

January 2019

Program Facts

- Overview
- CPT Code List
- Prior Certification
- Responsibilities

Precertification

www.evicore.com

Phone: 1-888-333-8641

Web Authorization Facts

- Saves Time
- Available 24/7
- Authorization Lookup
- Eligibility Lookup
- Print Your Authorization

Evidence-based medical necessity criteria

www.evicore.com

Contact Information

eviCore healthcare

Customer Service

1-800-420-3471 Option 2

Customer Service and Appeals

AL Medicare	232-341-5353
AR Medicare	855-538-0454
CT Medicare	866-579-8006
FL Medicare	888-888-9355
FL Staywell	866-334-7927
FL Staywell Kids	866-698-5437
GA Medicaid	866-231-1821
GA Medicare	866-334-7730
IL Medicaid	800-608-8158
IL Medicare	866-334-6876
KY Medicaid	877-389-9457
KY Medicare	877-560-2766
LA Medicare	866-804-5926
ME Medicare	888-550-5252
MO Medicaid	800-322-6027
NC Medicare	877-655-2425
NE Medicaid	855-599-3811
NJ Medicaid	888-453-2534
NJ Medicare	866-687-8570
NY Medicaid	800-288-5441
NY/ME Medicare	800-278-5155
SC Medicaid	888-588-9842
SC Medicare	855-538-0454
TX Medicare	866-687-8878
TAMS Medicare	800-316-2273

Program Overview

The health plan's Physical Medicine and Therapy Program is offered through eviCore healthcare in 2019. The utilization management program utilizes research-driven clinical expertise to improve quality and manage the appropriateness of care. We employ innovative information technology, data management systems, evidence-based clinical pathways and operational processes to deliver clinical and financial value to payors, patients, and providers. The objective of the utilization management program is to promote efficiency in the delivery of therapy services and to ensure that therapy providers deliver care within acceptable utilization parameters.

Procedures Covered in the Program

Outpatient services for Physical Therapy and Occupational Therapy.

How to Obtain Authorizations for Coverage

Therapists can request authorization online at www.evicore.com, by phone at **888-333-8641**, or by fax at **855-774-1319** (*fax submissions must include a clinical worksheet*).

Before requesting a prior authorization from eviCore healthcare, please fill out a condition-specific clinical worksheet, available at www.evicore.com. Worksheets are designed to capture the demographic and clinical information that will be needed to complete a prior authorization request by web, phone, or fax. Clinical notes are not necessary in most cases. You will be contacted if additional information is needed.

The following information will be required as a Notification to the health plan that the patient is starting care:

- Therapy type requested
- Patient, requesting therapist, and rendering site information
- Current clinical condition
- Start Date of the requested authorization

All therapists must submit this Notification within seven days of the initial evaluation. You may be prompted to also complete a Treatment Request to provide clinical information for medical necessity review at this time.

All requests will require a Start Date for treatment. For initial requests, the Start Date is the patient's initial evaluation date. The initial authorization will indicate the number of visits and service units authorized over an Approved Time Period. An updated Treatment Request is required for continuing care. For continuing care requests, the Start Date is the first visit that requires pre-authorization after the previous Approved Time Period expiration.

Advantages to Web submissions:

- Your time is valuable! Most Web cases can be completed within four minutes. The phone may average 15 minutes.
- The Web never sleeps. Precertification can be obtained when it is convenient for you, 24 hours/day, and 7 days/week.
- If the procedure requested meets clinical criteria, the web provides an *immediate* approval that can be printed for easy reference.
- The Web allows you to have real-time access to review a patient's history and to conduct a status check on previously requested authorizations.
- The Web provides real-time verification of patient eligibility and a one-time only registration.

Responsibilities

Function/Service	eviCore	Wellcare
Prior Authorization/Medical Necessity Review	X	
Peer to Peer	X	
Appeals		X
Customer Service		X