Radiology Provider Orientation Session for MVP

Company Overview

100M Members Managed

9 **Comprehensive Solutions**

The industry's most **comprehensive clinical evidence-based guidelines**

5k[+] employees including **1k+ clinicians**

Engaging with 570k[+] providers

Headquartered in Bluffton, SC
Offices across the US including:

- Lexington, MA
- Colorado Springs, CO
- Franklin, TN
- Greenwich, CT

- Melbourne, FL
- Plainville, CT
- Sacramento, CA

Advanced, innovative, and intelligent technology

Quality Improvement Organizations
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

Radiology Solution - Our Experience

30+ Regional
and National Clients

37k+
Cases built per day

24 Years
Managing Radiology Services

70M members
managed nationwide
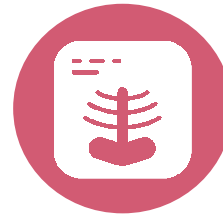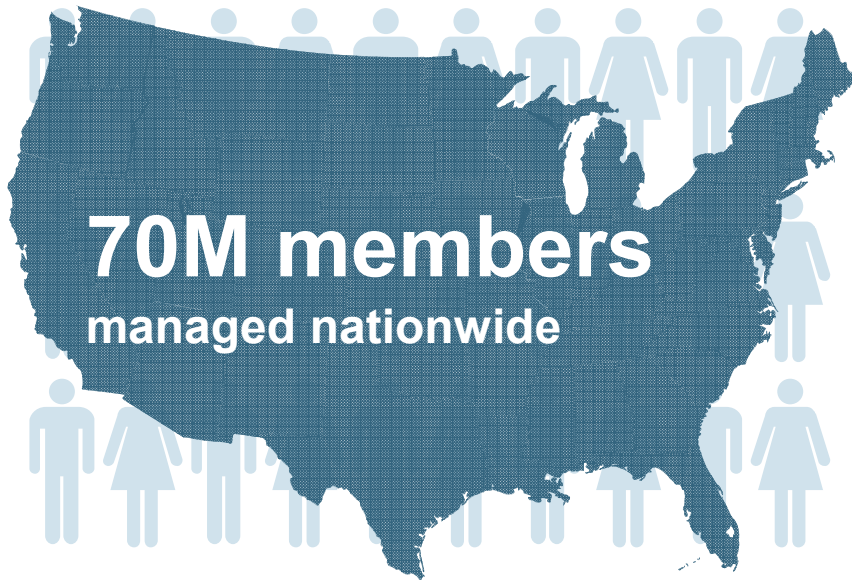
Members Managed

- 25.5M Commercial Memberships

- 2M Medicare Memberships

- 6.5M Medicaid Memberships

100 million lives

Integrated platform

9 | Comprehensive Solutions

Medical Oncology
30M lives

Lab Management
19M lives

Radiation Therapy
39M lives

Specialty Drug
723k lives

Sleep
16M lives

Cardiology
50M lives

Radiology
70M lives

Musculoskeletal
40M lives

Post-Acute Care
1.7M lives

Our Clinical Approach

Clinical Staffing

Multi-Specialty Expertise

Dedicated nursing and physician specialty teams for various solutions

>300 Medical Directors

Covering **51** different specialties

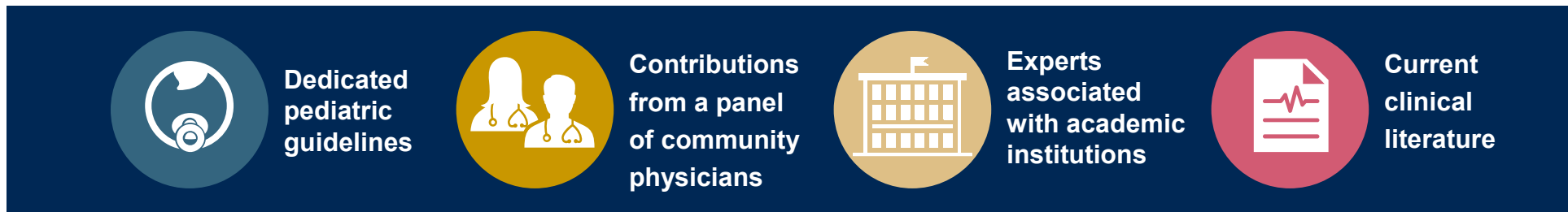**800** Nurses with diverse specialties / experience

- **Anesthesiology**
- **Cardiology**
- **Chiropractic**
- **Emergency Medicine**
- **Family Medicine**
  - Family Medicine / OMT
  - Public Health & General Preventative Medicine
- **Internal Medicine**
  - Cardiovascular Disease
  - Critical Care Medicine
  - Endocrinology, Diabetes & Metabolism
  - Geriatric Medicine
  - Hematology
  - Hospice & Palliative Medicine
  - Medical Oncology
  - Pulmonary Disease
  - Rheumatology
  - Sleep Medicine
  - Sports Medicine

- **Medical Genetics**
- **Nuclear Medicine**
- **OB / GYN**
  - Maternal-Fetal Medicine
- **Oncology / Hematology**
- **Orthopedic Surgery**
- **Otolaryngology**
- **Pain Mgmt. / Interventional Pain**
- **Pathology**
  - Clinical Pathology
- **Pediatric**
  - Pediatric Cardiology
  - Pediatric Hematology-Oncology
- **Physical Medicine & Rehabilitation**
  - Pain Medicine
- **Physical Therapy**
- **Radiation Oncology**

- **Radiology**
  - Diagnostic Radiology
  - Neuroradiology
  - Radiation Oncology
  - Vascular & Interventional Radiology
- **Sleep Medicine**
- **Sports Medicine**
- **Surgery**
  - Cardiac
  - General
  - Neurological
  - Spine
  - Thoracic
  - Vascular
- **Urology**

Evidence-Based Guidelines

The foundation of our solutions:

Dedicated pediatric guidelines

Contributions from a panel of community physicians

Experts associated with academic institutions

Current clinical literature

Aligned with National Societies

- American College of Cardiology
- American Heart Association
- American Society of Nuclear Cardiology
- Heart Rhythm Society
- American College of Radiology
- American Academy of Neurology
- American College of Chest Physicians
- American College of Rheumatology
- American Academy of Sleep Medicine
- American Urological Association
- National Comprehensive Cancer Network

- American Society for Radiation Oncology
- American Society of Clinical Oncology
- American Academy of Pediatrics
- American Society of Colon and Rectal Surgeons
- American Academy of Orthopedic Surgeons
- North American Spine Society
- American Association of Neurological Surgeons
- American College of Obstetricians and Gynecologists
- The Society of Maternal-Fetal Medicine

Our Service Model

Enabling Better Outcomes

Enhancing outcomes through Client and Provider engagement

Client & Provider Operations

Client Provider Representatives are cross-trained to investigate escalated provider and health plan issues.
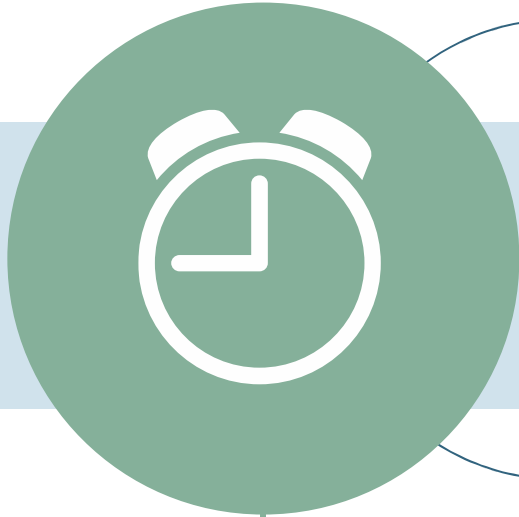
Client Experience Manager

Client Service Managers lead resolution of complex service issues and coordinate with partners for continuous improvement.

Regional Provider Engagement Managers

Regional Provider Engagement Managers are on-the-ground resources who serve as the voice of eviCore to the provider community.

Why Our Service Delivery Model Works

One centralized intake point allows for timely identification, tracking, trending, and reporting of all issues. It also enables eviCore to quickly identify and respond to systemic issues impacting multiple providers.

Complex issues are escalated to resources who are the subject matter experts and can quickly coordinate with matrix partners to address issues at a root-cause level.

Routine issues are handled by a team of representatives who are cross trained to respond to a variety of issues. There is no reliance on a single individual to respond to your needs.

11
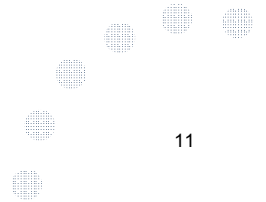
Radiology and Cardiology
Prior Authorization Process

Program Overview

Prior authorization applies to services that are:

- Outpatient
- Elective / Non-emergent
- Diagnostic

Prior authorization does not apply to services that are performed in:

- Emergency room
- Inpatient
- 23-hour observation

It is the responsibility of the ordering provider to request prior authorization approval for services.

Applicable Membership

Authorization is required for MVP members enrolled in the following programs:

- Commercial
- Medicaid
- Medicare
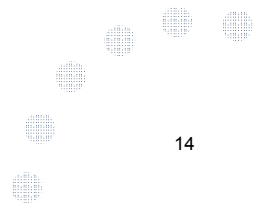
Prior Authorization Required:

- CT / CTA
- MRI / MRA
- PET / PET CT
- Myocardial Perfusion Imaging (Nuclear Stress)

To find a list of CPT (Current Procedural Terminology) codes that require

prior authorization through eviCore, please visit:

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

Needed Information

Member
Member ID
Member name
Date of birth (DOB)

Referring Physician
Physician name
National provider identifier (NPI)
Tax identification number (TIN)
Fax number

Necessary Information

Rendering Facility
Facility name
National provider identifier (NPI)
Tax identification number (TIN)
Street address

Supporting Clinical
Patient's clinical presentation.
Diagnosis Codes.
Disease-Specific Clinical Information.
Patient's intended treatment plan

If clinical information is needed, please be able to supply:

- Prior tests, lab work, and/or imaging studies performed related to this diagnosis

- The notes from the patient's last visit related to the diagnosis

- Type and duration of treatment performed to date for the diagnosis

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Clinical Review Process – Easy for Providers and Staff

Methods of Intake

START

Proprietary Decision Algorithms / Clinical Decision Support

Real-Time Decision with Web

Nurse Review

MD Review

Peer-to-peer

Appropriate Decision
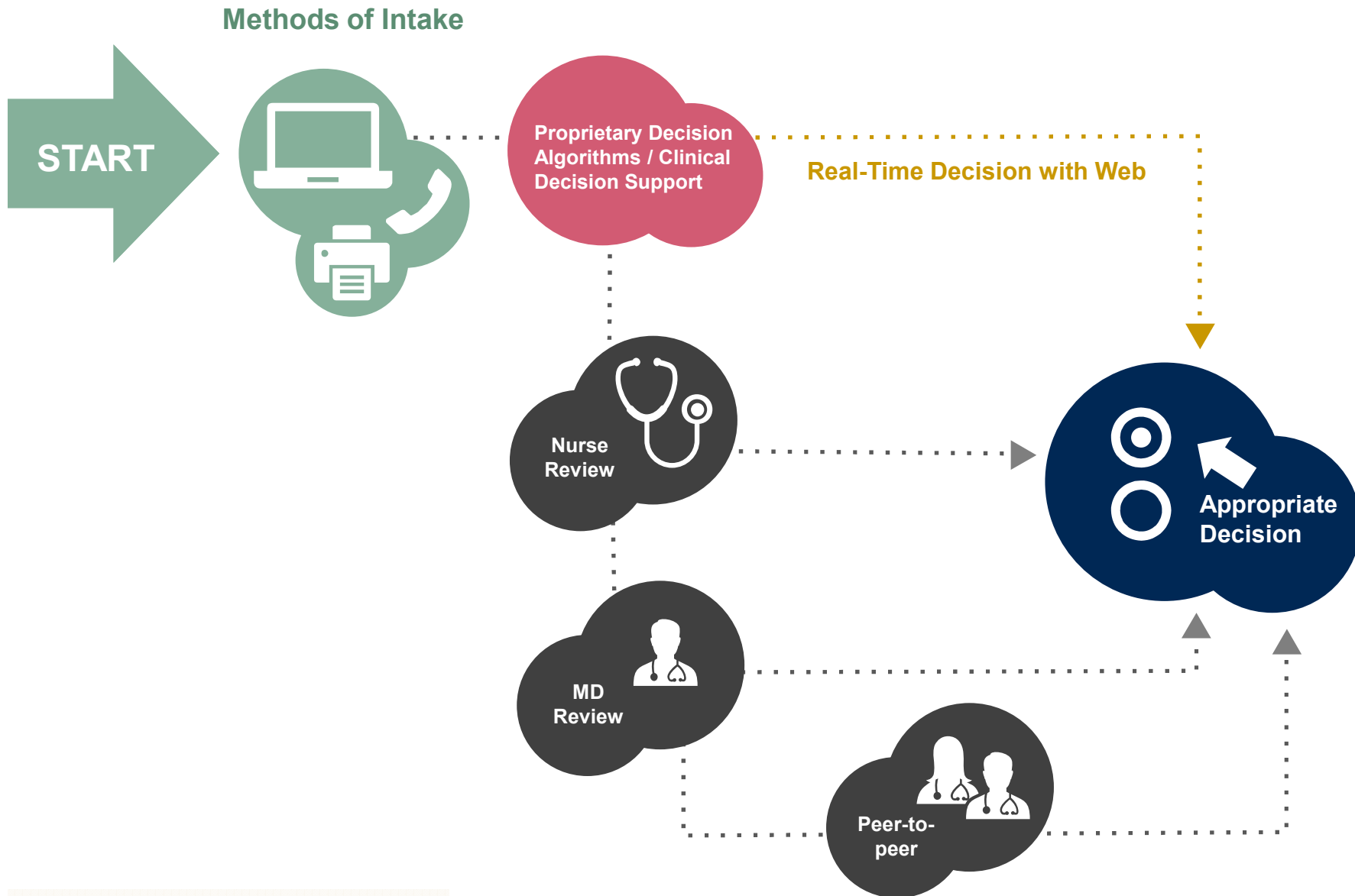
Prior Authorization Outcomes

Approved Requests

Once all clinical information is received, requests are processed as follows:

- Authorizations are processed within 2 business days
- Authorizations are typically good for **45 calendar days** from the date of determination

Delivery Method

- Faxed to the ordering provider
- Mailed to the member
- Information can be printed on demand from the eviCore healthcare web portal

Denied Requests

- Communication of denial determination
- Communication of the rationale for the denial
- How to request a Peer Review

Delivery Method

- Faxed to the ordering provider
- Mailed to the member

Web Portal Services

WEB

The eviCore online portal is the quickest, most efficient way to request prior authorization and check authorization status and is available 24/7. By visiting www.eviCore.com providers can spend their time where it matters most — with their patients!
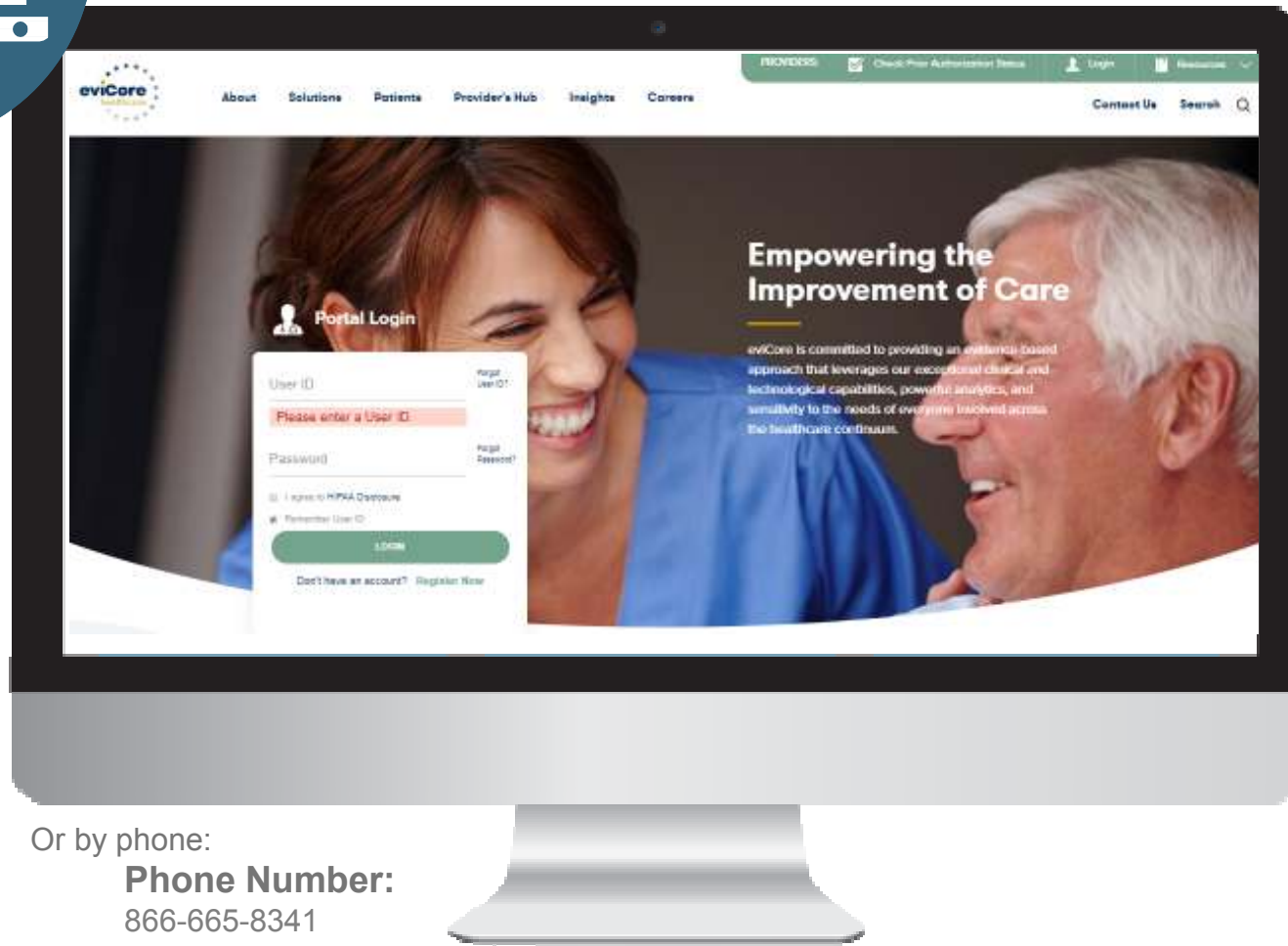
Or by phone:

Phone Number:
866-665-8341
7:00 a.m. to 7:00 p.m.
Monday - Friday

eviCore healthcare website

- Point web browser to evicore.com

- Login or Register
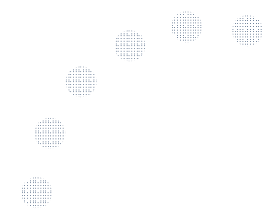
Creating an Account
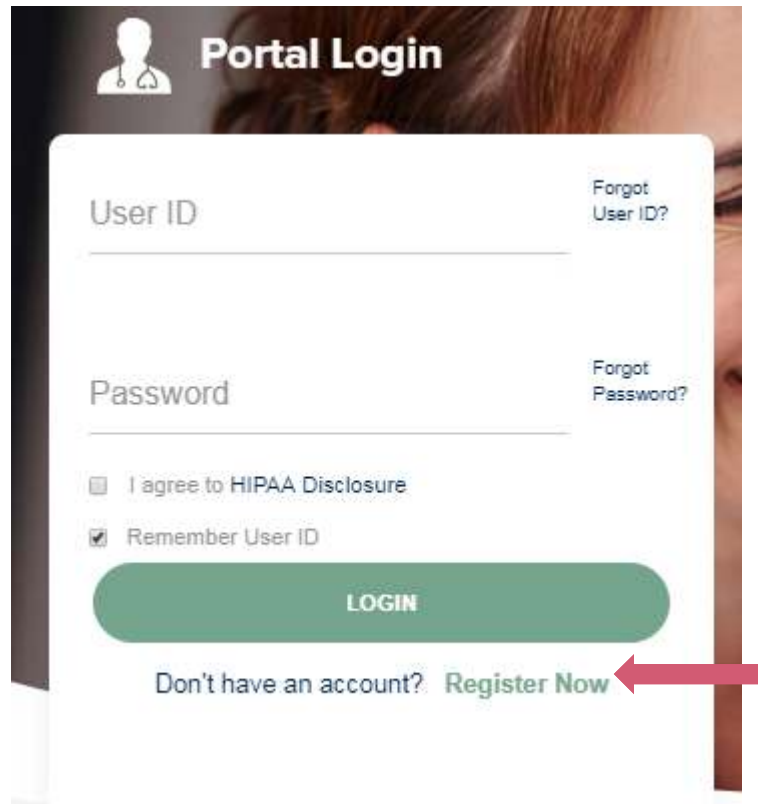
To create a new account, click Register.

Creating an Account

Select CareCore National or MedSolutions as the Default Portal, and complete the user registration form.

Please note: For the MedSolutions portal, you will also need to select the appropriate Account Type: Facility, Physician, Billing Office, and Health Plan.

Creating an Account

eviCore · healthcare

* Required Field
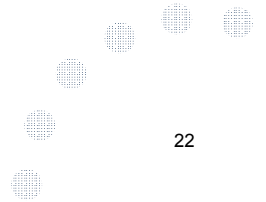
Web Portal Preference

Please select the Portal that is listed in your provider training material. This selection determines the primary portal that you will using to submit cases over the web.

Default Portal*: CareCore National ▾

If you are a health plan representative, please contact web support at 1-800-646-0418 option 2 for your account to be created.

User Information

All Pre-Authorization notifications will be sent to the fax number and email address provided below. Please make sure you provide valid information.

User Name*:		Address*:		Phone*:	
Email*:				Ext:	
Confirm Email*:		City*:		Fax*:	
First Name*:		State*: Select ▾ Zip*:			
Last Name*:		Office Name*:			

Next

Review information provided before submitting your registration.

24

User Registration – Continued

Accept the Terms and Conditions, and click "Submit."

User Registration – Continued

eviCore healthcare
innovative solutions

Registration Successful

Your Registration has been accepted. An email has been sent to your registered email account allowing you to set your password. Please close the browser.
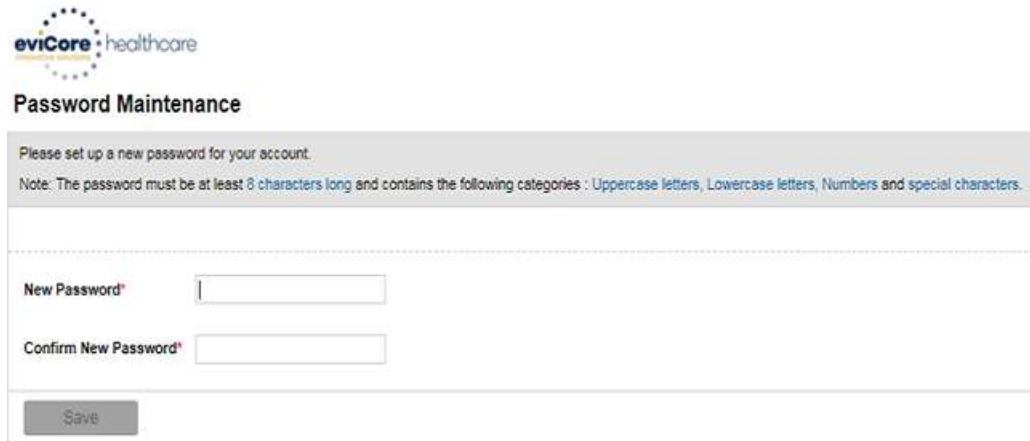
You will receive a message on the screen confirming your registration is successful. You will be sent an email to create your password.

Create a Password

Your password must be at least (8) characters long and contain the following:

ALP6
ALP9

✓ Uppercase letters

✓ Lowercase letters

✓ Numbers

✓ Characters (e.g., ! ? *)

eviCore healthcare

Password Maintenance

Please set up a new password for your account.

Note: The password must be at least 8 characters long and contains the following categories : Uppercase letters, Lowercase letters, Numbers and special characters.

New Password*

Confirm New Password*

Save

ALP6   Change the image to Password development.
Austin L Pewitt, 3/29/2019

ALP9   completed
Austin L Pewitt, 3/29/2019

Account Log-In
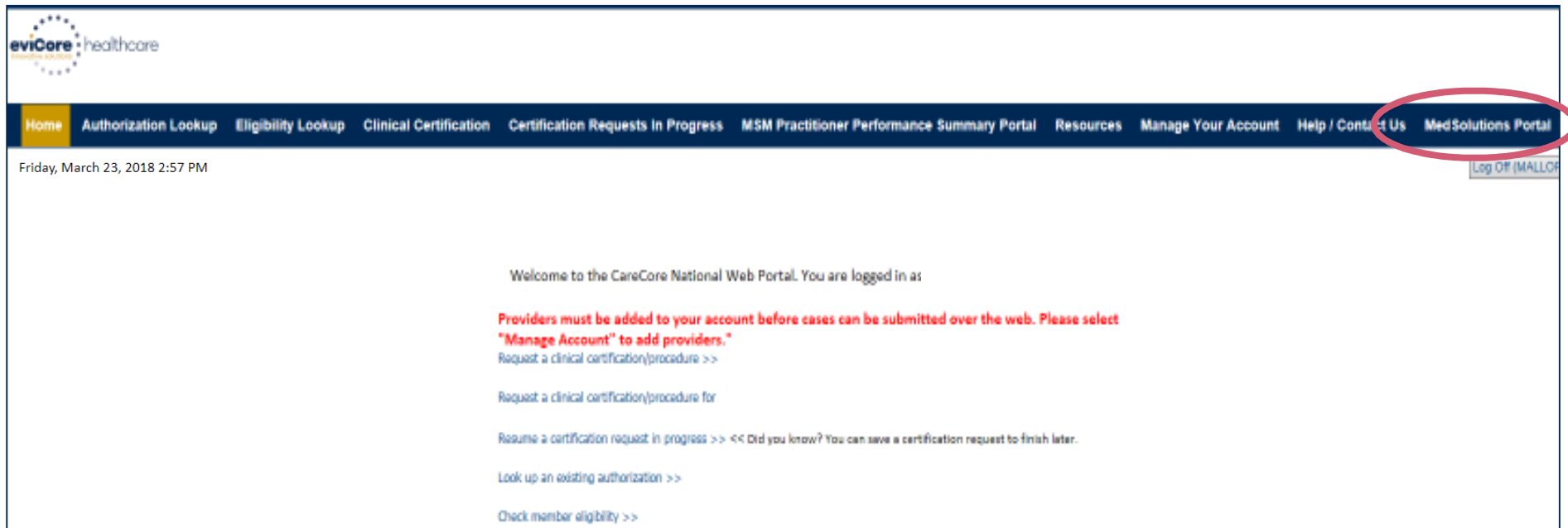

To log-in to your account, enter your **User ID** and **Password**. Agree to the HIPAA Disclosure, and click "**Login**."

Welcome Screen

- Providers will need to be added to your account prior to case submission. Click the "**Manage Your Account**" tab to add provider information.

- _Note_: _You can access the MedSolutions Portal at any time without having to provide additional log-in information. Click the MedSolutions Portal button on the top right corner to seamlessly toggle back and forth between the two portals._

Add Practitioners

Wednesday, January 16, 2019 10:48 AM

Log Off

Manage Your Account

Office Name:

Address: 730 Cool Springs Blvd
                       Franklin, TN 37067

Change Password   Edit Account

**Primary
Contact:**   User Account
Email Address: Test@email.com

Add Provider

Click Column Headings to Sort

No providers on file

Cancel

Click the "Add Provider" button.

Add Practitioners

| Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Performance Summary Portal | Resources | Manage Your Account | Help / Contact Us | MedSolutions Portal |

Wednesday, January 16, 2019 10:48 AM

Log Off

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

Enter the Provider's NPI, State, and Zip Code to search for the provider record to add to your account. You are able to add multiple Providers to your account.
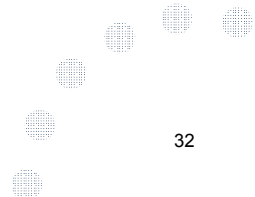
Adding Practitioners

Select the matching record based upon your search criteria

Manage Your Account

| Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Performance Summary Portal | Resources | Manage Your Account | Help / Contact Us | Med Solutions Portal |

Wednesday, January 16, 2019 10:48 AM

Log Off

Add Practitioner

If you wish to add an additional practitioner, click the "Add Another Practitioner" button. If you are finished, click the "Continue" button to return to your account.
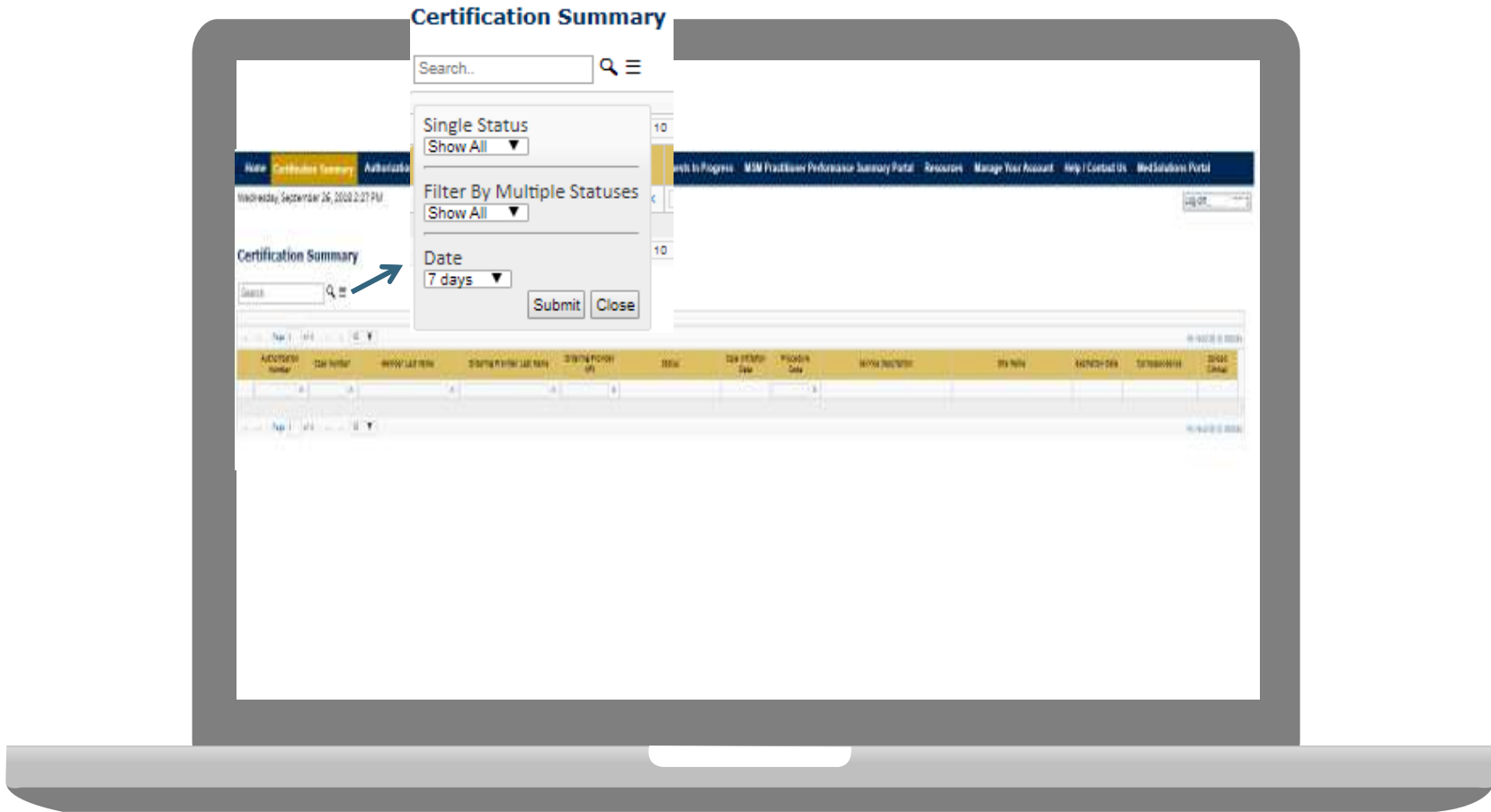
Add Another Practitioner | Continue

- Once you have selected a practitioner, your registration will be completed. You can then access the **"Manage Your Account"** tab to make any necessary updates or changes.

- You can also click **"Add Another Practitioner"** to add another provider to your account.
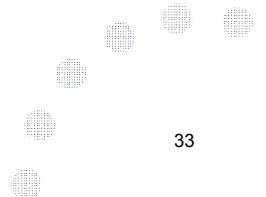
Certification Summary

- **CareCore National Portal now includes a Certification Summary tab, to better track your recently submitted cases.**
- **The work list can also be filtered - as seen above.**

Initiating a Case

Choose "Request a clinical certification/procedure" to begin a new case request.

Select Program

Wednesday, January 16, 2019 11:05 AM

Log Off

Clinical Certification

Please select the program for your certification:

- ○ Radiology and Cardiology
- ○ Specialty Drugs
- ○ Radiation Therapy Management Program (RTMP)
- ○ Musculoskeletal Management
- ○ Sleep Management
- ○ Lab Management Program
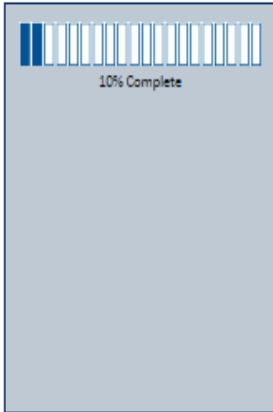- ○ Durable Medical Equipment(DME)
- ○ Medical Oncology Pathways

Cancel | Print | Continue

Click here for help or technical support

Select the Program for your certification.

36

Select Provider

Select Health Plan

Wednesday, January 16, 2019 11:05 AM

Log Off

Friday, March 23, 2018 2:57 PM

Clinical Certification

To process an urgent case on the web you will be required to upload relevant clinical information using the online clinical upload feature at the end of the case build process. Click here for more information!

You selected

Please select the health plan for which you would like to build a case. If the health plan is not shown, please contact the plan at the number found on the member's identification card to determine if case submission through CareCore National is necessary.

[Please Select a Health Plan   ▼]

[Cancel] [Back] [Print] [Continue]

Click here for help or technical support

20% Complete

Choose the appropriate Health Plan for the case request. If the health plan does not populate, please contact the plan at the number found on the member's identification card. Once the plan is chosen, please select the provider address in the next drop down box.

Contact Information

Enter the **Provider's name** and appropriate information for the point of contact individual.
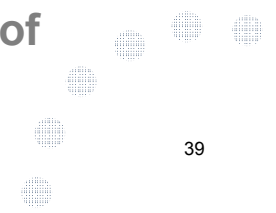
Member / Procedure Information

Wednesday, January 16, 2019 11:05 AM

Log Off

Attention!

Time: 1/16/2019 11:23 AM

Has this procedure been performed?

YES NO

Verify if the procedure has already been performed.

Member Information

Wednesday, January 16, 2019 11:05 AM

Log Off
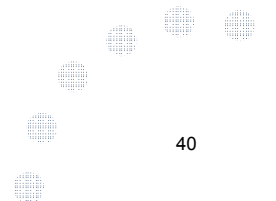
40% Complete

Provider and NPI

Clinical Certification

Patient ID: [_____]

Date Of Birth: [_____] MM/DD/YYYY

Patient Last Name Only: [_____] [?]

ELIGIBILITY LOOKUP

Cancel | Back | Print

Click here for help or technical support

Enter the **member information** including the Patient ID number, date of birth, and patient's last name. Click **"Eligibility Lookup."**

Clinical Details

Wednesday, January 16, 2019 11:05 AM

Log Off

60% Complete

Provider and NPI

Patient

EDIT

Clinical Certification

This procedure has not been performed. CHANGE

Radiology Procedures

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

73721 ▼ | MRI LOWER EXTREMITY JOINT W/O ▼

Don't see your procedure code or type of service? **Click here**

Diagnosis

Primary Diagnosis Code: **R68.89**
Description: **Other general symptoms and signs**
Change Primary Diagnosis

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

[   ] LOOKUP

Cancel | Back | Print | Continue

Click here for help or technical support

Select the CPT and Diagnosis codes.

42
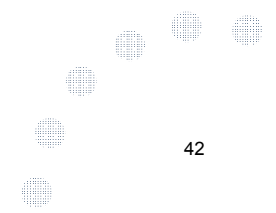
Verify Service Selection

Wednesday, January 16, 2019 11:05 AM

Log Off

60% Complete

Provider and NPI

Patient

EDIT

Clinical Certification

Confirm your service selection.

Procedure Date:	TBD
CPT Code:	73721
Description:	MRI LOWER EXTREMITY JOINT W/O
Primary Diagnosis Code:	R68.89
Primary Diagnosis:	Other general symptoms and signs
Secondary Diagnosis Code:	
Secondary Diagnosis:	

Change Procedure or Primary Diagnosis
Change Secondary Diagnosis

Cancel | Back | Print | Continue

Click here for help or technical support

Click continue to confirm your selection.

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Site Selection

Select the **specific site** where the testing/treatment will be performed.

Site Selection

This page allows you to enter an email address for a facility representative.
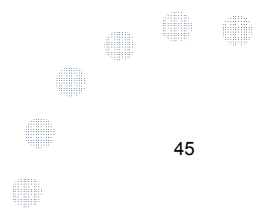
Clinical Certification

Clinical Certification

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

Once you have clicked "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 on-line request, be sure to click SUBMIT CASE before exiting the system. This final step in the on-line process is required even if you will be submitting additional information at a later time. Failure to formally submit your request by clicking the SUBMIT CASE button will cause the case record to expire with no additional correspondence from CareCore National.

Cancel | Back | Print | Continue

Click here for help or technical support

- Verify all information entered and make any needed changes prior to moving into the clinical collection phase of the prior authorization process.

- **You will not have the opportunity to make changes after that point.**

Urgent vs. Standard

Select an Urgency Indicator and Upload your patient's relevant medical records that support your request.

If your request is urgent select No, if the case is standard select Yes.

Clinical Certification

Is this case Routine/Standard?

Yes   No

You can upload up to **FIVE documents** in .doc, .docx, or .pdf format. Your case will only be considered Urgent if there is a successful upload.

Upload Urgent Clinical Documentation

Clinical Certification

Clinical Upload

Please upload any additional clinical information that justifies the medical necessity of this request.

Browse for file to upload (max size 5MB, allowable extensions .DOC,.DOCX,.PDF):

Choose File | No file chosen

Choose File | No file chosen

Choose File | No file chosen

Choose File | No file chosen

Choose File | No file chosen

UPLOAD | SKIP UPLOAD

For urgent requests you can immediately upload relevant clinical documentation and the request will be immediately routed through our urgent protocol.

Note: Providers will not be able to review documents after they are attached.

Clinical Certification

Clinical Certification questions may populate based upon the information provided.

Clinical Certification

- You can click the **"Finish Later"** button to save your progress.

- You have **two (2) business days** to complete the case.

Clinical Certification

Wednesday, January 16, 2019 11:05 AM

Log Off

Clinical Certification

ⓘ What is the date of the most recent contact with the requesting provider for this problem? (Enter an approximate date if the exact date is not known)

[   ] 🗓

ⓘ Enter the type of contact.

- ○ Email
- ○ Office visit
- ○ Phone call
- ○ Other
- ○ Unknown

SUBMIT

☐ Finish Later

Did you know?
You can save a certification request to finish later.

Cancel | Print

Click here for help or technical support

Select a reason for the requested study, or choose "Not Listed" if none of the available options are appropriate.
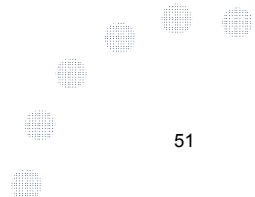
51

Clinical Certification

Wednesday, January 16, 2019 11:05 AM

Log Off

Clinical Certification

ⓘ Is there any additional information specific to the member's condition you would like to provide?

◉ Yes ○ No

Enter text in the space provided below or continue.

ⓘ Additional Information - Notes:

SUBMIT

☐ Finish Later

Did you know?
You can save a certification request to finish later.

Cancel   Print

Click here for help or technical support

At the end of the clinical pathway you will be asked if there is any additional information you would like to provide before submitting the request. You will have an open text box to provide additional information for consideration.

Attestation / Submit Case

Clinical Certification

☐ 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.

Print | SUBMIT CASE

Click here for help or technical support

Acknowledge the Clinical Certification statements, and hit "Submit Case."

Approval

Clinical Certification

Your case has been Approved.

Provider Name: Contact:

Provider Address: Phone
Number:

Fax Number:

Patient Name: Patient Id:

Insurance Carrier:

Site Name: Site ID:

Site Address:

Primary Diagnosis Code:	M25.562	Description:	Pain in left knee
Secondary Diagnosis Code:		Description:	
Date of Service:	Not provided		
CPT Code:	73721	Description:	MRI LOWER EXTREMITY JOINT W/O

Authorization
Number:

Review Date: 2:12:39 PM

Expiration Date:

Status: Your case has been Approved.

[Print] [Continue]

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, an approval will be issued.

Print the screen and store in the patient's file.

Medical Review

Clinical Certification

Your Case has been sent to Medical Review

Provider Name:	Contact:
Provider Address:	Phone Number:
	Fax Number:
Patient Name:	Patient Id:
Insurance Carrier:	
Site Name:	Site ID:
Site Address:	

Primary Diagnosis Code:	M25.562	Description:	Pain in left knee
Secondary Diagnosis Code:		Description:	
Date of Service:	Not provided		
CPT Code:	73721	Description:	MRI LOWER EXTREMITY JOINT W/O
Authorization Number:			
Review Date:			
Expiration Date:			
Status: Pending			

Print | Continue

Once the clinical pathway questions are completed and the case has not met clinical criteria, the status will reflect pending and the top of the screen will state "Your case has been sent to Medical Review."

Print the screen and store in the patient's file.

Building Additional Cases

Once a case has been submitted for clinical certification, you can return to the **Main Menu**, **resume an in-progress request**, or **start a new request**. You can indicate if any of the previous case information will be needed for the new request.

Authorization Lookup

- Select Search by **Authorization Number/NPI**. Enter the provider's NPI and authorization or case number. Select **Search**.

- You can also search for an authorization by **Member Information**, and enter the health plan, Provider NPI, patient's ID number, and patient's date of birth.

Authorization Status

The authorization will then be accessible to review. To print authorization correspondence, select **View Correspondence**.

Eligibility Lookup

eviCore · healthcare

| Home | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Performance Summary Portal | Resources | Manage Your Account | Help / Contact Us |

Thursday, March 15, 2018 4:43 PM

Log Off (INTGTEST)

Eligibility Lookup

New Security Features Implemented

Health Plan:
Patient ID:
Member Code:
Cardiology Eligibility: Medical necessity determination required.
Radiology Eligibility: Precertification is Required
Radiation Therapy Eligibility: Medical necessity determination required.
MSM Pain Mgt Eligibility: Precertification is Required
Sleep Management Eligibility: Medical necessity determination required.

Print   Done   Search Again

Click here for help or technical support

CONFIDENTIALITY NOTICE: Certain portions of this website are accessible only by authorized users and unique identifying credentials, and may contain confidential or privileged information. If you are not an authorized recipient of the information, you are hereby notified that any access, disclosure, copying, distribution, or use of any of the information contained in the code-accessed portions is STRICTLY PROHIBITED.

You may also confirm the patient's eligibility by selecting the Eligibility Lookup tab.

Provider Resources

Provider Resources: Prior Authorization Call Center

Pre-Certification Call Center

Web-Based Services

Client Provider Operations

Documents

7:00 AM - 7:00 PM (Local Time): (866) 665-8341

- Obtain prior authorization or check the status of an existing case

- Discuss questions regarding authorizations and case decisions

- Change facility or CPT Code(s) on an existing case

Provider Resources: Web-Based Services

Pre-Certification Call Center

Web-Based Services

Client Provider Operations

Documents

www.eviCore.com

To speak with a Web Specialist, call (800) 646-0418 (Option #2) or email portal.support@evicore.com.

- Request authorizations and check case status online – 24/7

- Pause/Start feature to complete initiated cases

- Upload electronic PDF/word clinical documents

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To reach eviCore Client Services, call (800) 646 - 0418 (Option #4) or email clientservices@evicore.com

- Eligibility issues (member, rendering facility, and/or ordering physician)

- Questions regarding accuracy assessment, accreditation, and/or credentialing

- Issues experienced during case creation

- Request for an authorization to be resent to the health plan

Provider Resources: Provider Resource Website

Provider Enrollment Questions – Contact MVP Provider Services at (800) 684-9286

Molina Healthcare Provider Resource Page

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

- **Provider Orientation Presentation**

- **CPT code list of the procedures that require prior authorization**

- **Quick Reference Guide**

- **eviCore clinical guidelines**

- **FAQ documents and announcement letters**

You can obtain a copy of this presentation on the site listed above. If you are unable to locate a copy of the presentation, please contact the Client Provider Operations team at **ClientServices@evicore.com**.

Web-Based Services

Client Provider Operations

Documents

Thank You!