

ABH FL Quick Reference Guide

Authorization services cover outpatient, elective:

- Radiology: MR, PET, CT, Nuclear Medicine
- Pain Management
- Cardiology

Authorization is not required for:

- Inpatient services
- Services performed in the Emergency Room
- 23-hour observation

Authorization Requests

Web Portal: www.evicore.com

The Portal is available 24/7. Contact the Web Team at 800-575-4594 or portal.support@evicore.com.

Phone: 888.693.3211 - 7AM – 8PM Central Time.

Urgent requests must be initiated via phone.

eviCore healthcare's call center will be closed in observance of New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, and Christmas Day.

Fax: 844-82AETNA

Fax Forms are available at www.evicore.com.

Online Resources

Visit www.evicore.com for helpful resources. Choose "Clinical Guidelines and Forms" at the top to gain access to Clinical Guidelines, Fax Forms, and Educational Tools.

Standard Case Clinical Information Required

To help ensure quick case turn-around, we recommend that the physician's office submit:

- Recent clinical information including prior tests, lab work, and/or imaging performed related to this diagnosis
- Working or differential diagnosis and notes from the patient's last visit
- Type and duration of treatment performed

Contact Information

Contact the **Intake** team at **888-693-3211** to:

- Change a facility/CPT code on a case
- Request a Peer-to-Peer discussion

Contact the **Client Provider Operations** team at ClientServices@evicore.com to discuss:

- Issues experienced during case creation and requests for authorizations to be resent to the health plan
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Facility participation questions

ABH FL Program Documents

https://www.evicore.com/healthplan/ABH_FL

Visit the ABH FL implementation site to access the CPT code list requiring prior authorization, Quick Reference Guide, FAQ's, and other important documents.

Authorizations

eviCore healthcare will fax a copy of an approved authorization to the ordering physician and the rendering site and mail a copy to the member. It is the responsibility of the performing facility to confirm that the referring physician completed the prior authorization process. Verification may be obtained via the eviCore website or by calling 888.693.3211. Denial notifications will be issued in writing to the ordering provider and include the denial rationale, appeals options per current state policy, and peer-to-peer consultation options. Notification of a denial is also mailed to the member. Authorization from eviCore does not guarantee claim payment. Services must be covered by the health plan, and the member must be eligible at the time studies are rendered.