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## Medical Oncology

### Frequently Asked Questions

#### Who is eviCore healthcare?

eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for health plans. **Beginning on June 19, 2020 eviCore will manage Medical Oncology services for SummaCare for dates of service July 1, 2020 and beyond.**

#### Which members will eviCore healthcare manage for the Medical Oncology program?

eviCore will manage prior authorization for SummaCare members who are enrolled in the following programs:

- Medicare
- Commercial; self-funded (where applicable)

#### What is eviCore healthcare's Medical Oncology program?

eviCore's Medical Oncology Review Program consists of Prior Authorization Medical Necessity Determinations for all primary injectable and oral chemotherapeutic agents used in the treatment of cancer as well as select supportive agents in combination with the chemotherapy. The program also includes newly approved chemotherapy agents that are used for the treatment of cancer.

#### Which Medical Oncology services require prior authorization for SummaCare?

A list of covered services and HCPC can be found by visiting <https://www.evicore.com/resources> Find the Health Plan > Select solution resources> Select the correct solution> Select CPT Codes.

#### How do I check the eligibility and benefits of a member?

Member eligibility and benefits should be verified through SummaCare before requesting prior authorization through eviCore.

#### Who needs to request prior authorization through eviCore?

All physicians who request/order medical oncology services are required to obtain a prior authorization for services prior to the service being rendered in an office or outpatient setting.

#### How do I request a prior authorization through eviCore healthcare?

Providers and/or staff can request prior authorization (or check the status of an existing authorization) in one of the following ways:

1. **Web Portal** - The SummaCare Plan Central portal is the quickest, most efficient way to request prior authorization and is available 24/7. Providers can request authorization from eviCore healthcare by logging in to the SummaCare Plan Central provider portal at <https://apex.myplancentral.com> or <https://summacare.myplancentral.com> . From here, you will be directed to the eviCore web portal where you can submit your prior authorization request.



2. **Call Center** - SummaCare’s call center for prior authorization services through eviCore healthcare is open from 8 a.m. to 5 p.m. local time. Providers and/or staff can request prior authorization and make revisions to existing cases by calling 888-996-8710; *follow the prompts to eviCore healthcare.*

### **Do medical oncology services performed in an inpatient setting at a hospital or emergency room setting require prior authorization?**

No. Medical Oncology ordered through an emergency room treatment visit, while in an observation unit, or during an inpatient stay do not require prior authorization.

### **What information is required when requesting prior authorization?**

When requesting prior authorization, please ensure the proprietary information is readily available:

#### **Member**

- First and Last Name
- Date of Birth
- Member ID

#### **Ordering Provider**

- First and Last Name
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Number

#### **Rendering (Performing) Provider**

- Facility Name
- National Provider Identification (NPI) Number

- Tax Identification Number (TIN)
- Street Address

#### **Clinical(s)**

- Requested Drug(s) (HCPCS ‘J’ code and name (brand and/or generic)
- Signs and symptoms
- Results of relevant test(s)
- Relevant medications
- Working diagnosis/stage
- Patient history including previous therapy

### **What happens if the provider’s office does not know the treatment regimen that needs to be ordered?**

The caller must be able to provide either the drug name or the HCPCS code in order to submit a request. eviCore will assist the physician’s office in identifying the appropriate code based on presented clinical information and the current HCPCS code(s) provided.

### **What is the most effective way to get authorization for urgent requests?**

Urgent requests are defined as a condition that is a risk to the patient’s health, ability to regain maximum function and/or the patient is experiencing severe pain that require a medically urgent procedure. Requests should not be marked “urgent” due to scheduling availability. Urgent requests may be initiated on the web portal or by contacting the call center at 888-996-8710. Urgent requests will be processed within 24 hours from the receipt of complete clinical information.

### **Where can I access eviCore healthcare’s guidelines?**

eviCore’s clinical worksheets and guidelines are available online 24/7 and can be found by visiting one of the following links:

#### **Clinical Guidelines**

[www.evicore.com/provider/clinical-guidelines](http://www.evicore.com/provider/clinical-guidelines)

**After I submit my request when and how will I receive the determination?** After **all** clinical info is received, for normal (non- urgent) requests a decision is made within 2-3 business days. For urgent requests, a decision is made within 24 hours (Medicare/Medicaid) and 72 hours (commercial) .The provider will be notified by fax.



### How long is the authorization valid?

Authorizations for medical oncology services are valid for 240-425 calendar days. If the service is not performed within the authorized date range, please contact eviCore healthcare

### What are my options if I receive and adverse determination?

The referring and rendering provider will receive a denial letter that contains the reason for denial as well as reconsideration and appeal rights process.

**Note:** The referring provider may request a Clinical Consultation at any time with an eviCore Medical Director to review the decision. However, SummaCare does not allow cases in final determination status to be reconsidered for a new determination.

### Does eviCore review cases retrospectively if no authorization was obtained?

- SummaCare does not allow for retrospective reviews for authorization. In some circumstances, late pre-certification requests (where clinical urgency prevented prior authorization from being obtained) will be accepted within 2 business days of the date of service
  - To be considered for approval, the case must be requested within the time limit, meet clinical criteria for appropriateness, and be clinically urgent.

### How do I make a revision to an authorization after services have been performed? How do I make a revision to authorization when services have not been performed?

The requesting provider or member should contact eviCore with any change to the authorization, whether the procedure has already been performed or not. It is very important to update eviCore healthcare of any changes to the authorization in order for claims to be correctly processed for the facility that receives the member.

### How do I determine if a provider is in network?

Participation status can be verified by contacting SummaCare at 800-996-8401, or by email at [contactproviderservices@summacare.com](mailto:contactproviderservices@summacare.com). Providers may also contact eviCore healthcare at 1 (800) 646 - 0418 (option 4). eviCore healthcare receives a provider file from SummaCare with all independently contracted participating and non- participating providers.

### Where do I submit my claims?

All claims will continue to be filed directly to SummaCare.

### Where do I submit questions or concerns regarding this program?

For program related questions or concerns, please email: [clientservices@evicore.com](mailto:clientservices@evicore.com)

#### **Common Items to Send to Client Services:**

- Questions regarding Accuracy Assessment, Accreditation, and/or Credentialing
- Requests for an authorization to be resent to the health plan
- Consumer Engagement Inquiries
- Complaints and Grievances
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues



### Who do I contact for online support/questions?

Web portal inquiries can be emailed to [portal.support@evicore.com](mailto:portal.support@evicore.com) or call 800-646-0418 (Option 2).

### What information about the prior authorization will be visible on the eviCore healthcare website?

The authorization status function on the website will provide the following information:

- Prior Authorization Number/Case Number
- Status of Request
- Site Name and Location
- Prior Authorization Date
- Expiration Date

### Where can I find additional educational materials?

For more information and reference documents, please visit our resource page at <https://www.evicore.com/resources/healthplan/summacare>

### How do I submit additional clinical information for review?

If you are unable to upload clinical information on the web portal, you can **fax additional information** to eviCore healthcare at:

**Radiation Oncology: 866-699-8160**

**Medical Oncology: 800-540-2406**

### Where do I submit my claims?

All claims will continue to be filed directly to SummaCare.

**The SummaCare claims system cannot pay part of a service line. If additional units are billed, greater than the authorized amount, that service line will be denied and providers will need to rebill the claim.**

### For other claim inquiries or to request a claim adjustment:

- To request a claim adjustment, please log in to [Plan Central](#). If you do not have a user account, please [register](#) by clicking the registration link located on the Plan Central homepage.
- After logging in, please locate your claim using the "Claim Inquiry" menu. When your search results appear, click on the claim to view the details. When you click the button titled "Adjustment Request," a window will appear with various options so we can understand why you feel your claim should be adjusted.

If you have claims questions, please contact SummaCare Provider Support Services at [contactproviderservices@summacare.com](mailto:contactproviderservices@summacare.com) or call 330-996-8400 or 800-996-8401.