



eviCore healthcare Radiology Program Frequently Asked Questions

Who is eviCore healthcare?

eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for Aetna Better Health Florida.

What is the relationship between Aetna Better Health Florida and eviCore healthcare?

Beginning February 27, 2017, eviCore will manage radiology services for Aetna Better Health Florida.

Which members will eviCore healthcare manage for the outpatient radiology services program?

eviCore will manage radiology services for Aetna Better Health Medicaid, CHIP and Florida Healthy Kids.

How can I initiate a prior authorization request?

The quickest, most efficient way to obtain prior authorization is through the 24/7 self-service web portal at www.evicore.com. Prior authorization can also be obtained via phone at 1-888-693-3211 or fax at 1-844-82aetna.

Is it possible for the physician to be both the referring and the rendering provider?

Yes. This is allowed under the program guidelines.

What are the hours of operation for the prior authorization department?

eviCore healthcare's prior authorization call center is available from 7:00 a.m. to 7:00 p.m. local time, Monday through Friday. The phone number is 1-888-693-3211. The web portal is available for access 24/7.

What information is needed in order to get approval for radiology services?

- Member's name, date of birth, plan name and plan ID number
- Ordering Physician's name, National Provider Identifier (NPI), Tax Identification Number (TIN), Fax number
- Place of service
- Rendering facility's name, NPI, TIN, street address, fax number
- Service being requested (CPT codes and diagnosis codes)
- All relevant clinical notes; imaging/X-ray reports, patient history, physical findings

How do providers check for the authorization status of a member?

You can check the authorization via the portal at www.evicore.com or via phone at 1-888-693-3211.



What is the format of the eviCore healthcare authorization number?

An authorization number is (1) one Alpha character followed by (9) nine numeric numbers, and then the CPT code of the procedure authorized. For example: A123456789.

How will members be notified of approvals and denials for radiology services?

Written denial notices will be sent to the member as well as the requesting provider(s).

How will the rendering facility be notified of medical necessity determination?

The facility will not receive written notification of the medical necessity determination.

If a prior authorization is not approved, what follow-up information will the referring provider receive?

The referring provider will receive a denial letter that contains the reason for denial as well as Reconsideration and Appeal rights and processes. In cases where two studies are requested in a single case (e.g. CT Abdomen and CT Pelvis) and one is approved and the other is denied, the Program will provide one authorization decision notification letter that contains both the approval and denial information.

How long is an authorization valid?

Authorizations are valid for 60 calendar days. If the service is not performed within 60 days from the issuance of the authorization, please contact eviCore healthcare.

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

The most efficient way to obtain preauthorization for urgent requests is via phone, as an immediate approval can be obtained. Please contact eviCore healthcare directly at 1-888-693-3211, indicating the request is urgent. For outpatient radiology services in urgent situations only, treatment may be started without preauthorization, however the treatment must meet urgent/emergent guidelines.

Does eviCore approve cases retrospectively if no authorization was obtained before the admission?

Retrospective requests must be initiated by phone within 3 business days following the date of service. In many instances, the services must have been urgent and medically necessary. Please have all clinical information relevant to your request available when you contact eviCore healthcare.

What are the parameters of an appeals request?

eviCore does not manage 1st level appeals. All appeals should be submitted to Aetna Better Health Florida.