Lab Management Genetic Testing Program



eviCore authorization reviews

Health Alliance Medical Plans has contracted with eviCore healthcare to manage the preauthorization review of most Molecular and Genomic testing for members with Health Alliance Commercial and Medicare plans. This partnership will give Health Alliance providers access to clinical expertise in the growing molecular and genomic testing field. eviCore will review preauthorization requests for certain outpatient, non-emergent Molecular and Genomic Testing such as:

- Hereditary cancer screening
- Carrier screening tests
- Tumor marker / molecular profiling
- Hereditary cardiac disorders
- Cardiovascular disease / thrombosis risk variant testing
- Pharmacogenomic testing
- Neurological disorders
- Mitochondrial disease testing
- Intellectual disability / developmental disorders

NO Required Authorization

eviCore healthcare will not manage prior authorizations for the following:

- Inpatient Stay
- Emergency Room
- Observation Stay
- Inpatient genomic testing
- General lab testing

Authorization Requirements

To ensure the authorization process is as quick and efficient as possible, the ordering physician should have the following information available:

- Specimen collection date (if applicable)
- Type or Test Name (if known)
- CPT code(s) and units
- ICD 10 code(s) relevant to requested test
- Test indication
- Relevant past test results
- Member / patient ethnicity
- Relevant family history
- Known familial mutation / specific mutation
- Use of results in member / patient care
- Pertinent clinical documentation that supports the test requested
- Patient name, date of birth, address, and member ID
- Referring physician NPI, phone, fax and address
- Rendering laboratory NPI, phone, fax and address

Authorizations

An authorization number will be faxed to the rendering provider/lab upon approval. eviCore healthcare will approve the CPT code or codes for the requested procedure.

It is the responsibility of the performing lab site to confirm that prior authorization has been requested and approved prior to Molecular and Genomic Testing. Verification may be obtained via the eviCore healthcare website or by calling 888-835-2042.

Important: Authorization from eviCore does not guarantee claim payment. Services must be covered by Health Alliance and the member must be eligible at the time services are rendered. Claims submitted for unauthorized procedures are subject to denial, and the member must be held harmless. Please verify the member's eligibility with Health Alliance.

Authorization Denials

eviCore notifies the ordering physician via fax/phone, the member via mail/phone, and the rendering lab site via fax of a denial and provides a rationale for the determination within one business day of the decision. The communication provides the appeal options per current state policy.

eviCore also offers the ordering physician a consultation with an eviCore Medical Director. In certain instances, additional information provided during the clinical consultation is sufficient to satisfy medical necessity criteria.

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To request a clinical consultation, please visit <u>www.evicore.com/healthplan/health-alliance</u> and select "Resources" in the top right hand corner then select "Request a Consultation with a Clinical Peer Reviewer".

If your case requires further clinical discussion for approval, we welcome requests for clinical consultations from ordering physicians.

For claim denials, you must follow the appeal process.