

Musculoskeletal Management

Provider Orientation Sessions for Security Health Plan

May 1, 2019



SecurityHealth PlanSM

Promises kept, plain and simple.



Company Overview



**100M
Members
Managed**

9 Comprehensive Solutions



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



4.9k+ employees including **1k clinicians**

Engaging with 570k+ providers



Advanced, innovative, and intelligent technology

Headquartered in Bluffton, SC Offices across the US including:

- Lexington, MA
- Colorado Springs, CO
- Franklin, TN
- Greenwich, CT
- Melbourne, FL
- Plainville, CT
- Sacramento, CA



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

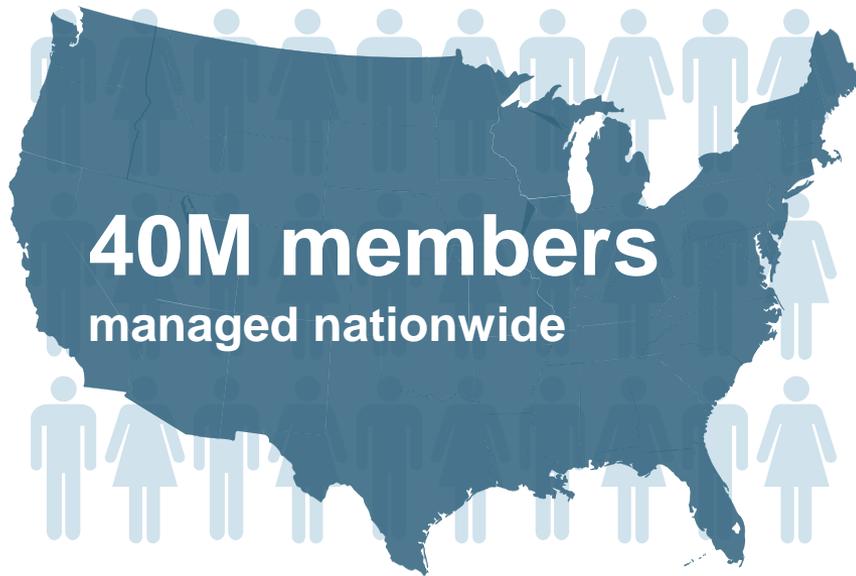


Musculoskeletal Management Solution - Our Experience

30+ Regional
and National Clients

8k+
Cases built per day

10 Years
Managing Musculoskeletal Services



Members Managed

- **25.5M Commercial Memberships**
- **2M Medicare Memberships**
- **6.5M Medicaid Memberships**





Musculoskeletal Solution

40M Lives



Commercial,
Medicaid, Medicare, and
Security Administrative
Services plans



Local and national
programs

Covered Services

Spine Surgery

- Fusions
- Decompressions
- Disc replacements

Large Joint Surgery

- Joint replacement
- Arthroscopy
- Open procedures

Interventional Pain

- Spinal injections
- Spinal denervations
- Stimulators / pain pumps

<https://www.evicore.com/healthplan/shp>

Musculoskeletal by the Numbers

45



**Musculoskeletal
physicians on staff**

43



**Musculoskeletal-trained
nurses on staff**



40

**Million lives
covered**



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**

Competency-Based Routing

- Allows clinically complex cases to automatically route to a specific queue, based on clinical specialty for review
- Ensures greater accuracy of decision-making across the many clinical disciplines

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

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.

Musculoskeletal Management Prior Authorization Process

Program Overview

eviCore healthcare will begin accepting requests on **April 22, 2019** for dates of service **May 1, 2019** and beyond

Prior authorization applies to services that are:

- Outpatient
- Elective / Non-emergent
- Diagnostic
- Inpatient

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

- Emergency room
- 23-hour observation

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

Applicable Membership

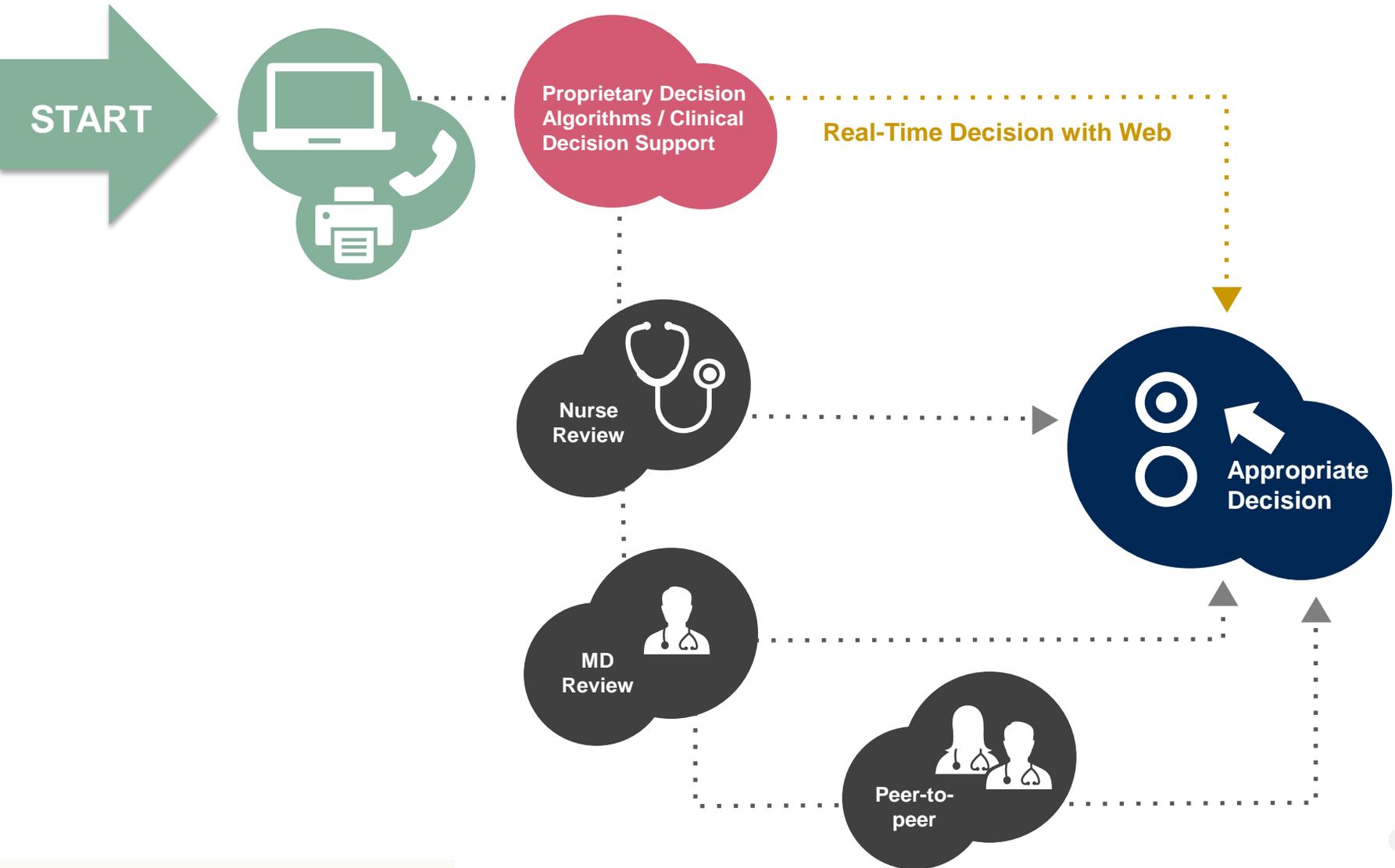
Authorization is required for Security Health Plan members enrolled in the following programs:

- **Commercial**
- **Medicaid**
- **Medicare**
- **Security Administrative Services Plan**



Clinical Review Process – Easy for Providers and Staff

Methods of Intake



Needed Information



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

Prior Authorization Outcomes

➤ Approved Requests

- All requests are processed within **2 business days**
- **Outpatient** authorizations are typically good for **60 calendar days** from the planned date of service.
- If the planned DOS changes the provider will be responsible for updating the change of date via the web.
- **In-patient** Joint/Spine services the approval is based off the requested date of service and the length of stay.

➤ Delivery Method

- Faxed to ordering provider and rendering facility
- Mailed to the member
- Information can be printed on demand from the eviCore healthcare Web Portal 24/7.
- Verbal notifications may be provided in certain situations.

- • If the authorization timeframe is greater than 60 days an extension will not be granted.

Prior Authorization Outcomes-Denials

➤ 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 and rendering facility
- Mailed to the member
- Verbal notifications of an adverse decision may be provided in certain situations.

Prior Authorization Outcomes - Commercial

Clinical Consultations

- If a request is denied and requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians. In certain instances, additional information provided during the consultation is sufficient to satisfy the medical necessity criteria for approval.
- **Clinical Consultations** can be scheduled at a time convenient to your physician by visiting www.evicore.com/pages/requestaconsultation.aspx

Reconsiderations

- Additional clinical information can be provided without the need for a physician to participate-additional information will need to be provided within 10 business days of the denial.
- Must be requested on or before the anticipated date of service
- Commercial members only

Pre-Decision Consultation

- If your case requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians prior to a decision being rendered.
- In certain instances, additional information provided during the pre-decision consultation is sufficient to satisfy the medical necessity criteria for approval

Special Circumstances

Appeals

- eviCore will not process first level appeals
- Requests for appeals must be submitted to Security Health Plan
- Information on how to file an appeal will be included in the denial notification letter

Retrospective Procedures

- Retro requests will not be allowed for this program.

Outpatient Urgent Procedures

- Contact eviCore by web or phone to request an expedited prior authorization review and provide clinical information
- Urgent cases (**Medicare/Medicaid**) will be reviewed within **24 hours** of the request and clinical submitted.
- Urgent cases (**Commercial**) will be reviewed with **72 hours** of the request and the clinical submitted.

Special Circumstances (cont.)

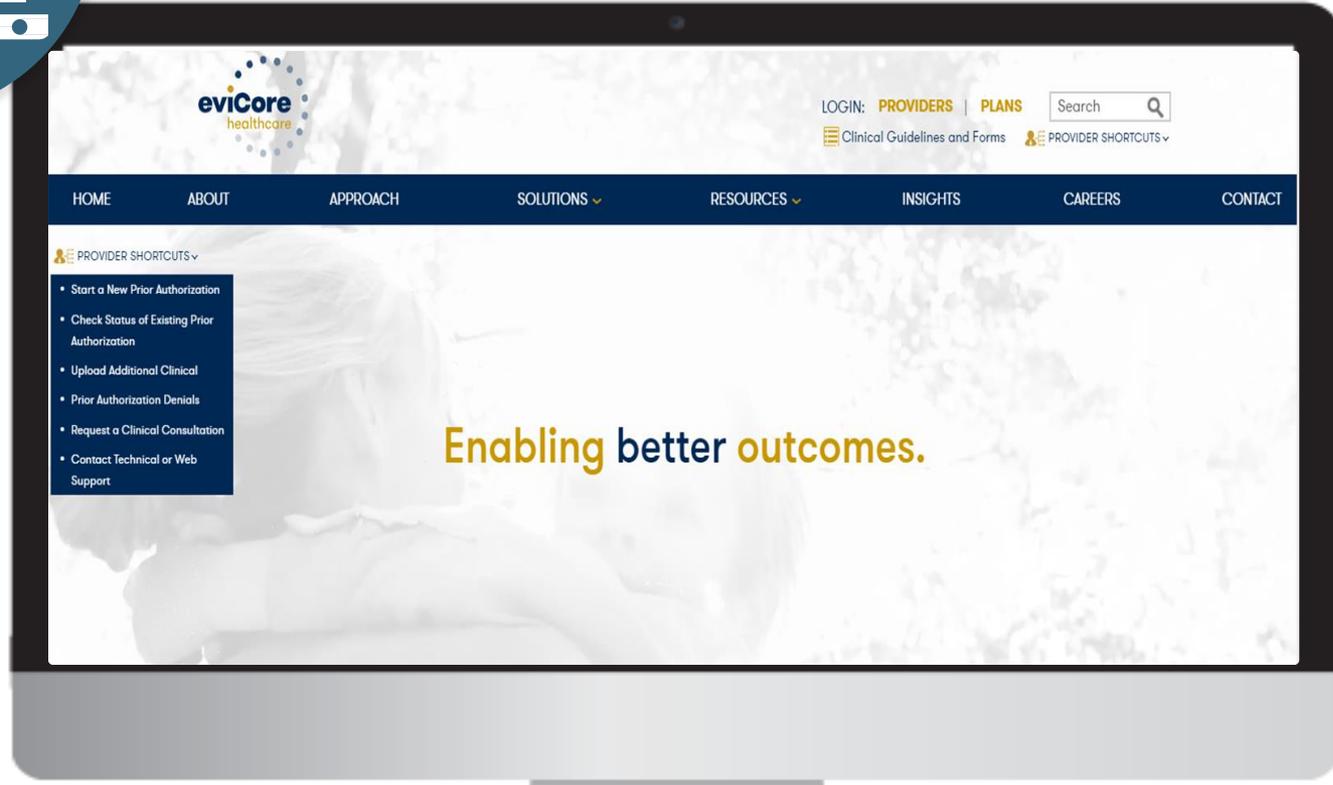
Inpatient

- eviCore will review the request for an inpatient admission related to joint/spine surgeries for medical necessity and provide prior authorization for an initial length of stay. Any extensions to the initially approved length of stay will be managed by Security Health Plan staff via the Plan's concurrent review process. Please contact the Security Health Plan Utilization Management Department at 1-800-991-8109 for any extensions to the initially approved length of stay.

Web Portal Services



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:
888-444-6185
7:00 a.m. to 7:00p.m.
Monday – Friday
Central time

Portal Compatibility

The eviCore.com website is compatible with the following web browsers:

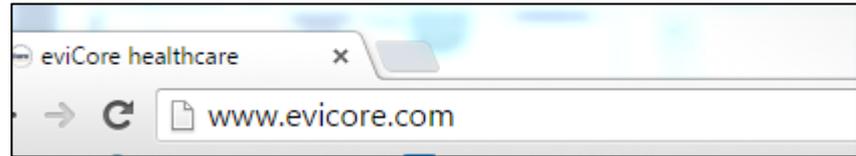
- Google Chrome
- Mozilla Firefox
- Internet Explorer 9, 10, and 11

You may need to disable pop-up blockers to access the site. For information on how to disable pop-up blockers for any of these web browsers, please refer to our [Disabling Pop-Up Blockers guide](#).

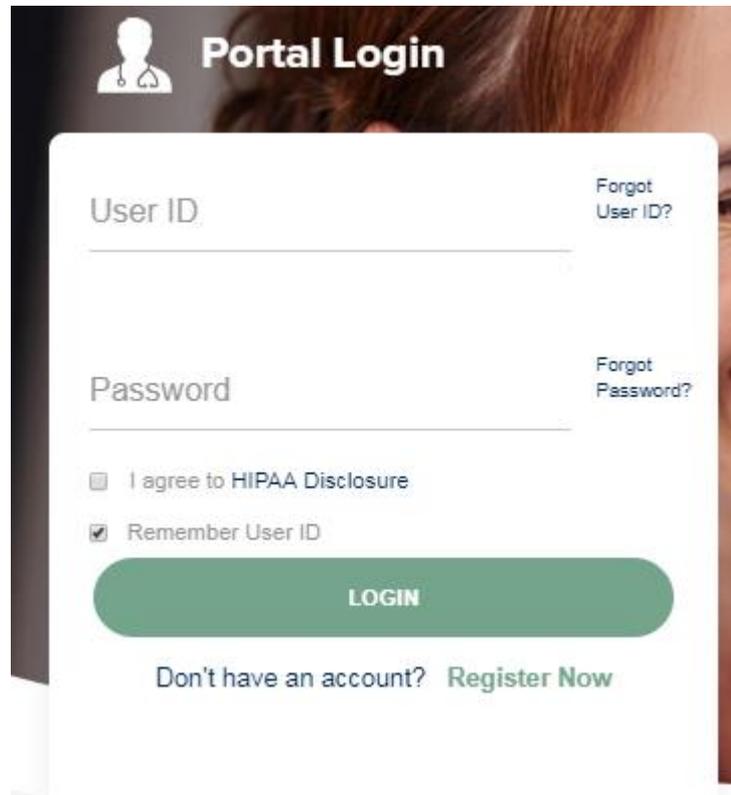


eviCore healthcare website

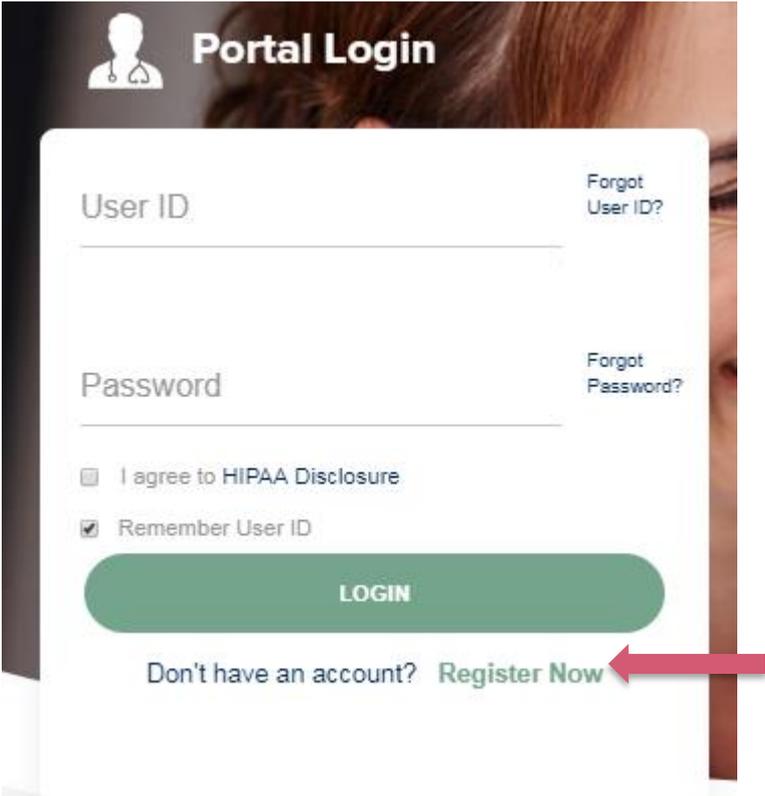
- Point web browser to evicore.com



- Login or Register

A screenshot of the 'Portal Login' form on the eviCore healthcare website. The form is white with a green 'LOGIN' button. It includes fields for 'User ID' and 'Password', each with a 'Forgot' link. There are two checkboxes: 'I agree to HIPAA Disclosure' and 'Remember User ID'. Below the form is a link for 'Register Now' for users who don't have an account. The background of the form is a blurred image of a person's face.

Creating An Account



To create a new account, click **Register**.

Creating An Account

eviCore healthcare
INNOVATIVE SOLUTIONS

* 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 want to register as a Client User at CareCore National, then please contact us: 1-800-918-8924 x20136.

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*:	<input type="text"/>	Address*:	<input type="text"/>	Phone*:	<input type="text"/>
Email*:	<input type="text"/>	City*:	<input type="text"/>	Ext:	<input type="text"/>
Confirm Email*:	<input type="text"/>	State*:	Select <input type="text"/>	Fax*:	<input type="text"/>
First Name*:	<input type="text"/>	Zip*:	<input type="text"/>		
Last Name*:	<input type="text"/>	Office Name*:	<input type="text"/>		

Next

 Select a **Default Portal**, and complete the registration form. **For Pain/Joint/Spine choose CareCore National**

Creating An Account

Please review the information before you submit this registration. An Email will be sent to your registered email address to set your password.

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*:

If you want to register as a Client User at CareCore National, then please contact us: 1-800-918-8924 x20136.

User Registration

UserName:	MYG123	Address:	730 Cool Springs	Phone:	800-575-4517
Email:	tesaccount@gmail.com	City:	Franklin	Ext:	
Account Type:	Physician	State:	TN	Zip:	37067
First Name:	Test	Office Name:	Test Office	Fax:	615-468-4408
Last Name:	Account				

Back

Submit Registration



Review information provided, and click **“Submit Registration.”**

Creating An Account

Please review the information before you submit this registration. An Email will be sent to your registered email address to set your password.

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*:

If you want to register as a Client User at CareCore National, then please contact us: 1-800-918-8924 x20136.

User Registration

UserName:	MYG123	Address:	730 Cool Springs	Phone:	800-575-4517
Email:	tesaccount@gmail.com	City:	Franklin	Ext:	
Account Type:	Physician	State:	TN	Zip:	37067
First Name:	Test	Office Name:	Test Office	Fax:	615-468-4408
Last Name:	Account				

Review information provided, and click **“Submit Registration.”**



User Registration-Continued

Please review the information before you submit this registration. An Email will be sent to your registered email address to set your password.

Web Portal Preference

Please select the Portal that is listed in your provider training material.

Default Portal: CareCore National

If you are a health plan representative, please contact web support at 1-800-999-9999.

User Registration

UserName: testing5
Email: test@testing123.com
Account Type: Physician
First Name: test
Last Name: test

Phone: 999-999-9999
Ext:
Fax: 999-999-9999

USER REGISTRATION

User Access Agreement *Required

eviCore
Provider/Customer Access Agreement for Web-Based Applications

This Provider/Customer Access Agreement for Web-Based Applications ("Access Agreement") contains the terms and conditions for use by Provider/Customers of the web-based applications provided by eviCore through its Web Site. This Access Agreement applies to Provider/Customer and all employees and/or agents that have access to eviCore's web-based applications by utilizing a User ID and Personal Identification Number ("PIN"), Security Password, or other security device provided by eviCore, hereinafter referred to as "Users."

To obtain access to eviCore's Web Site applications, User must first read and agree to this Access Agreement. After reviewing these documents, User will be asked to accept the Access Agreement by checking the "Accept Terms and Conditions" check box. If User accepts, this will result in a binding contract between User and eviCore, just as if User had physically signed the Access Agreement.

Each and every time User accesses eviCore's web-based applications, User agrees to be bound by this Access Agreement, as it may be amended from time to time.

1. Limited License. Upon acceptance, eviCore grants Provider/Customer a revocable, nonexclusive, and nontransferable limited license to access electronically eviCore's web-based applications only so long as Provider/Customer is currently bound by a Provider/Customer Agreement (as used herein a "Provider/Customer Agreement" is an agreement to provide health care/medical services to members of health plans for which eviCore provides radiological services, whether it is with eviCore directly or said health plan(s)). This electronic access method use of eviCore's web-based applications is subject to the terms and conditions of the Provider/Customer Agreement.

Accept Terms and Conditions

Submit Cancel

Back Submit Registration



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

Create a Password

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

- ✓ Uppercase letters
- ✓ Lowercase letters
- ✓ Numbers
- ✓ Characters (e.g. ! ? *)



Password Maintenance

Please set up a new password for your account.

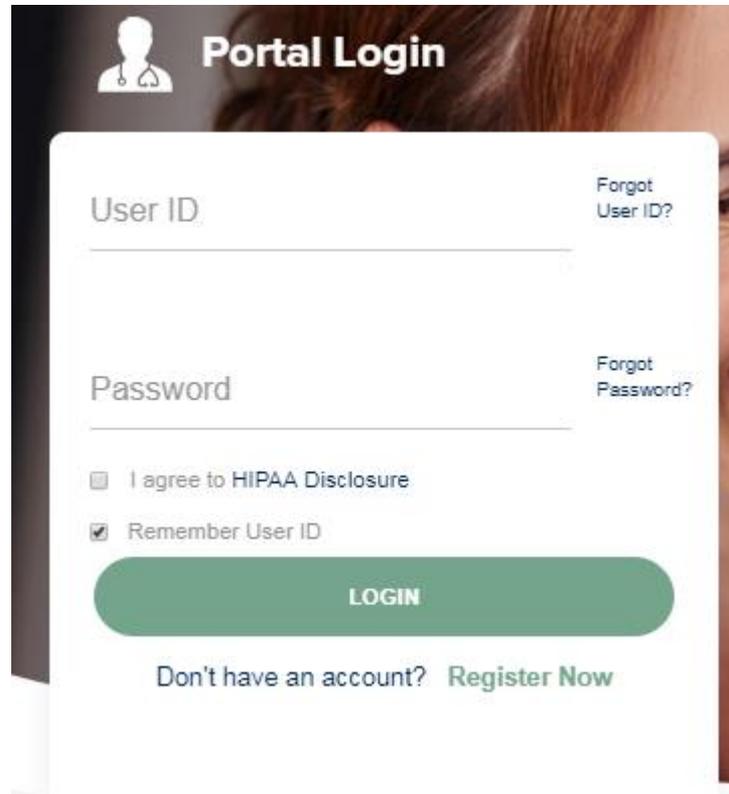
Note: The password must be at least 8 characters long and contains the following categories : Uppercase letters, Lowercase letters, Numbers and special characters.

New Password*

Confirm New Password*

Save

Account Log-In



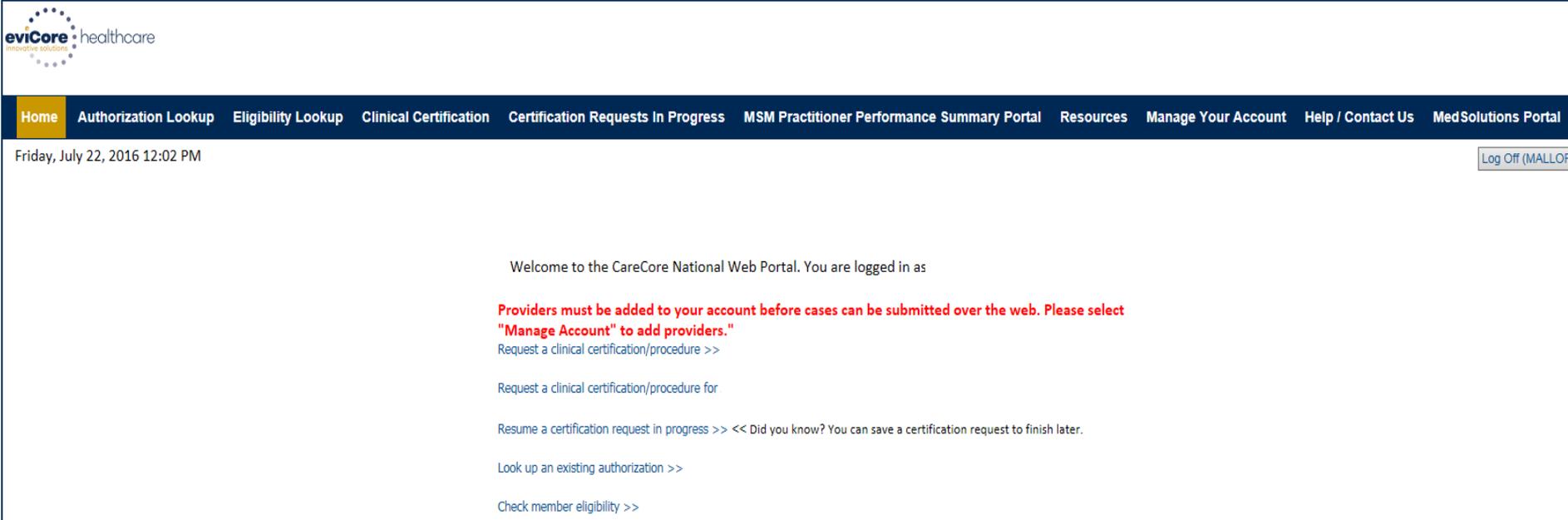
The image shows a mobile application interface for a 'Portal Login'. At the top left, there is a white silhouette icon of a person with a stethoscope. To its right, the text 'Portal Login' is displayed in a bold, black font. Below this header is a white login card with rounded corners. The card contains two input fields: 'User ID' and 'Password'. To the right of the 'User ID' field is a link that says 'Forgot User ID?'. To the right of the 'Password' field is a link that says 'Forgot Password?'. Below the input fields are two checkboxes: the first is 'I agree to HIPAA Disclosure' with an unchecked box, and the second is 'Remember User ID' with a checked box. At the bottom of the card is a large, rounded green button with the word 'LOGIN' in white capital letters. Below the button, the text 'Don't have an account? Register Now' is displayed, with 'Register Now' in a green color.



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

Account Overview

Welcome Screen



The screenshot shows the CareCore National Web Portal welcome screen. At the top left is the eviCore healthcare logo with the tagline 'innovative solutions'. A dark blue navigation bar contains the following menu items: Home (highlighted), Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, Help / Contact Us, and MedSolutions Portal. Below the navigation bar, the date and time 'Friday, July 22, 2016 12:02 PM' are displayed on the left, and a 'Log Off (MALLOR)' button is on the right. The main content area contains the following text: 'Welcome to the CareCore National Web Portal. You are logged in as'. A red warning message states: 'Providers must be added to your account before cases can be submitted over the web. Please select "Manage Account" to add providers.' Below this are several links: 'Request a clinical certification/procedure >>', 'Request a clinical certification/procedure for', 'Resume a certification request in progress >> << Did you know? You can save a certification request to finish later.', 'Look up an existing authorization >>', and 'Check member eligibility >>'.

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

Note: You can access the MedSolutions Portal at any time if you are registered. Click the MedSolutions Portal button on the top right corner to seamlessly toggle back and forth between the two portals without having to log-in multiple accounts.

Add Practitioners

Manage Your Account

Office Name:

Change Password

Edit Account

Address: 730 Cool Springs Blvd
Franklin, TN 37067

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

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

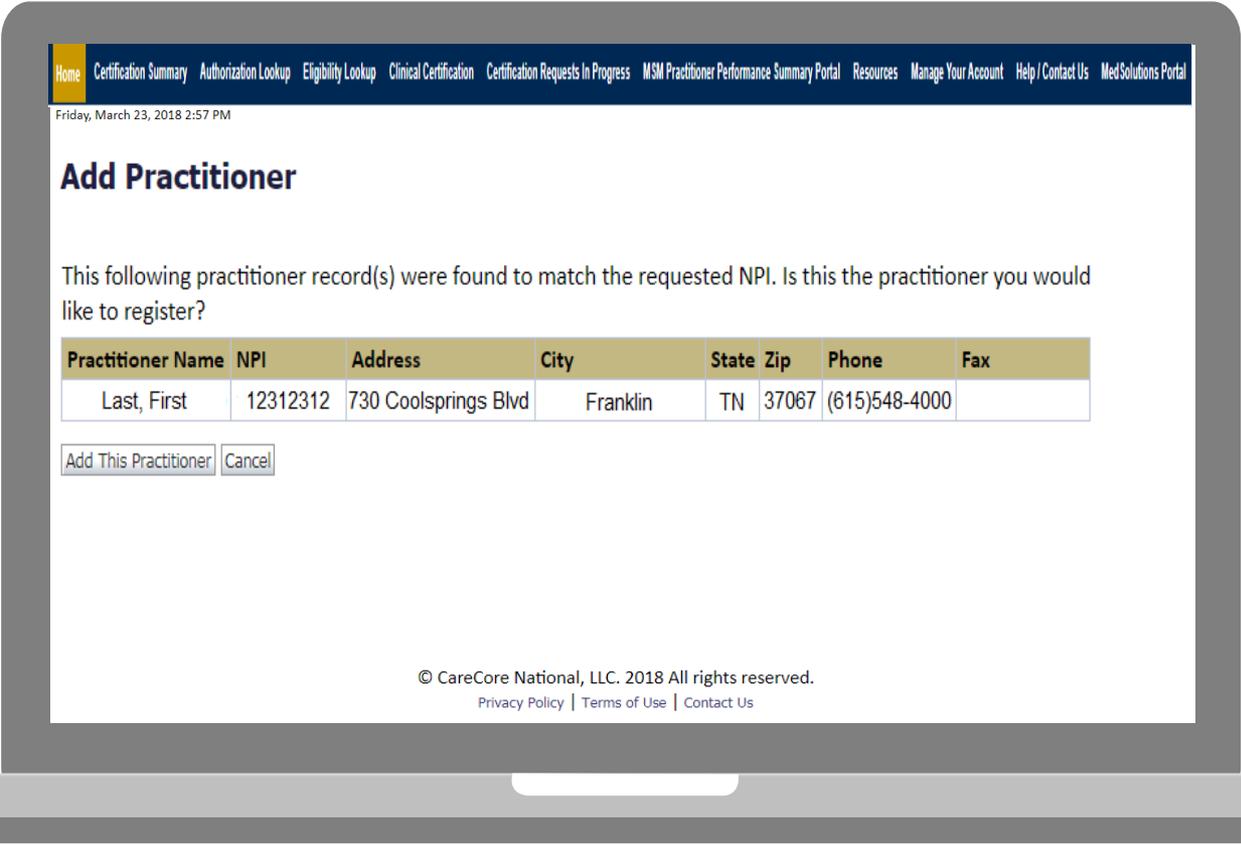
Practitioner Zip

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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

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](#)

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- 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



Home **Certification Summary** Authorization Lookup Eligibility Lookup Clinical Certification Certification Requests In Progress MSM Practitioner Performance Summary Portal

Tuesday, November 06, 2018 2:50 PM

Certification Summary

Search..  

Page 1 of 0 10 ▼

Authorization Number	Case Number	Member Last Name	Ordering Provider Last Name	Ordering Provider NPI	Status	Case Initiation Date	Procedure Code	Service Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="text"/>	

Page 1 of 0 10 ▼

Case Initiation

Initiating A Case

Welcome to the CareCore National Web Portal. You are logged in as **UPPROTRIAL**.

[Request a clinical certification/procedure >>](#)

[Resume a certification request in progress >>](#) << Did you know? You can save a certification request to finish later.

[Look up an existing authorization >>](#)

[Check member eligibility >>](#)

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- Choose **“request a clinical certification/procedure”** to begin a new case request.

Select Program

Clinical Certification

Please select the program for your certification:

- Radiology and Cardiology
- Specialty Drugs
- Radiation Therapy Management Program (RTMP)
- Musculoskeletal Management
- Sleep Management
- Lab Services
- Medical Oncology Pathways



Select the **Program** for your certification.



Select Provider

Clinical Certification

Select the practitioner or group for whom you want to build a case. If the practitioner, group, or lab for whom you wish to build a case is not listed, please visit [Manage Your Account](#) to associate the new practitioner, group, or lab.

Filter Last Name

or NPI:

Selected Physician:

Provider	
<input type="button" value="SELECT"/>	
1 2 3	

[Click here](#) for help or technical support

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Select Health Plan



20% Complete

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.

Click [here](#) for help or technical support

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



30% Complete

Provider and NPI

Clinical Certification

Provider's Name [?]

Who to Contact [?]

Fax [?]

Phone [?]

Ext. [?]

Cell Phone

Email

Click [here](#) for help or technical support

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

Member/Procedure Information

Attention!

Time: 1/16/2019 11:23 AM

Has this procedure been performed?

Verify if the procedure has already been performed.

Member Information

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



40% Complete

Provider and NPI

Clinical Certification

Patient ID:

Date Of Birth: MM/DD/YYYY

Patient Last Name Only: [?]

IF THIS IS A MEDICAID MEMBER, PLEASE USE THE MEMBER'S MEDICAID ID

[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

Clinical Certification

This procedure will be performed on 2/21/2017. [CHANGE](#)

Musculoskeletal Management Procedures

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

JOINT

Diagnosis

Primary Diagnosis Code: **M25.561**
Description: **Pain in right knee**
[Change Primary Diagnosis](#)

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

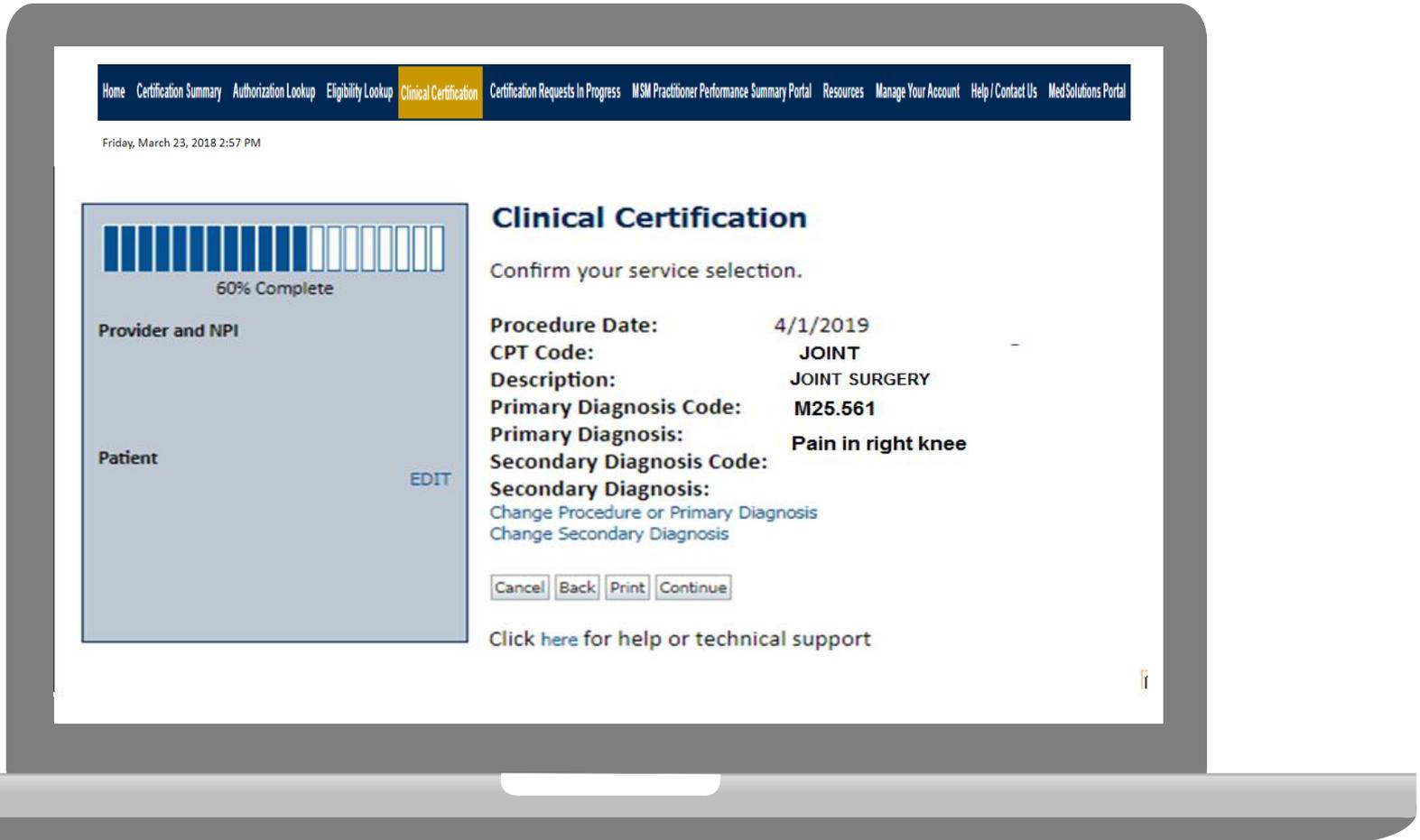
[LOOKUP](#)

[Cancel](#) [Back](#) [Print](#) [Continue](#)

[Click here for help or technical support](#)

Select the **CPT** and **Diagnosis** codes. Please note you have to choose joint or spine for these programs. You will be asked the DX code and you will be asked to provide the CPT code when answering pathway questions.

Verify Service Selection



Click **continue** to confirm your selection.

Site Selection

Clinical Certification

Specific Site Search

Use the fields below to search for specific sites. For best results, search by NPI or TIN. Other search options are by name plus zip or name plus city. You may search a partial site name by entering some portion of the name and we will provide you the site names that most closely match your entry.

NPI:	<input type="text"/>	Zip Code:	<input type="text"/>	Site Name:	<input type="text"/>
TIN:	<input type="text"/>	City:	<input type="text"/>	<input type="radio"/> Exact match	
				<input type="radio"/> Starts with	

LOOKUP SITE

[Cancel](#) [Back](#) [Print](#)

[Click here for help or technical support](#)

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

Site Selection



Confirm the site selection.

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.

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 Online

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.



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.

Supporting 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):

No file chosen

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For Urgent requests you will upload **additional information to support the medical necessity**. If the case requires additional clinical, you will have the option to free text in a provided field or upload information electronically.

Pause/Save Option

Clinical Certification

i Please enter the primary CPT code for this surgery.

i How many units? (Units for an assistant or co-surgeon should NOT be included here. Indicate the assistant / co-surgeon by requesting the appropriate modifier)

i Which region of the spine will this procedure be performed?

- Thoracic
- Cervical
- Lumbar
- Sacral
- This request is for E0760 and is NOT related to a spinal condition.

SUBMIT

Finish Later

Did you know?

You can save a certification request to finish later.

Cancel Print

Click [here](#) for help or technical support

Once you have entered the clinical collection phase of the case process, you can save the information and return **within two business days** to complete.

Clinical Certification Pathway

Clinical Certification

Lumbar Discectomy - LEVEL / SIDE

i Please indicate the levels involved in this procedure: (Choose all that apply)

- L1 - L2 L4 - L5
 L2 - L3 L5 - S1
 L3 - L4 Unknown

i Please indicate the side this procedure will be performed:

- Left
 Right
 Bilateral

PREVIOUS SURGERY

i Is this the first lumbar disk surgery at this level and side?

- Yes No

i Please indicate the reason for the requested procedure:

SUBMIT

Finish Later

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

Cancel Print

Click [here](#) for help or technical support

Clinical Certification Pathway Continued

Clinical Certification

Do you want to enter a second code for this Knee surgery?

Yes No

SUBMIT

Finish Later

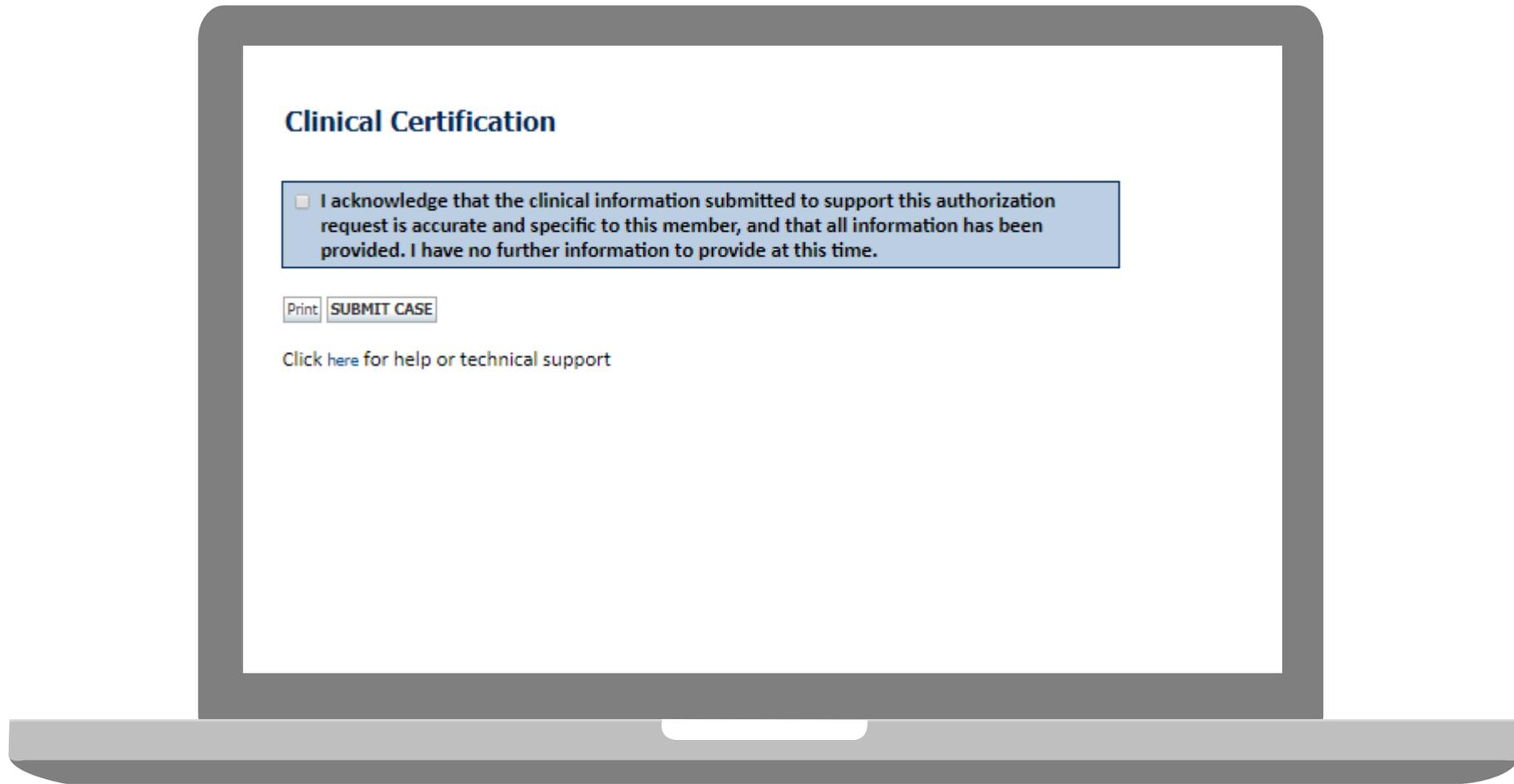
Did you know?
You can save a certification
request to finish later.

Cancel Print

[Click here](#) for help or technical support



Attestation



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:	
<hr/>			
Patient Name:		Patient Id:	
Insurance Carrier:			
<hr/>			
Site Name:		Site ID:	
Site Address:			
<hr/>			
Primary Diagnosis Code:		Description:	
Secondary Diagnosis Code:		Description:	
CPT Code:		Description:	
Modifier:			
Authorization Number:			
Review Date:			
Expiration Date:			
Status:	Your case has been Approved.		

Print

Continue

Once the clinical pathway questions are completed and 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:

Provider Address:

Contact:

Phone

Number:

Fax Number:

Patient Name:

Insurance Carrier:

Patient ID:

Site Name:

Site Address:

Site ID:

Primary Diagnosis Code: R68.89

Secondary Diagnosis
Code:

CPT Code: M SMPT

Description: Other general symptoms and
signs

Description:

Description: PHYSICAL THERAPY

Modifier:

Authorization Number:

Review Date:

Expiration Date:

Status: Pending

Once the clinical pathway questions are completed and the case has not meet clinical review. The status will reflect pending and at the top “Your case has been sent to Medical Review”.

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

Building Additional Cases

Clinical Certification

Thank you for submitting a request for clinical certification. Would you like to:

- Return to the main menu
- Start a new request
- Resume an in-progress request

You can also start a new request using some of the same information.

Start a new request using the same:

- Program (Musculoskeletal Management)
- Provider
- Program and Provider
- Program and Health Plan

GO

Cancel Print

[Click here](#) for help or technical support

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 look up



Tuesday, November 22, 2016 2:30 PM

Authorization Lookup

New Security Features Implemented

Search by Member Information

REQUIRED FIELDS

Healthplan:

Provider NPI:

Patient ID:

Patient Date of Birth:
MM/DD/YYYY

OPTIONAL FIELDS

Case Number:

or

Authorization Number:

Search by Authorization Number/ NPI

REQUIRED FIELDS

Provider NPI:

Auth/Case Number:



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.

Search Results and Electronic Clinical Upload Feature

New Security Features Implemented

Authorization Number:	NA
Case Number:	
Status:	Additional Information Required
Approval Date:	
Service Code:	
Service Description:	
Site Name:	
Expiration Date:	
Date Last Updated:	9/15/2017 10:45:49 AM
Correspondence:	VIEW CORRESPONDENCE
Clinical Upload:	UPLOAD ADDITIONAL CLINICAL 

Eligibility Look Up



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



Musculoskeletal Online Resources

Clinical Guidelines, FAQ's, Online Forms, and other important resources can be accessed at www.evicore.com.

PROVIDERS:  Check Prior Authorization Status  Login  Resources 

Resources

CLINICAL GUIDELINES

Clinical Worksheets

Network Standards/Accreditations

Provider Playbooks

Training Resources

I Would Like To

Request a Consultation with a Clinical Peer Reviewer

Request an Appeal or Reconsideration

Receive Technical Web Support

Check Status Of Existing Prior Authorization

Check Eligibility Status

Access Claims Portal

Learn How To

Submit A New Prior Authorization

Upload Additional Clinical

Find Contact Information

GO TO PROVIDER'S HUB >

Provider Resources: Prior Authorization Call Center



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

7:00 AM - 7:00 PM (Central Time): (888) 444-6185

- 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

Provider Resources: Client Provider Operations



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

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 healthplan

Provider Resources: Implementation Website



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

Provider Enrollment Questions – Contact Security Health Plan
Provider Services at 800-991-8109

Security Health Plan Provider Resources Page - includes all implementation documents:

<https://www.evicore.com/healthplan/shp>

- **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 implementation 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.

Thank You!

