helpful information on the following topics:

- > Clinical guidelines
- Radiation therapy orientation
- > Website



* Obtaining a medical necessity approval from eviCore isn't a guarantee that Cigna will pay for services rendered. The customer must be enrolled in the plan and eligible for benefits on the date you requested the service. Please see plan documents for details about coverage.

** Requests received online will be treated as standard cases.

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