

# Preauthorization of Genomic Lab Management for Blue Cross and Blue Shield Medicare Program

## Provider Orientation



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# Corporate Overview

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**100M Members  
Managed Nationwide**

## **9 Comprehensive Solutions**



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



4k+ employees including  
**1k clinicians**

Engaging with 570k+ providers

### **Headquartered in Bluffton, SC Offices across the US including:**

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

# 9 | Comprehensive Solutions



Radiology



Cardiology



Musculoskeletal



Sleep Management



Medical Oncology



Specialty Drug



Radiation Therapy



Lab Management



Post-Acute Care

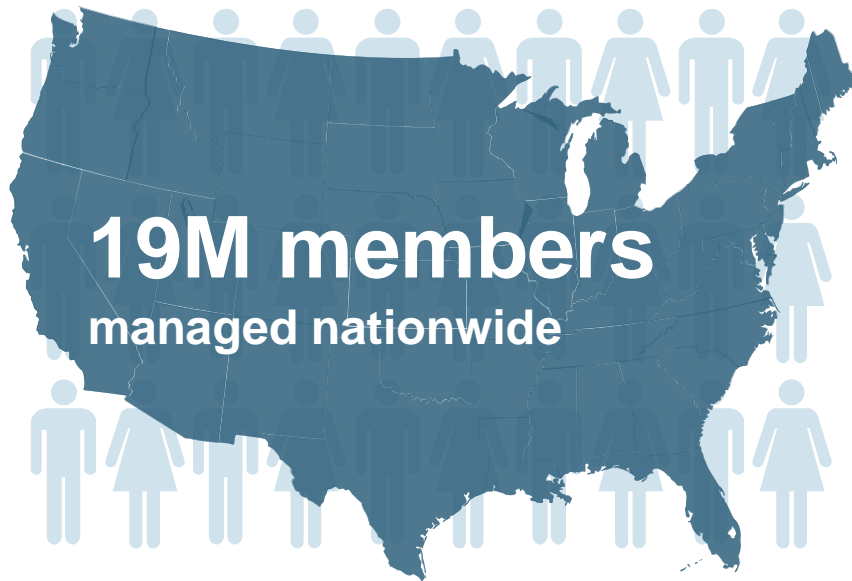


# Lab Management Solution- Our Experience

**14+ Regional**  
and National Clients

**100k+**  
Cases built per day

**9 Years**  
Managing Lab Management Services



## Members Managed

- 13M Commercial Memberships
- 500K Medicare Memberships
- 5.5M Medicaid Memberships



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# Our Clinical Approach

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# Organic Evidence-Based Guidelines

## The foundation of our solutions:



Dedicated  
Molecular  
Genomic  
Guidelines



Contributions  
from a panel  
of community  
physicians



Experts  
associated  
with academic  
institutions



Current  
clinical  
literature

## Aligned with National Societies

- National Comprehensive Cancer Network
- National Society of Genetic Counselors
- American College of Obstetrics and Gynecology
- American College of Medical Genetics and Genomics
- American Society of Human Genetics
- American Society of Clinical Oncology
- College of American Pathologists
- American Gastroenterological Association
- Society for Maternal Fetal Medicine
- Association for Molecular Pathology
- American College of Cardiology
- American College of Chest Physicians
- American Academy of Neurology
- American Society of Colon and Rectal Surgeons
- American Heart Association
- American Academy of Pediatrics
- American Society for Reproductive Medicine
- American College of Gastroenterology
- American College of Cardiology Foundation
- National Institutes of Health

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# Service Model

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# Client Provider Operations

The Client Provider Operations team is responsible for high-level service delivery to our health plan clients as well as ordering and rendering providers nationwide

## Client Provider Representatives



Client Provider Representatives are cross-trained to investigate escalated provider and health plan issues.

## Client Service Managers



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.

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# **Preauthorization Program for Blue Cross and Blue Shield Medicare Program**

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# Program Overview

eviCore began accepting requests on May 22, 2017 for dates of service June 1, 2017 and beyond.

**Preauthorization applies to services that are:**

- Outpatient
- Elective / Non-emergent

**eviCore Preauthorization does not apply to services that are performed in:**

- Emergency room
- Inpatient
- 23-hour observation

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

# Applicable Membership

Authorization is required for Blue Cross and Blue Shield members enrolled in the following programs:

- **Blue Cross and Blue Shield of Illinois**
  - Medicare members
- **Blue Cross and Blue Shield of Montana**
  - Medicare members
- **Blue Cross and Blue Shield of New Mexico**
  - Medicare members
- **Blue Cross and Blue Shield of Oklahoma**
  - Medicare members
- **Blue Cross and Blue Shield of Texas**
  - Medicare members

## Preauthorization Required:

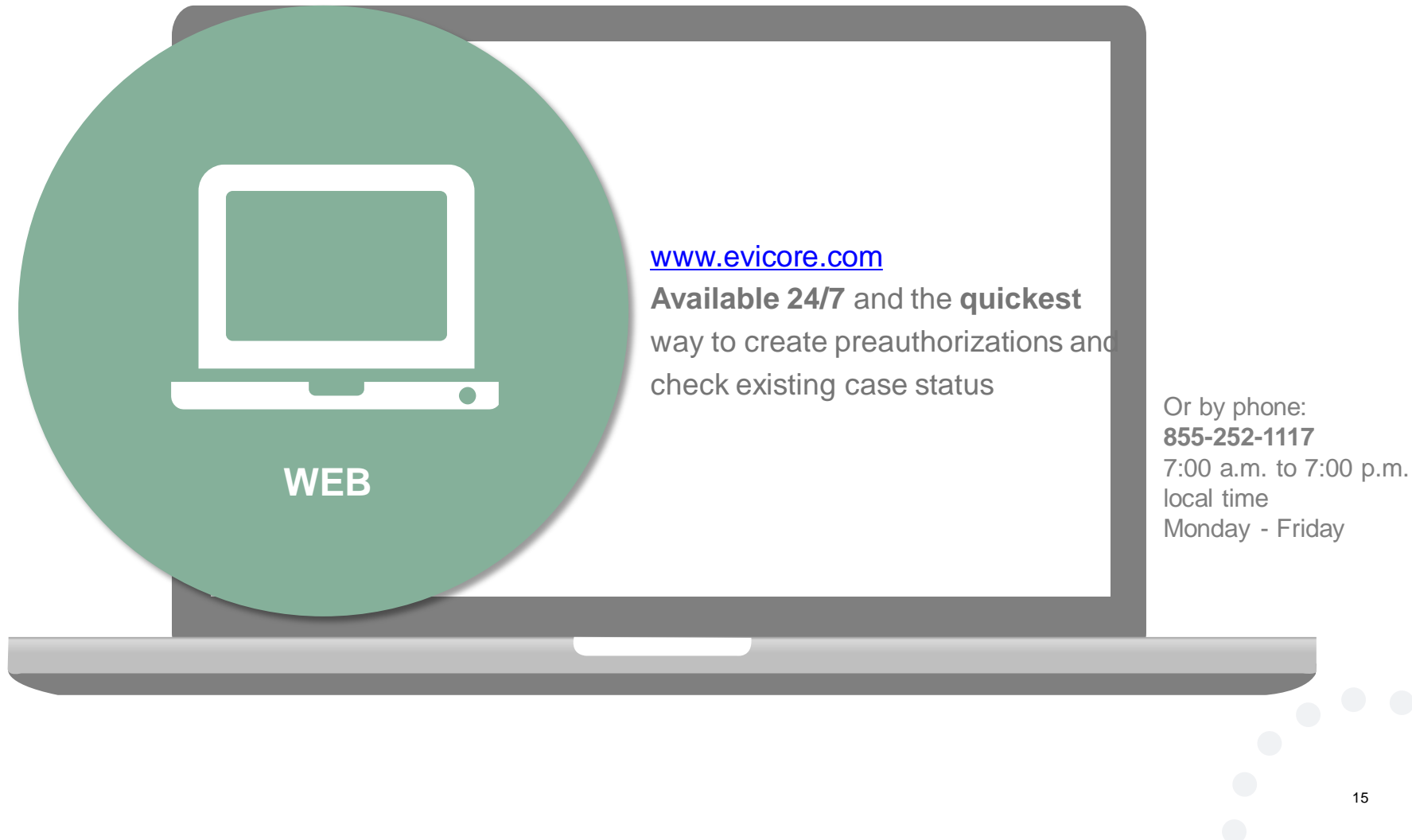
- Hereditary Cancer Screening
- Carrier Screening Tests
- Tumor Marker / Molecular profiling
- Hereditary Cardiac Disorders
- Cardiovascular Disease and Thrombosis Risk Variant Testing
- Pharmacogenomic Testing
- Neurologic Disorders
- Mitochondrial Disease Testing
- Intellectual Disability / Developmental Disorders

To find a list of CPT  
(Current Procedural Terminology)  
codes that require preauthorization  
through eviCore, please visit:

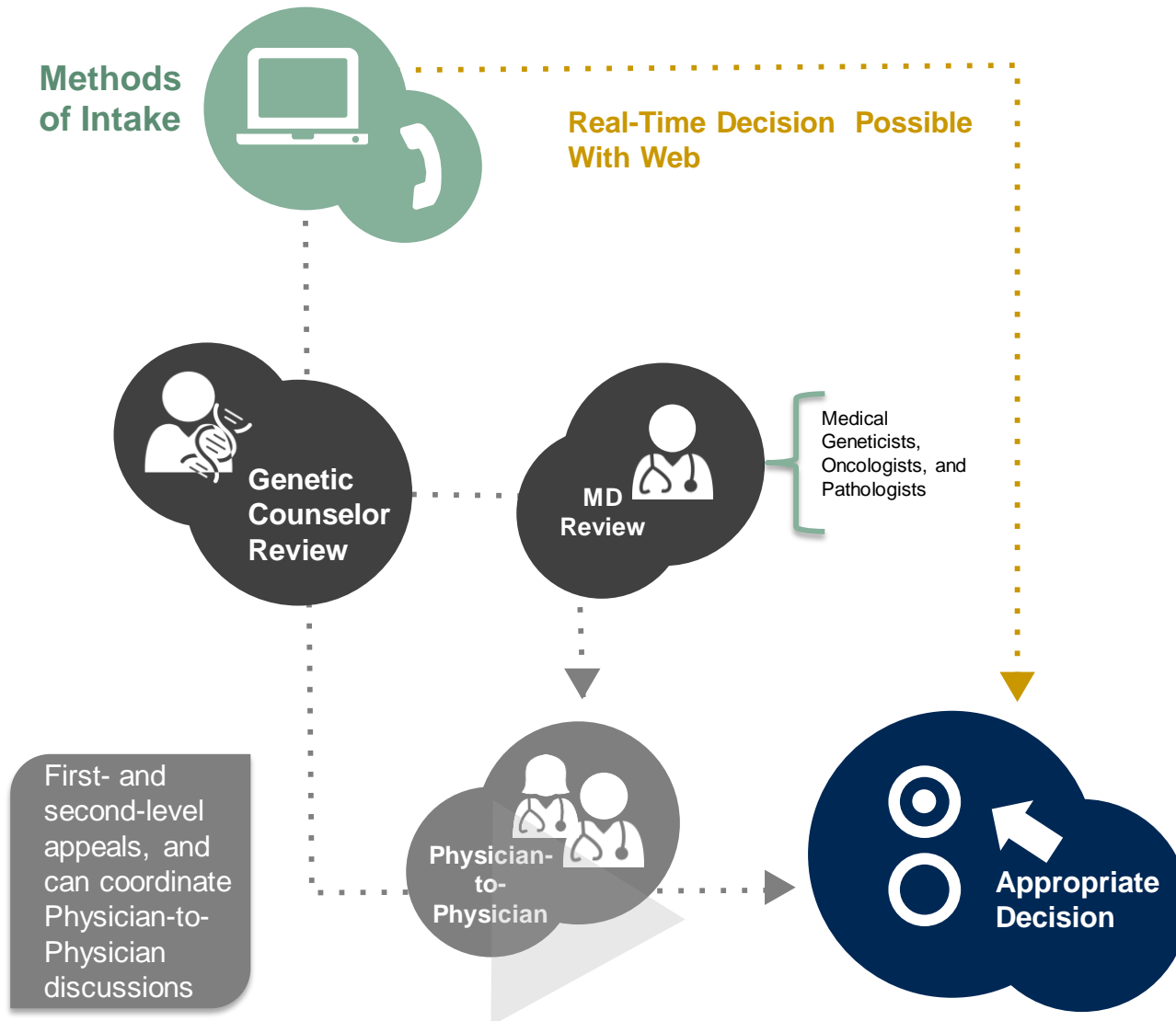
<https://www.evicore.com/healthplan/bcbs>

# Preauthorization Requests

## How to request preauthorization:

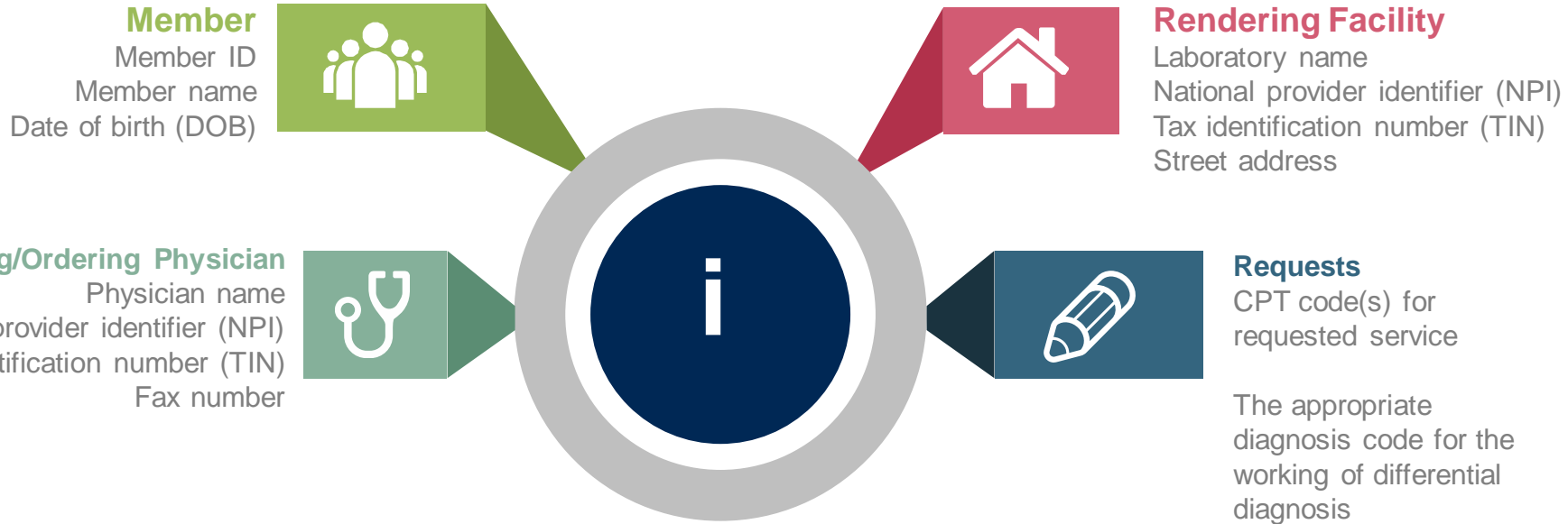


# Clinical Review Process – Easy for Providers and Staff





# Needed Information



*If clinical information is needed, please be able to supply:*

- Specimen collection date (if applicable)
- Type or Test Name (if known)
- Test Indication (Personal History of condition being tested, age at initial diagnosis, relevant signs and symptoms, if applicable)
- Relevant past test results
- Patient's ethnicity
- Relevant family history (Maternal or paternal relationship, medical history including ages at diagnosis, genetic testing)
- If there is a known familial mutation, what is the specific mutation?
- How will the test results be used in the patient's care?

# Preauthorization Outcomes

## ➤ Approved Requests:

- All requests are processed within 14 calendar days.
- Authorizations are typically good for 45 days from the date of determination.

## ➤ Delivery:

- Faxed to referring provider and rendering laboratory (verbal outreach for urgent requests).
- Mailed to the member (verbal outreach for urgent requests).
- Information can be printed on demand from the eviCore healthcare Web Portal.

## ➤ Denied Requests:

- Communication of denial determination
- Communication of the rationale for the denial
- How to request a Physician Review

## ➤ Delivery:

- Faxed to the referring provider and rendering laboratory (verbal outreach for urgent requests).
- Mailed to the member (verbal outreach for urgent requests).

## Preauthorization Outcomes – Medicare

### ➤ Pre-Decision Consultation

- If your case requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians or lab sites 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



## Authorization Appeals

- eviCore will manage first level authorization appeals.
- Authorization appeals must be made in writing within 120 calendar days; eviCore will respond within 30 calendar days.



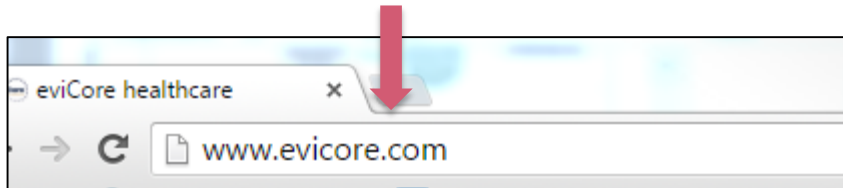
## Outpatient Urgent Tests:

- Contact eviCore by phone to request an expedited preauthorization review and provide clinical information.
- Urgent Cases will be reviewed within 72 hours of the request.

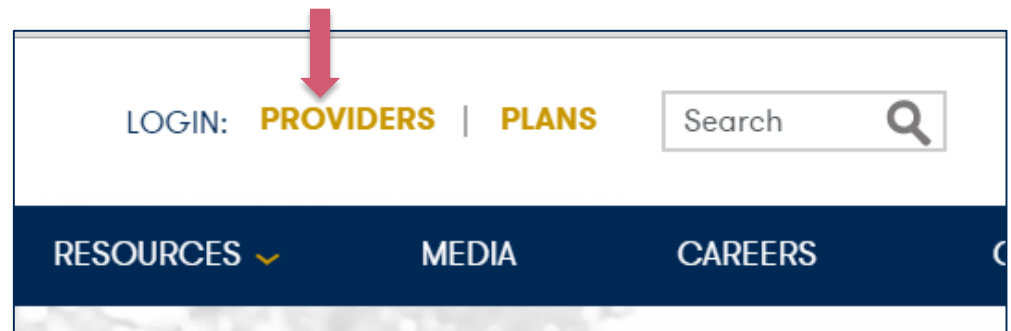
# Web Portal Services

# eviCore healthcare website

- Point web browser to evicore.com



- Click on the “Providers” link



- Login or Register

## Providers Delivering Medical Solutions That Benefit Everyone.

☐ Remember User ID

For log in problems: please try the email address that you registered with as your user name. If you do not remember your password, please click "Password?".

☐ I Agree to [HIPAA Disclosure!](#)

[Forgot UserName](#) [Password?](#) [Register](#)

This website is compatible with Internet Explorer 9, 10, 11, Mozilla Firefox and Google Chrome



# Creating An Account

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Solutions That Benefit **Everyone.**

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For log in problems: please try the email address that you registered with as your user name. If you do not remember your password, please click "Password?".

☐ I Agree to [HIPAA Disclosure!](#)

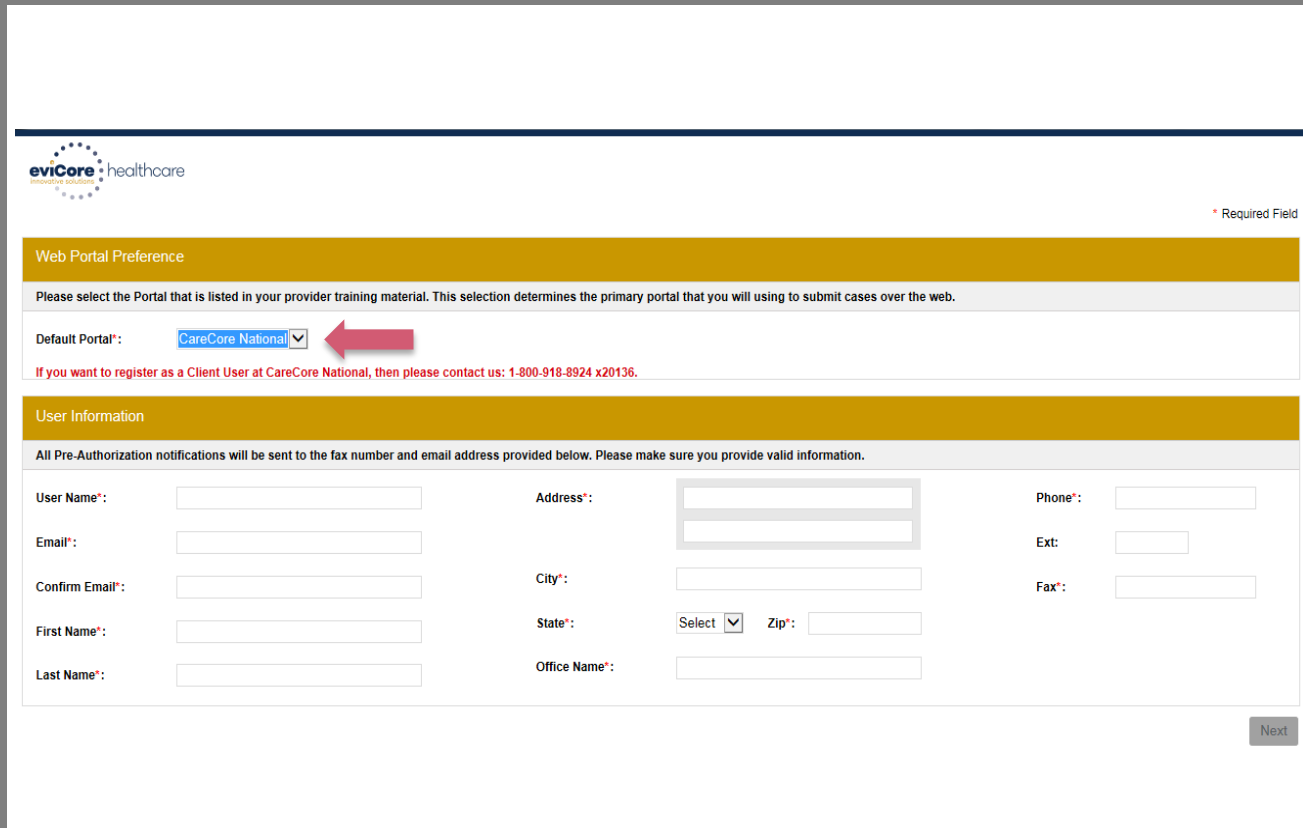
LOGIN

[Forgot UserName](#) [Password?](#) [Register](#)



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

# Creating An Account




The screenshot shows a web form for creating an account with eviCore healthcare. The form is divided into two main sections: 'Web Portal Preference' and 'User Information'. In the 'Web Portal Preference' section, there is a dropdown menu for 'Default Portal\*' with 'CareCore National' selected. A red arrow points to this dropdown. Below it, a red note states: 'If you want to register as a Client User at CareCore National, then please contact us: 1-800-918-8924 x20136.' The 'User Information' section contains various input fields for personal and contact details, with asterisks indicating required fields. A 'Next' button is located at the bottom right of the form.

**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"/> <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*:	<span>Select</span>  Zip*:	Fax*:	<input type="text"/>
First Name*:	<input type="text"/>	Office Name*:	<input type="text"/>		
Last Name*:	<input type="text"/>				

Next

➔ Select a **Default Portal**, and complete the registration form.



# 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\*: CareCore National

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				

BackSubmit Registration

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

# User Registration-Continued

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\*: Medsolutions

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### User Registration

UserName: MYoder

Email: evicorejedi1234@gmail.com

Account Type: Physician

First Name: Mallory

Last Name: Yoder

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### Provider Information

Physician FirstName: TEST Physician LastName: Yoder

State: TN Tax ID:

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Please read below to sign up as an appropriate user.  
Physician: An Individual Practitioner, A Medical Group Practice or an assistant  
Facility: Diagnostic Imaging Center, In-Office Provider (IOP), Hospital or Facility

#### 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)). The electronic access to and use of eviCore's web-based applications is subject to the terms and conditions of the Access Agreement.

☒ Accept Terms and Conditions \*

Submit Cancel

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

# User Registration-Continued

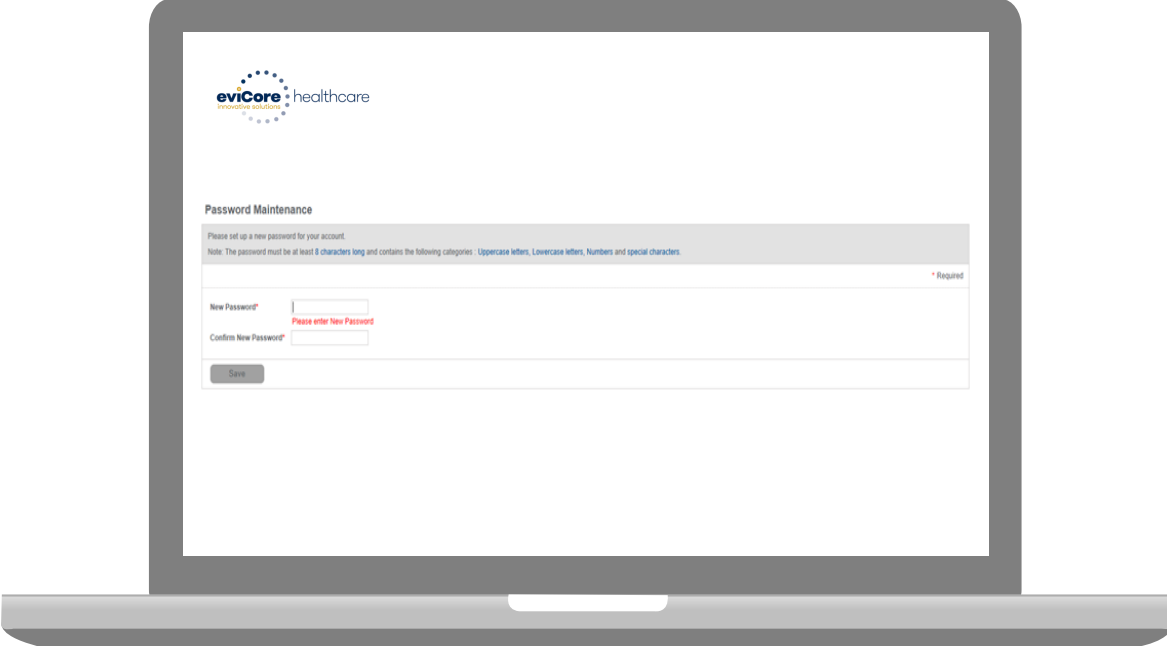


➤ You will receive a message on the screen confirming your registration is successful. You will be sent an email to create your password.

# Create a Password

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

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



The screenshot shows a laptop displaying the 'eviCore healthcare' logo at the top. Below the logo is the 'Password Maintenance' section. It contains a message: 'Please set up a new password for your account.' followed by a note: 'Note: The password must be at least 8 characters long and contain the following categories: Uppercase letters, Lowercase letters, Numbers and special characters.' There are two input fields: 'New Password\*' and 'Confirm New Password\*'. The 'New Password\*' field has a red error message 'Please enter New Password' below it. A 'Save' button is at the bottom of the form.

# Account Log-In

**Providers** Delivering Medical  
Solutions That Benefit **Everyone.**

Mallory1897

••••••••

☐ Remember User ID

For log in problems: please try the email address that you registered with as your user name. If you do not remember your password, please click "Password?".

☒ I Agree to [HIPAA Disclosure!](#)

LOGIN

[Forgot UserName](#) | [Password?](#) | [Register](#)



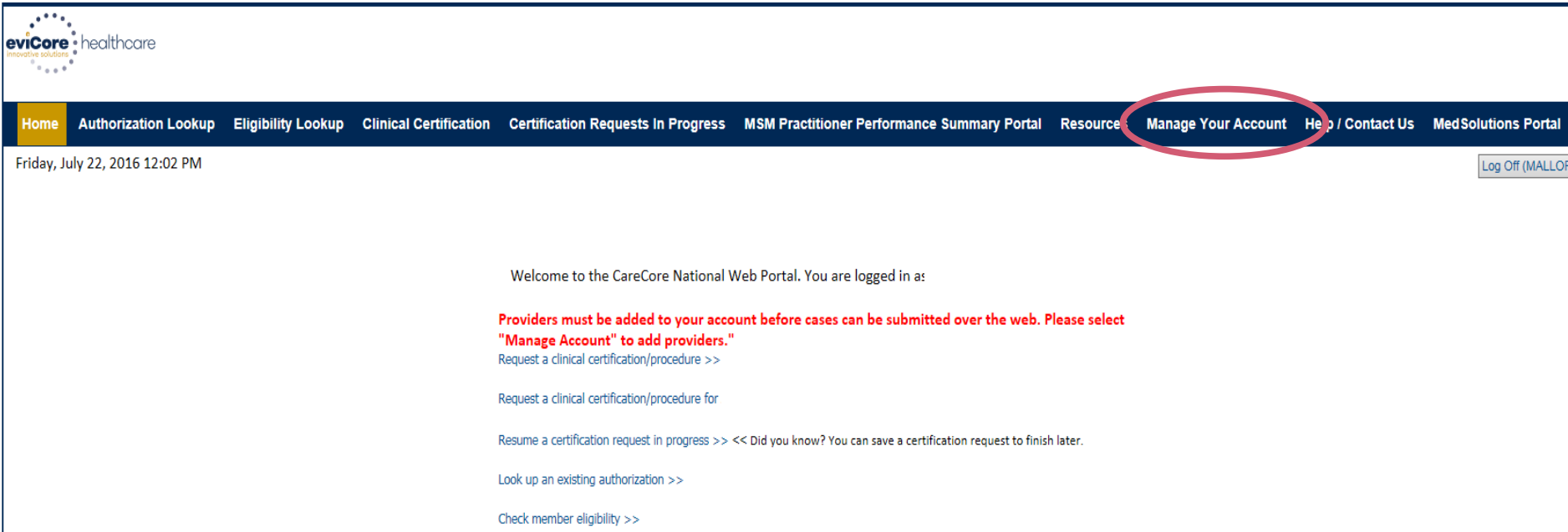
To log-in to your account, enter your **User ID** and **Password**. Agree to the HIPAA Disclosure, and click "**Login.**"

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# Account Overview

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# Welcome Screen



eviCore healthcare  
Innovative solutions

Home Authorization Lookup Eligibility Lookup Clinical Certification Certification Requests In Progress MSM Practitioner Performance Summary Portal Resource **Manage Your Account** Help / Contact Us MedSolutions Portal

Friday, July 22, 2016 12:02 PM [Log Off \(MALLORCA\)](#)

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

**Providers must be added to your account before cases can be submitted over the web. Please select "Manage Account" to add providers.**

[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.](#)

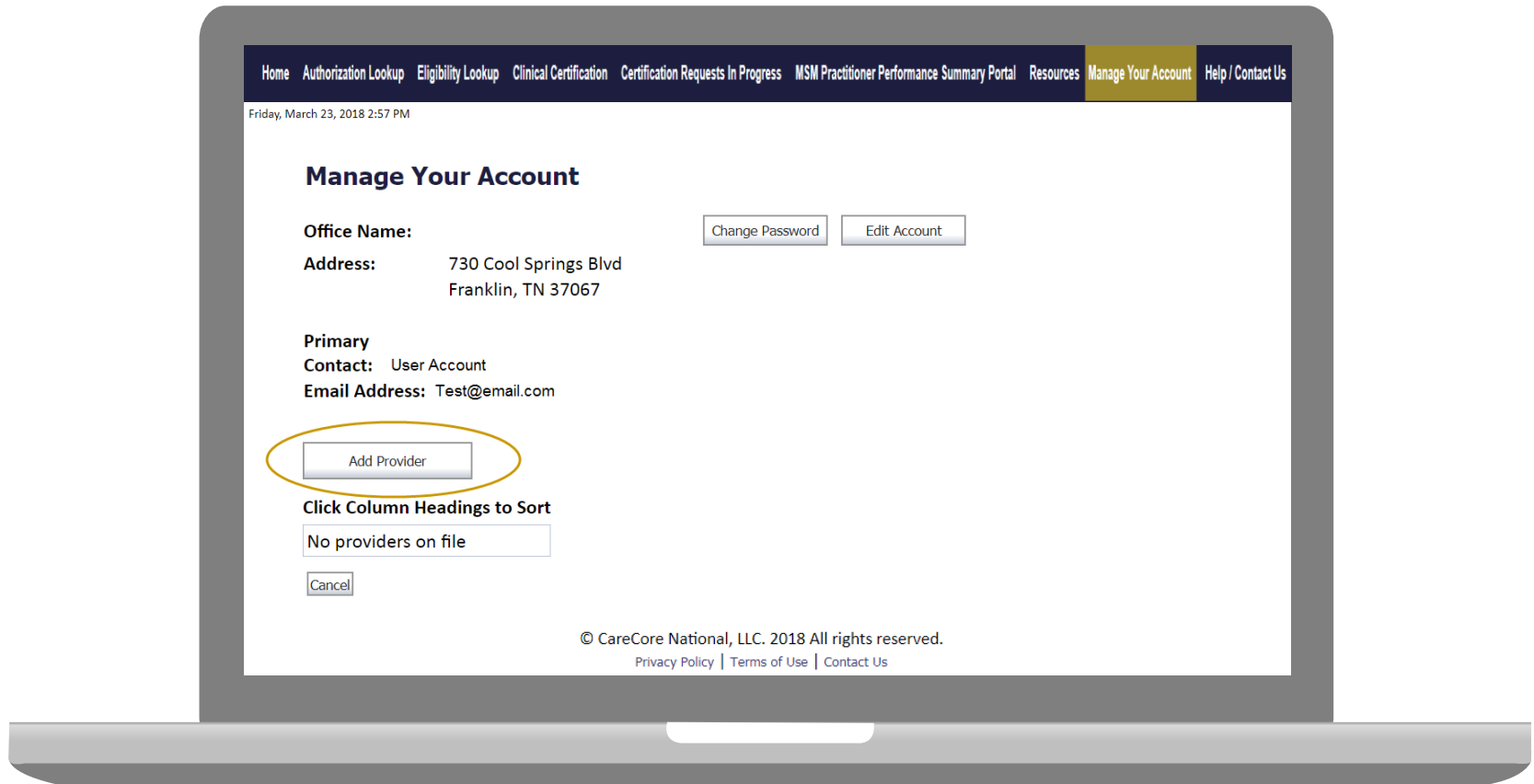
[Look up an existing authorization >>](#)

[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.

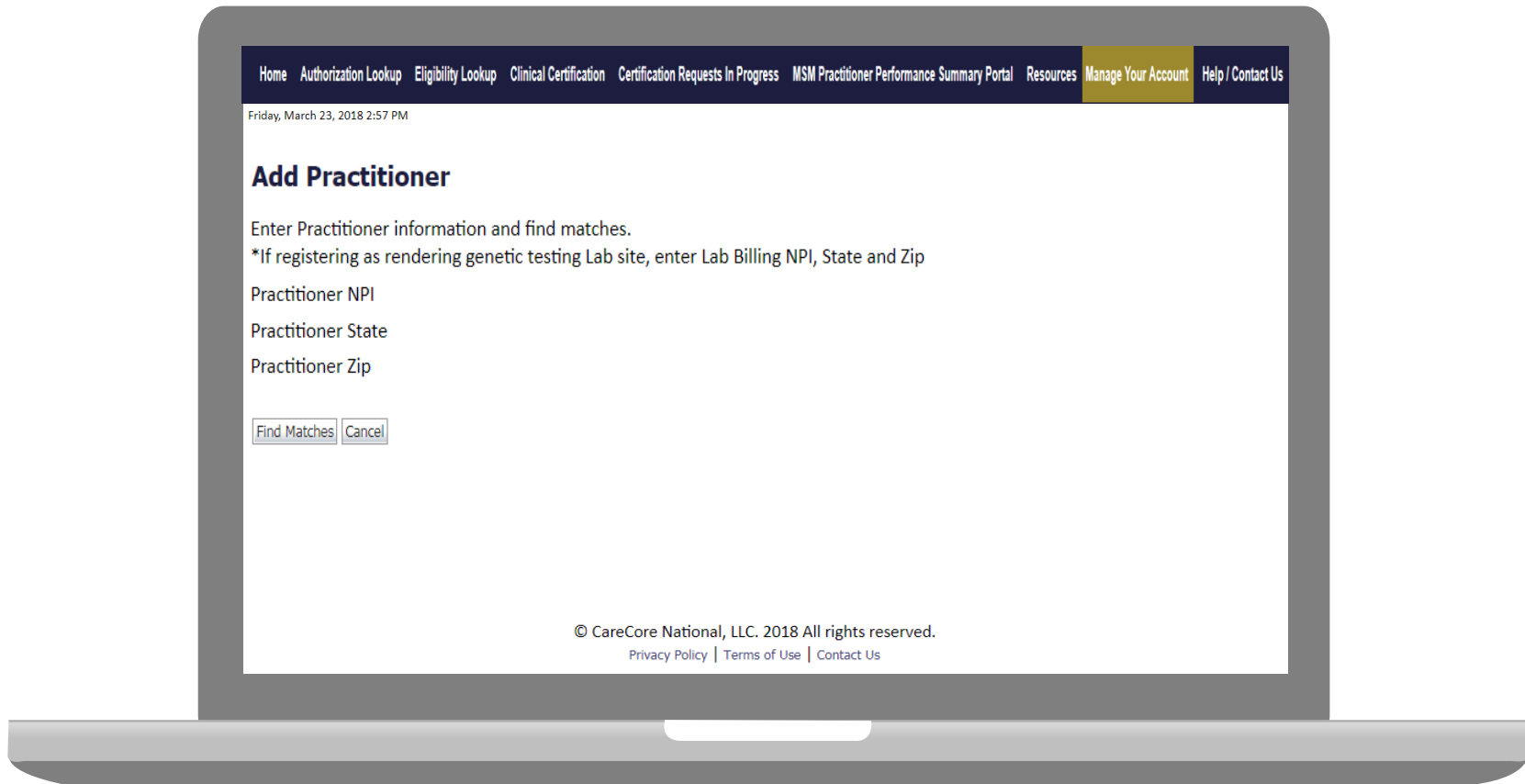
# Add Practitioners



Click the “**Add Provider**” button.



# Add Practitioners



The screenshot shows a web application interface for adding practitioners. At the top is a dark blue navigation bar with links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account (highlighted in yellow), and Help / Contact Us. Below the navigation bar, the page title is 'Add Practitioner'. The main content area contains instructions: 'Enter Practitioner information and find matches.' and '\*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip'. There are three input fields labeled 'Practitioner NPI', 'Practitioner State', and 'Practitioner Zip'. Below these fields are two buttons: 'Find Matches' and 'Cancel'. At the bottom of the page, there is a copyright notice: '© CareCore National, LLC. 2018 All rights reserved.' and links for 'Privacy Policy', 'Terms of Use', and 'Contact Us'.

Home Authorization Lookup Eligibility Lookup Clinical Certification Certification Requests In Progress MSM Practitioner Performance Summary Portal Resources **Manage Your Account** Help / Contact Us

Friday, March 23, 2018 2:57 PM

## Add Practitioner

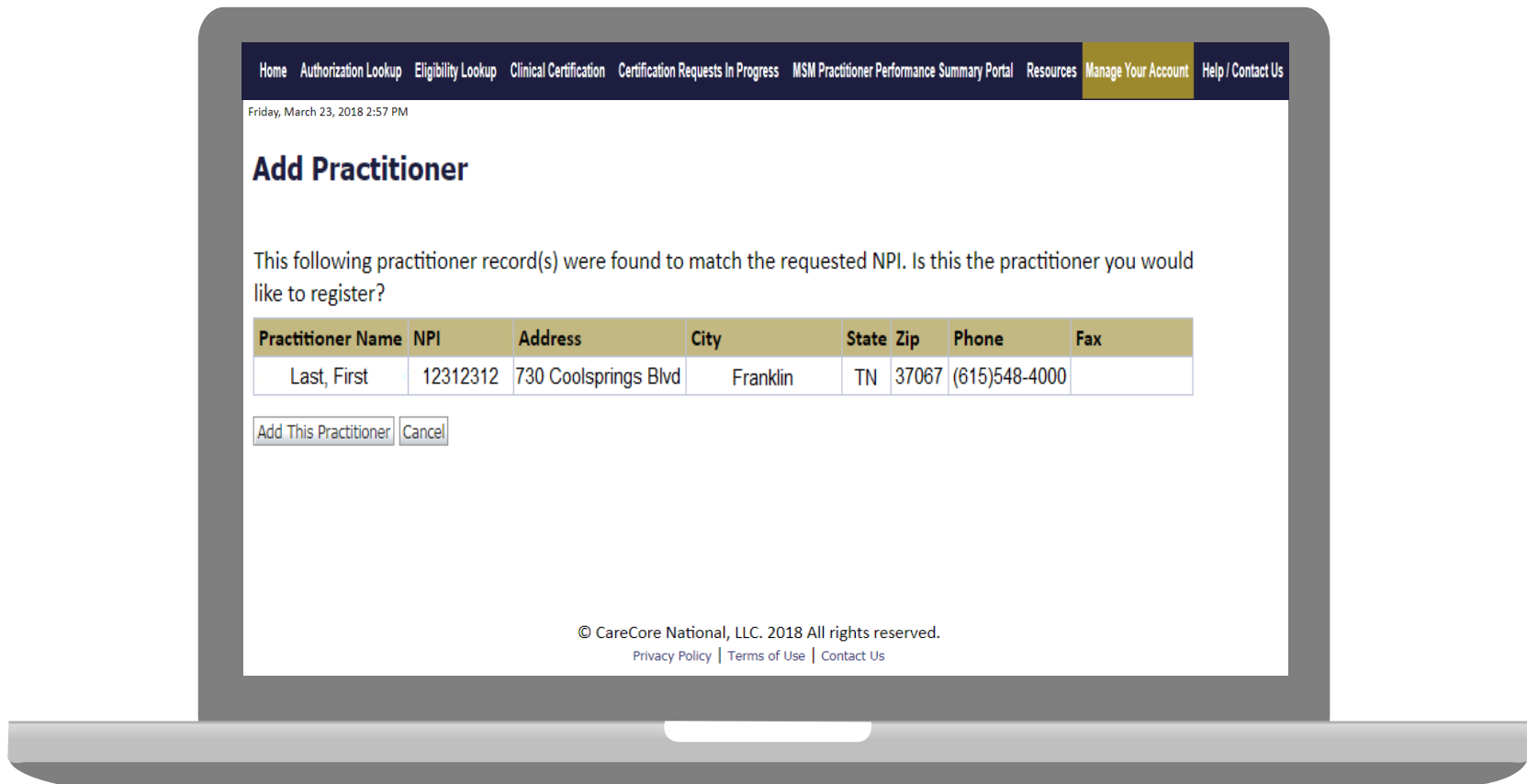
Enter Practitioner information and find matches.  
\*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip

Practitioner NPI  
Practitioner State  
Practitioner Zip

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[Privacy Policy](#) | [Terms of Use](#) | [Contact Us](#)

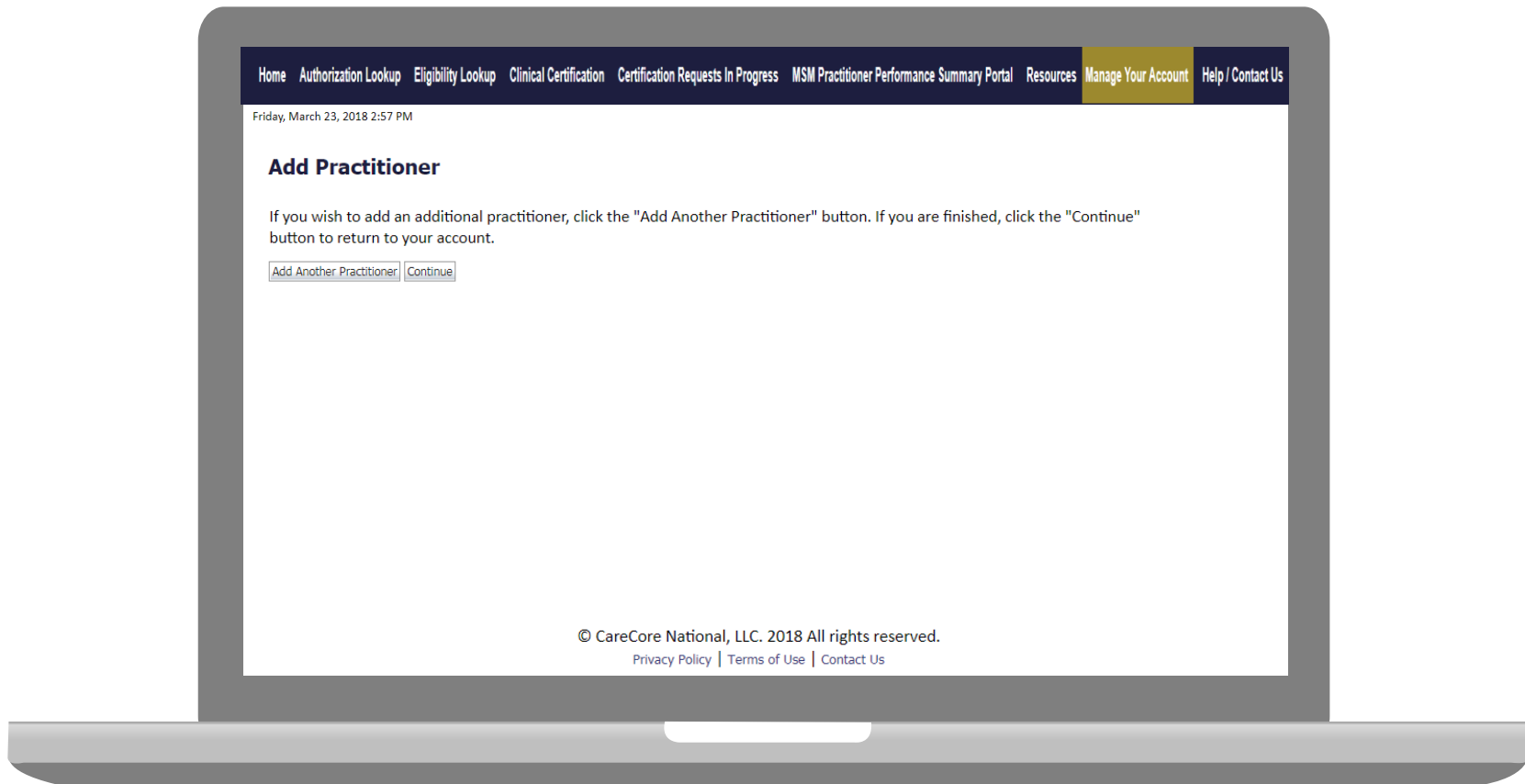
Enter the **Provider's NPI**, **State**, and **Zip Code** to search for the provider record to add to your account. You are able to add multiple Providers to your account.

# Adding Practitioners

A screenshot of a web application interface for adding practitioners. The interface is displayed on a laptop screen. At the top, there is a dark blue navigation bar with white text links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account (highlighted in yellow), and Help / Contact Us. Below the navigation bar, the date and time 'Friday, March 23, 2018 2:57 PM' are shown. The main heading is 'Add Practitioner'. Below this, a text prompt asks: 'This following practitioner record(s) were found to match the requested NPI. Is this the practitioner you would like to register?'. A table with 8 columns (Practitioner Name, NPI, Address, City, State, Zip, Phone, Fax) contains one row of data. Below the table are two buttons: 'Add This Practitioner' and 'Cancel'. At the bottom, there is a copyright notice: '© CareCore National, LLC. 2018 All rights reserved.' and links for 'Privacy Policy', 'Terms of Use', and 'Contact Us'.

Select the matching record based upon your search criteria

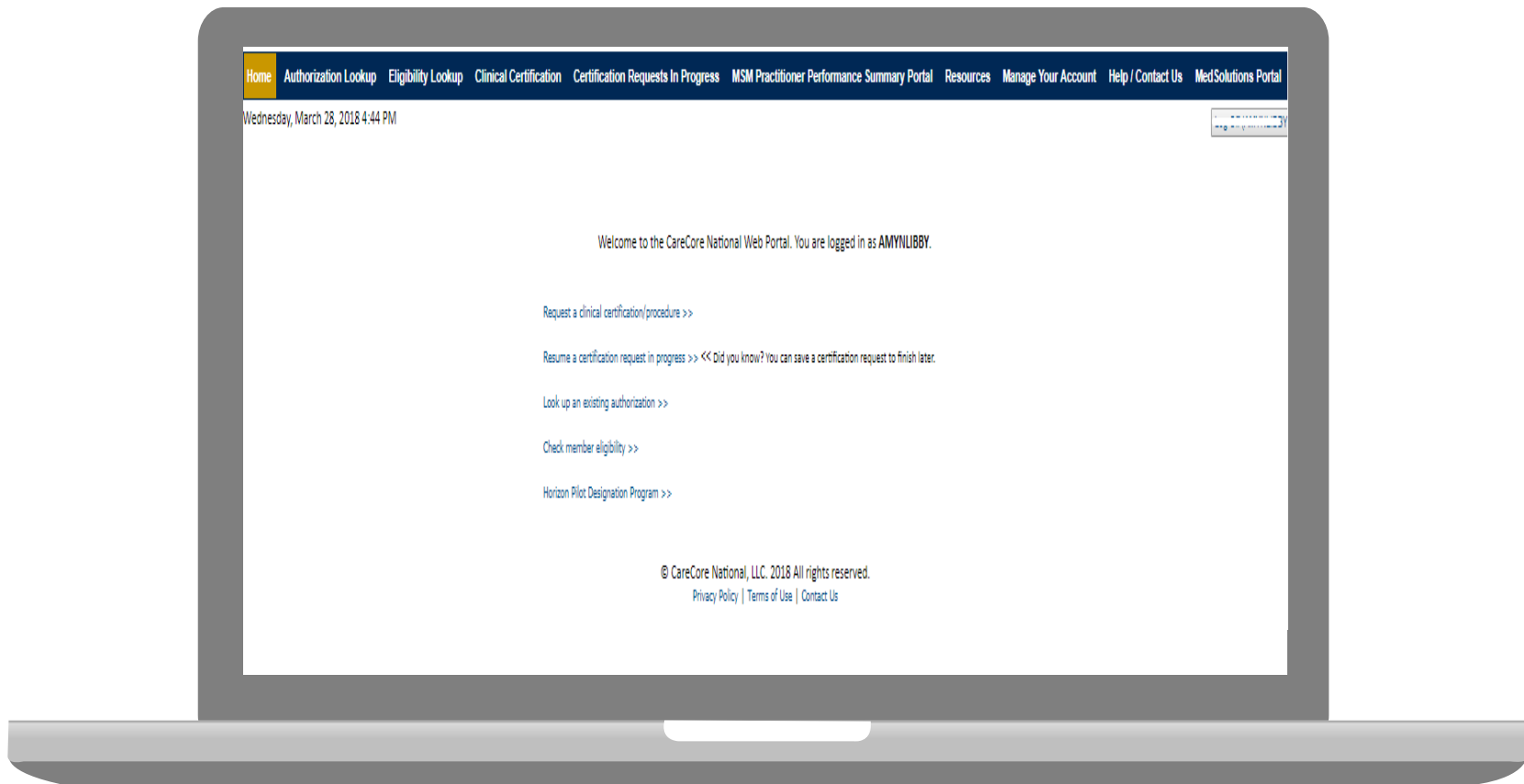
# Manage Your Account



- 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.

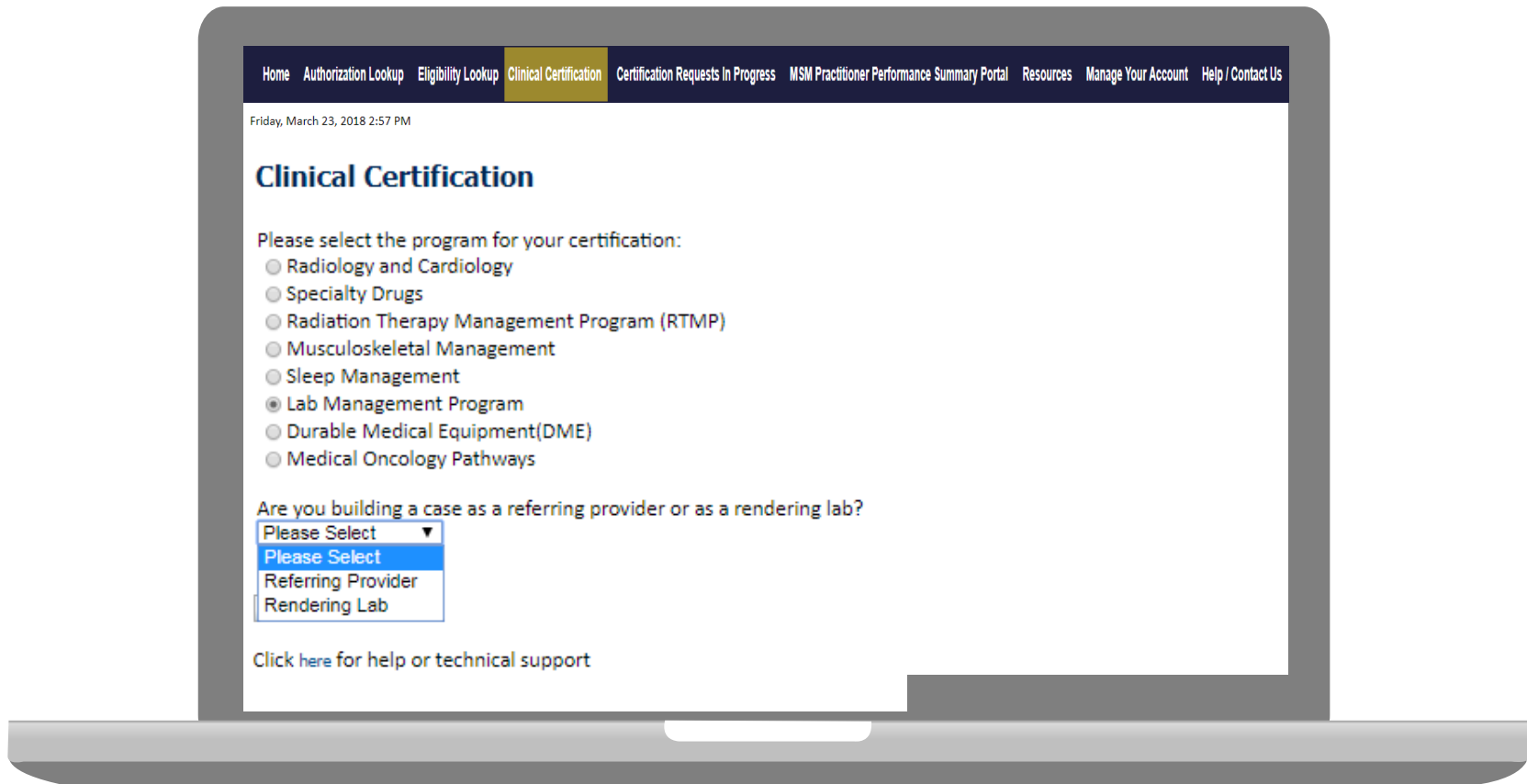
# Case Initiation

# Initiating A Case



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

# Select Program



The screenshot shows a web application interface for selecting a certification program. At the top is a dark blue navigation bar with white text links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted in yellow), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. Below the navigation bar, the date and time 'Friday, March 23, 2018 2:57 PM' are displayed. The main heading is 'Clinical Certification'. Below this, a prompt asks the user to 'Please select the program for your certification:'. A list of radio button options follows: Radiology and Cardiology, Specialty Drugs, Radiation Therapy Management Program (RTMP), Musculoskeletal Management, Sleep Management, Lab Management Program (selected with a blue dot), Durable Medical Equipment(DME), and Medical Oncology Pathways. Below the list, a question asks 'Are you building a case as a referring provider or as a rendering lab?'. A dropdown menu is open, showing 'Please Select' at the top, followed by 'Please Select' (highlighted in blue), 'Referring Provider', and 'Rendering Lab'. At the bottom, there is a link that says 'Click [here](#) for help or technical support'.

Home Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Practitioner Performance Summary Portal Resources Manage Your Account Help / Contact Us

Friday, March 23, 2018 2:57 PM

## Clinical Certification

Please select the program for your certification:

- ☐ Radiology and Cardiology
- ☐ Specialty Drugs
- ☐ Radiation Therapy Management Program (RTMP)
- ☐ Musculoskeletal Management
- ☐ Sleep Management
- ☒ Lab Management Program
- ☐ Durable Medical Equipment(DME)
- ☐ Medical Oncology Pathways

Are you building a case as a referring provider or as a rendering lab?

Please Select ▼

Please Select

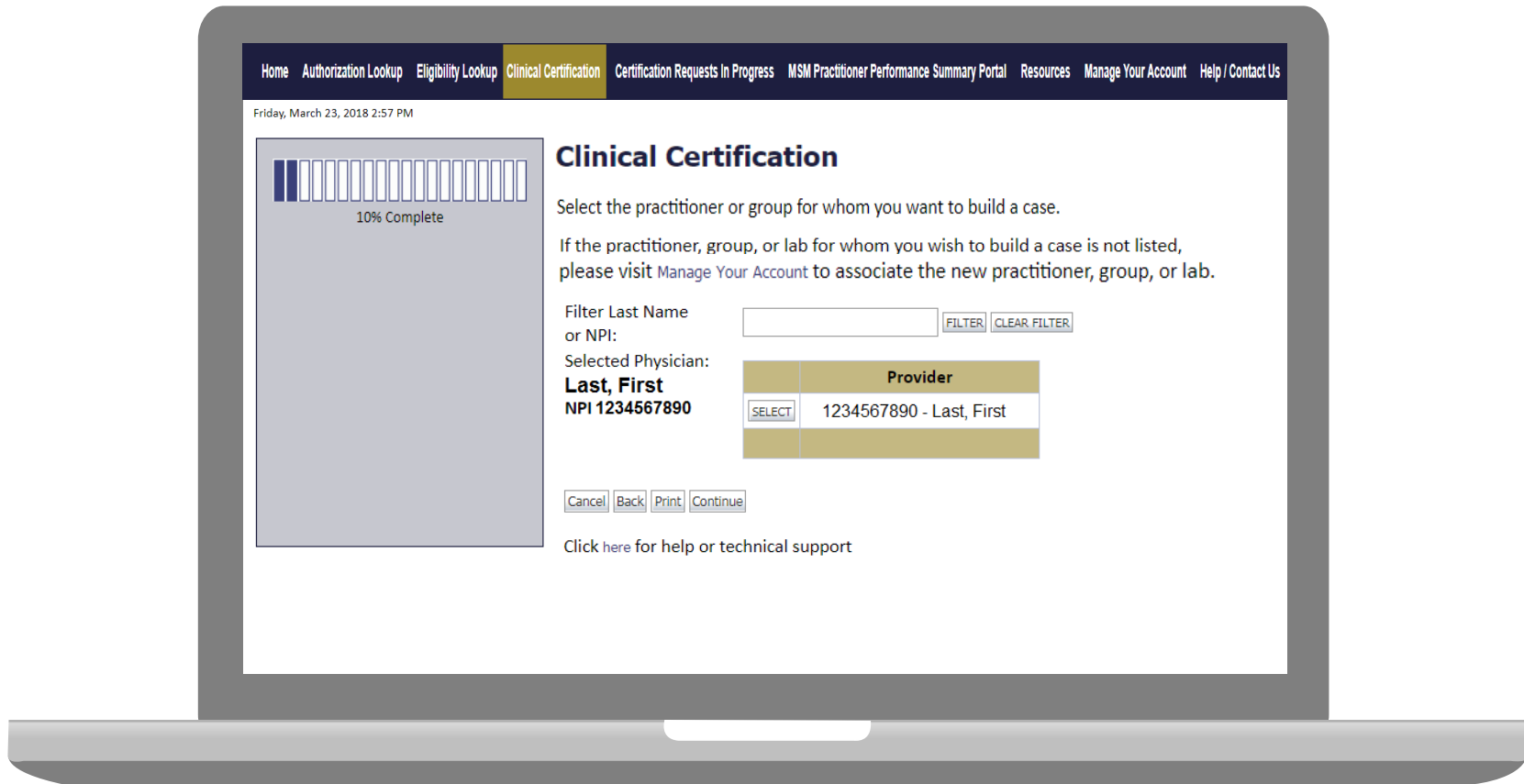
Referring Provider

Rendering Lab

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

Select the **Program** for your certification.

# Submitting as Provider- MD Search



The screenshot shows a web application interface for 'Clinical Certification'. The top navigation bar includes links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. Below the navigation bar, the date and time 'Friday, March 23, 2018 2:57 PM' are displayed. On the left, a progress bar shows '10% Complete'. The main content area is titled 'Clinical Certification' and contains instructions: 'Select the practitioner or group for whom you want to build a case.' and '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.' Below this, there is a search section with a 'Filter Last Name or NPI:' label, a text input field, and 'FILTER' and 'CLEAR FILTER' buttons. A 'Selected Physician:' section shows 'Last, First' and 'NPI 1234567890'. To the right of this is a table with a header 'Provider' and a row with a 'SELECT' button and the text '1234567890 - Last, First'. At the bottom of the search section are 'Cancel', 'Back', 'Print', and 'Continue' buttons. A link 'Click [here](#) for help or technical support' is located at the bottom of the main content area.

Home Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Practitioner Performance Summary Portal Resources Manage Your Account Help / Contact Us

Friday, March 23, 2018 2:57 PM

**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:  [FILTER](#) [CLEAR FILTER](#)

Selected Physician:

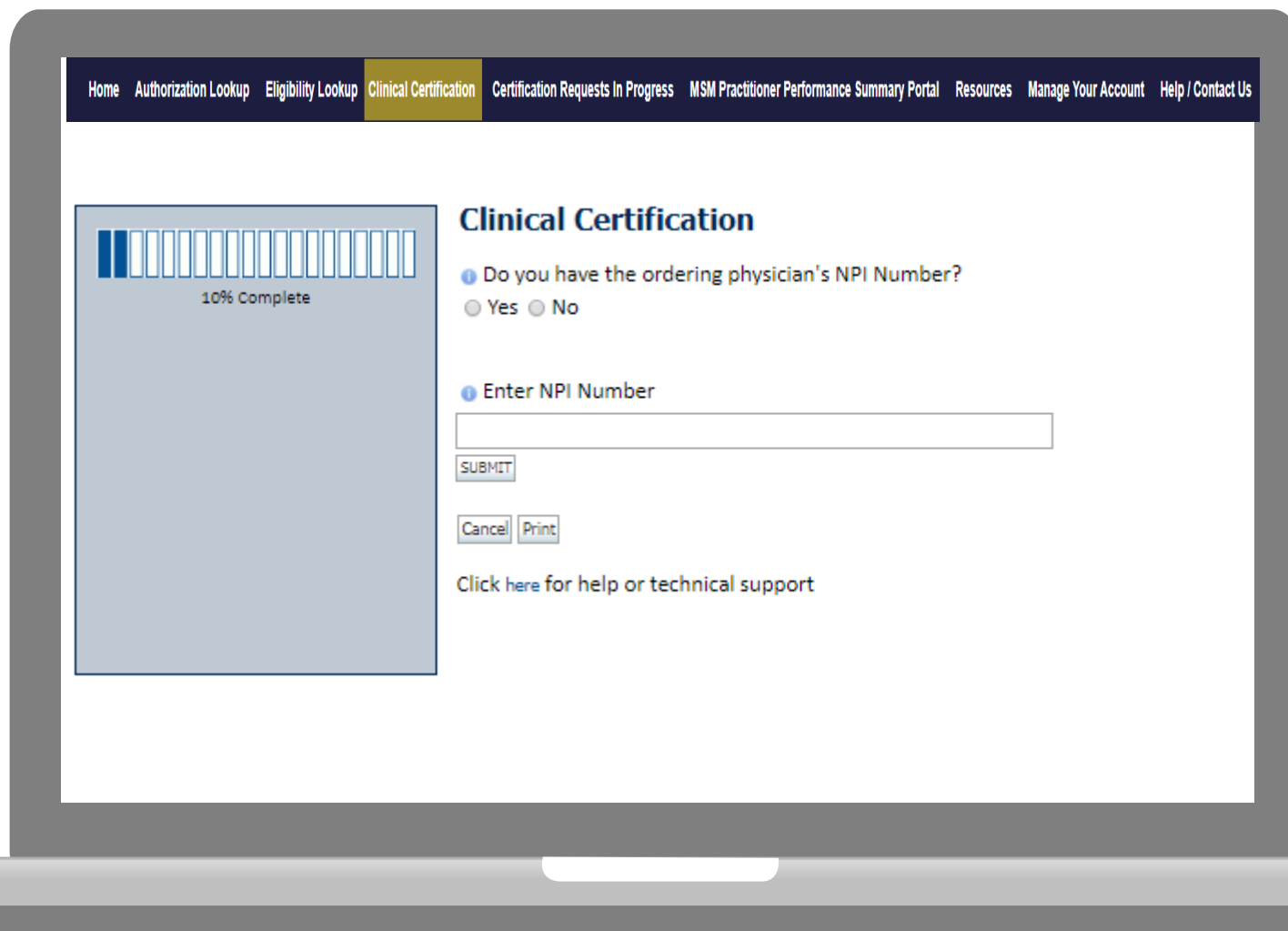
Provider	
<a href="#">SELECT</a>	1234567890 - Last, First

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

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

Select the **Practitioner/Group** for whom you want to build a case.

# Submitting as Rendering Lab- MD Search



The screenshot shows a web application interface for 'Clinical Certification'. At the top is a dark navigation bar with links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted in yellow), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. The main content area has a title 'Clinical Certification' and a progress indicator on the left showing 10% completion (2 out of 20 bars filled). The form contains two questions: 'Do you have the ordering physician's NPI Number?' with 'Yes' and 'No' radio buttons, and 'Enter NPI Number' with a text input field. Below the input field are 'SUBMIT', 'Cancel', and 'Print' buttons. A link for help or technical support is at the bottom.

Home Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Practitioner Performance Summary Portal Resources Manage Your Account Help / Contact Us

**Clinical Certification**

10% Complete

1 Do you have the ordering physician's NPI Number?  
☐ Yes ☐ No

2 Enter NPI Number

SUBMIT

Cancel Print

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

➤ The **Ordering Provider NPI** must be entered to build a case online.



# Select Health Plan

The screenshot displays a web application interface for 'Clinical Certification'. At the top, a navigation bar includes links for Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. Below the navigation bar, the date and time 'Friday, March 23, 2018 2:57 PM' are shown. On the left side, there is a progress indicator consisting of 10 vertical bars, with the first two filled, and the text '20% Complete' below it. The main content area is titled 'Clinical Certification' and contains the following text: '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!'. Below this, it says 'You selected: \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_ , \_ \_ \_ \_ \_'. The next instruction is '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.' Below this instruction is a dropdown menu labeled 'Please Select a Health Plan'. At the bottom of the form, there are four buttons: 'Cancel', 'Back', 'Print', and 'Continue'. Finally, there is a link that says '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.

# Contact Information

Home Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests in Progress MSM Practitioner Performance Summary Portal Resources Manage Your Account Help / Contact Us

Friday, March 23, 2018 2:57 PM [Log Off \(INTGTEST\)](#)

### Clinical Certification

30% Complete

Provider and NPI

Provider's Name  [?]

Who to Contact  [?]

Fax  [?]

Phone  [?]

Ext.  [?]

Cell Phone

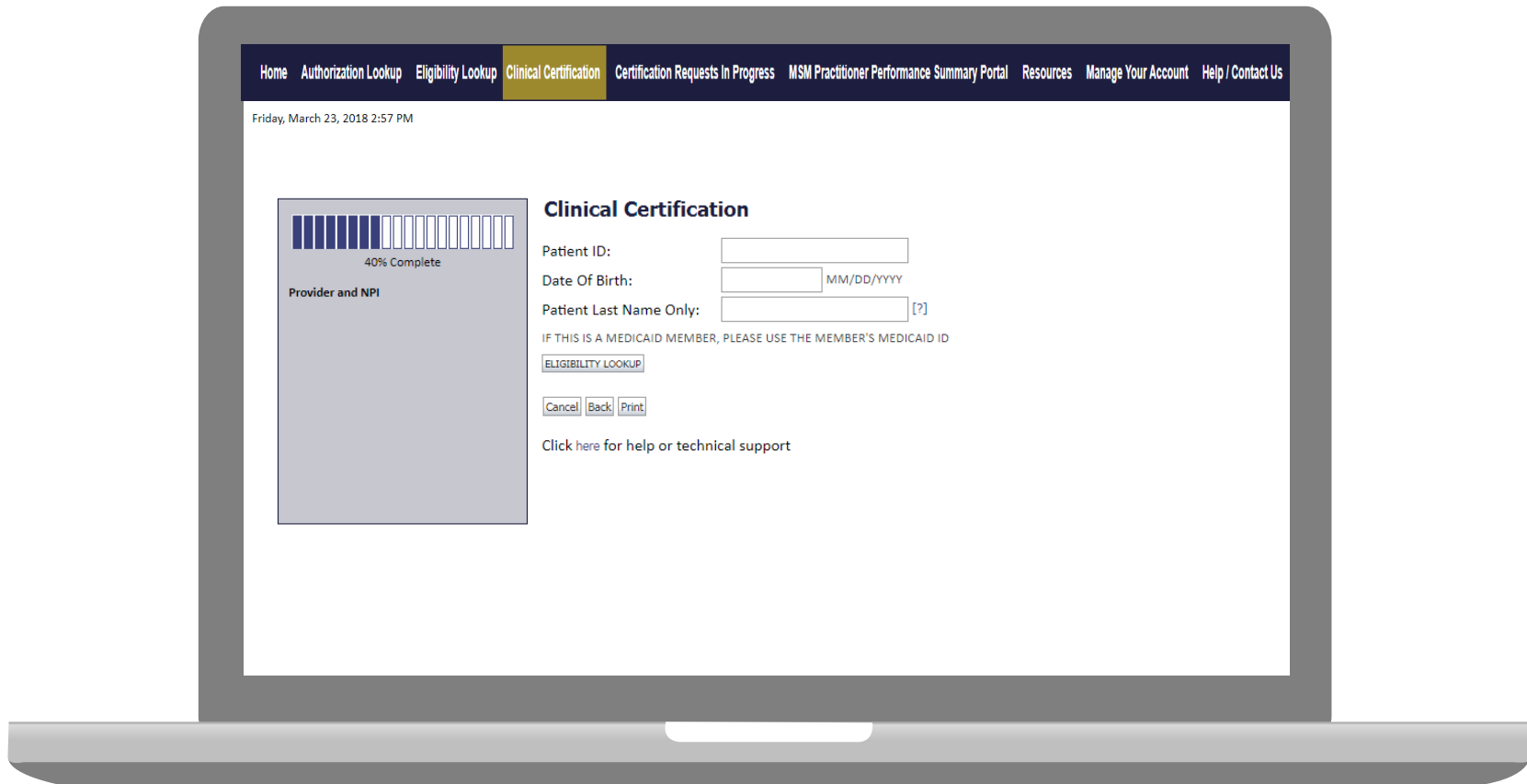
Email

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

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

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

# Member Information



The screenshot shows a web application interface on a laptop screen. The top navigation bar is dark blue with white text links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted in yellow), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. Below the navigation bar, the date and time 'Friday, March 23, 2018 2:57 PM' are displayed. The main content area is titled 'Clinical Certification'. On the left, there is a progress bar with 15 segments, 6 of which are filled with blue, indicating '40% Complete'. Below the progress bar is a section labeled 'Provider and NPI' with a large, empty light gray box. To the right of the progress bar, there are three input fields: 'Patient ID:' with a text box, 'Date Of Birth:' with a text box and a 'MM/DD/YYYY' label, and 'Patient Last Name Only:' with a text box and a '[?]' label. Below these fields is a note: 'IF THIS IS A MEDICAID MEMBER, PLEASE USE THE MEMBER'S MEDICAID ID'. Underneath the note is a button labeled 'ELIGIBILITY LOOKUP'. At the bottom of the form area are three buttons: 'Cancel', 'Back', and 'Print'. Below the buttons is a link: '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

### Lab Management Program Procedures

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

LABTST

MOLECULAR GENETIC TEST

### Diagnosis

Select a Diagnosis Code (Lookup by Code or Description)

LOOKUP

Trouble selecting diagnosis code? Please follow [these steps](#)

Cancel

Back

Print

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

# Verify Service Selection



# Submitting as Referring MD- Site Selection

The screenshot displays a web application interface for Clinical Certification. The top navigation bar includes links for Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, and Help / Contact Us. The date and time are shown as Friday, March 23, 2018 2:57 PM.

The main content area is titled "Clinical Certification" and features a "Specific Site Search" section. This section includes instructions: "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."

The search fields are:

- NPI: 1234567890
- Zip Code: [empty]
- Site Name: [empty]
- TIN: [empty]
- City: [empty]

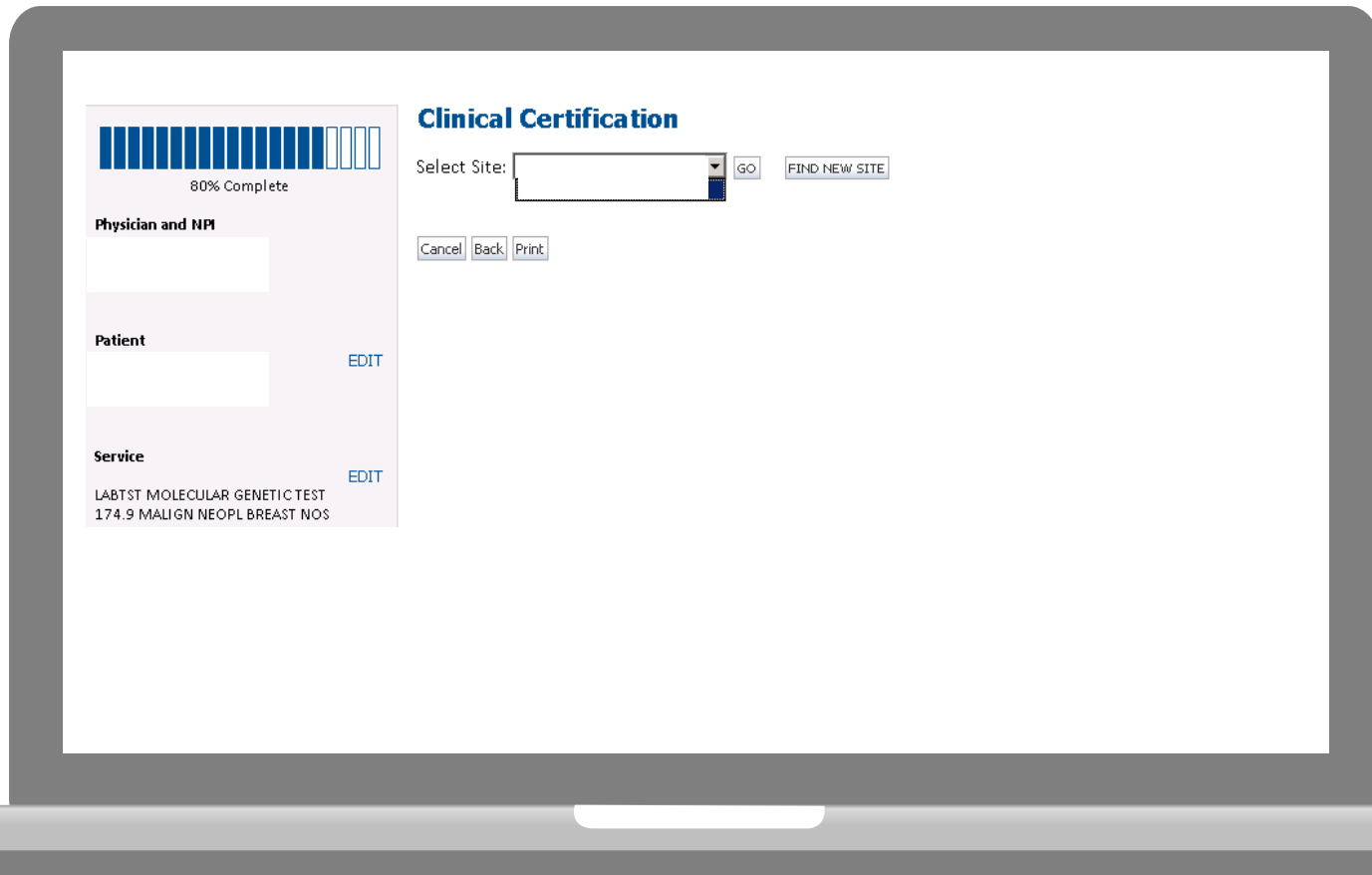
Radio buttons for search criteria are present: "Exact match" (selected) and "Starts with". A "LOOKUP SITE" button is located to the right of these options.

Below the search fields are buttons for "Cancel", "Back", and "Print". A link "Click here for help or technical support" is also provided.

On the left side of the interface, there is a sidebar with a progress bar indicating "80% Complete". Below the progress bar, there are sections for "Provider and NPI", "Patient", and "Service", each with an "EDIT" link. The "Service" section shows "71250 CT THORAX W/O CONTRAST" and "R06.02 Shortness of breath".

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

# Submitting as Lab- Site Selection



The screenshot shows a laptop screen displaying a web form titled "Clinical Certification". On the left side of the form, there is a progress bar with 20 segments, 16 of which are filled with blue, and the text "80% Complete" below it. Below the progress bar, there are three sections: "Physician and NP" with a text input field, "Patient" with a text input field and an "EDIT" link to its right, and "Service" with a text input field containing "LABTST MOLECULAR GENETIC TEST" and "174.9 MALIGN NEOPL BREAST NOS", and an "EDIT" link to its right. On the right side of the form, the title "Clinical Certification" is at the top. Below it is a "Select Site:" label followed by a dropdown menu, a "GO" button, and a "FIND NEW SITE" button. At the bottom of this section are three buttons: "Cancel", "Back", and "Print".

- The site added to your account will be in the drop down menu selection.
- Click **“GO”** when ready.
- If your site is not on the dropdown, click find new site to search by NPI.

## Contact Information

Select an Urgency Indicator  
and Upload your patient's  
relevant medical records that  
support your request.



**Clinical Certification**

Is this case Routine/Standard?

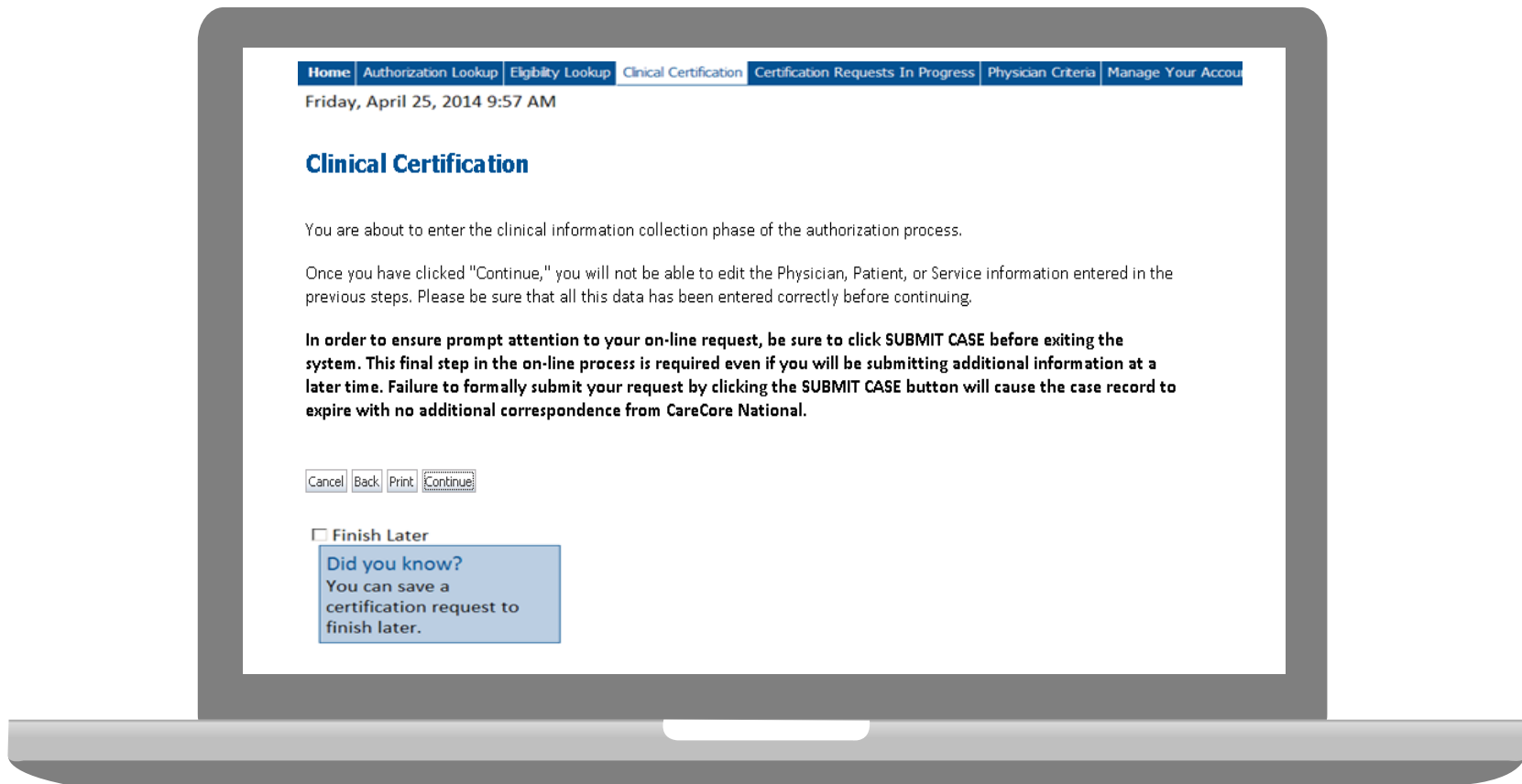
☐ Yes ☐ No

A red arrow points to the 'No' radio button.

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.



# Pause/Save Option



➤ Once you have entered the clinical collection phase of the case process, you can save the information and return **within (2) business days** to complete.

# Single or Multi CPT Code and Collection Date

## Clinical Certification

Some tests can be automatically authorized by responding to a set of specific clinical questions. In order to determine the right clinical questions to ask, we need to know exactly which test is being performed. The next several questions guide test and CPT code selection. Each step includes an option to bypass the question if you do not know the answer. If you need assistance, you can call 1-879-8317.

1 How will the test be billed?

☒ A single CPT/HCPCS code for the entire test

☐ More than one CPT/HCPCS codes (a panel, profile, or group of tests performed together and billed with multiple procedure codes)

☐ I do not know the CPT/HCPCS code(s) associated with this test (This option allows you to describe the test and provide general clinical information for manual review.)

2 Has the specimen been collected?

☐ Yes ☐ No ☐ Unknown

3 Collection date (if the specimen has already been collected):

SUBMIT

# Test Identification

## Single CPT Code

81202 - APC GENE KNOWN FAM VARIANTS  
81203 - APC GENE DUP/DELET VARIANTS  
81205 - BCKDHB GENE  
81206 - BCR/ABL1 GENE MAJOR BP  
81207 - BCR/ABL1 GENE MINOR BP  
81208 - BCR/ABL1 GENE OTHER BP  
81209 - BLM GENE  
81210 - BRAF GENE  
81211 - BRCA1&2 SEQ & COM DUP/DEL  
81212 - BRCA1&2 185&5385&6174 VAR  
81213 - BRCA1&2 UNCOM DUP/DEL VAR  
81214 - BRCA1 FULL SEQ & COM DUP/DEL  
81215 - BRCA1 GENE KNOWN FAM VARIANT  
81216 - BRCA2 GENE FULL SEQUENCE  
81217 - BRCA2 GENE KNOWN FAM VARIANT  
81220 - CFTR GENE COM VARIANTS  
81221 - CFTR GENE KNOWN FAM VARIANTS  
**81222 - CFTR GENE DUP/DELET VARIANTS**  
81223 - CFTR GENE FULL SEQUENCE

There is room  
for free text to  
add codes  
should there be  
a need to do so.

## Test Type

If selecting the test  
type, the list of cpt  
codes presented  
will then be  
narrowed to  
applicable codes.

Hereditary cancer syndromes (BRCA, Lynch, APC, MUTYH, PTEN, TP53, etc. genes)  
Carrier screening tests (Cystic fibrosis, Fragile X, Spinal muscular atrophy, Ashkenazi Jewish disorders, etc.)  
Tumor marker/molecular profiling (KRAS, EGFR, BRAF, ALK, MGMT, etc genes)  
Hereditary cardiac disorders (Cardiomyopathies, Arrhythmias such as long QT syndrome, Aortic aneurysm, Marfan syndrome, Familial hypercholesterolemia, etc.)  
Cardiovascular disease and thrombosis risk variant testing (APOE, ACE, LPA-Aspirin, LPA-Intron 25, KIF6, CYP2C19, CYP2C9, VKORC1, MTHFR, Factor V Leiden, Prothrombin, etc.  
Pharmacogenomic testing (CYP2D6, CYP2C19, CYP2C9, VKORC1, OPRM1, SLCO1B1, MTHFR, Factor V Leiden, Prothrombin, etc. genotyping)  
Neurologic disorders (Ataxia, Dystonia, Epilepsy, Myotonia, Muscular dystrophy, Neuropathy, Spastic paraplegia, etc. evaluations)  
Mitochondrial disease testing (Kearns-Sayre, Leigh, LHON, MELAS, MERRF, NARP, Whole mitochondrial genome, etc.)  
**Other/Not listed/Not sure**

Cancel Print

Select the **Single CPT Code** or Select by **Test Type**

# Clinical Questions

Answer the following questions in clinical detail:

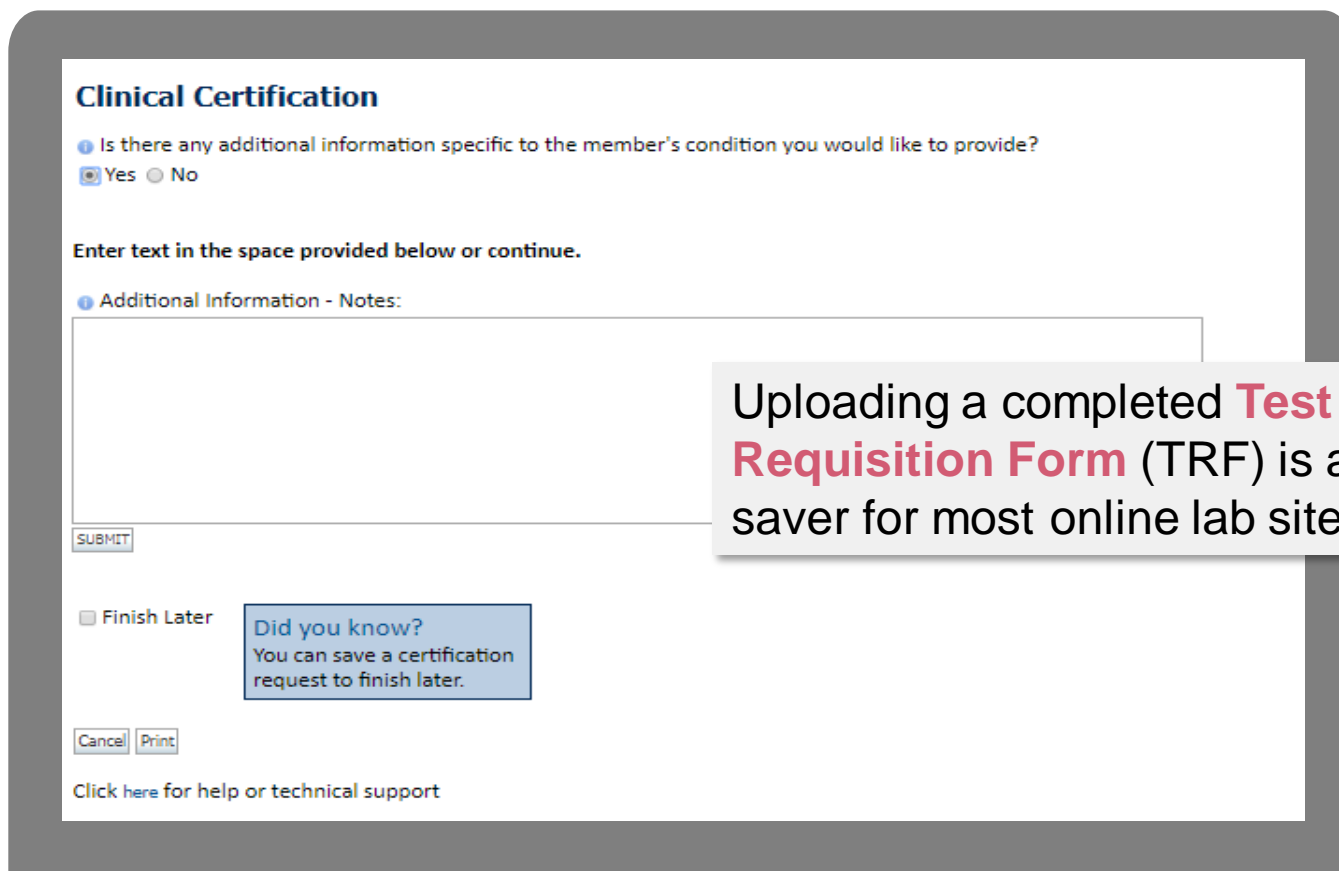
1. Provide the indication for this test.

2. Describe the patient's signs and symptoms (if none, write not applicable)

3. Describe any relevant testing or procedure results for this patient. (If none, write not applicable)

1. Provide the indication for this test
2. Describe the patient's signs and symptoms (if none, write not applicable)
3. Describe any relevant testing or procedure results for this patient.(if none, write not applicable)
4. Describe the patient's relevant family history, if applicable to the requested test; including clinical findings, diagnoses, and/or test results. If not relevant to the requested test, write not applicable.
5. Describe how the results of this requested test will be utilized in the patient's care.
6. Add any additional comments which may be relevant, and may not fit into the above information.

# Medical Review



The screenshot shows a web form titled "Clinical Certification" on a laptop screen. The form includes a question about additional information, a text entry box, and buttons for "SUBMIT", "Finish Later", "Cancel", and "Print". A "Did you know?" tip box is also present.

**Clinical Certification**

Is there any additional information specific to the member's condition you would like to provide?  
☒ Yes ☐ No

Enter text in the space provided below or continue.

Additional Information - Notes:

☐ Finish Later

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

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

Uploading a completed **Test Requisition Form** (TRF) is a time saver for most online lab site users.

If **additional information** is required, you will have the option to either free hand text in the additional information box, or you can mark Yes to additional info and click submit to bring you to the upload documentation page.

Providing clinical information via the web is the quickest, most efficient method.

# Medical Review

## 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

No file chosen

No file chosen

No file chosen

No file chosen

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If **additional information** is required, you will have the option to either free hand text in the additional information box, or you can mark Yes to additional info and click submit to bring you to the upload documentation page.

Providing clinical information via the web is the quickest, most efficient method.

# Medical Review

## Clinical Certification

☐ I acknowledge that the clinical information submitted to support this authorization request is accurate and specific to this member, and that all information has been provided. I have no further information to provide at this time.

[Print](#) [SUBMIT CASE](#)

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

Acknowledge the Clinical Certification statements, and hit “**Submit Case.**”

# Approval

## Clinical Certification

Your case has been Approved.

Provider Name:  
Provider Address:

Contact:  
Phone  
Number:  
Fax Number:

Patient Name:  
Insurance Carrier:

Patient Id:

Site Name:

Site ID:

Site Address:

Primary Diagnosis  
Code: M25.562

Description: Pain in left knee

Secondary Diagnosis  
Code:

Description:

Date of Service: Not provided

CPT Code: 73721

Description: MRI LOWER EXTREMITY  
JOINT W/O

Authorization  
Number:

Review Date: 2:12:39 PM

Expiration Date:

Status: Your case has been Approved.

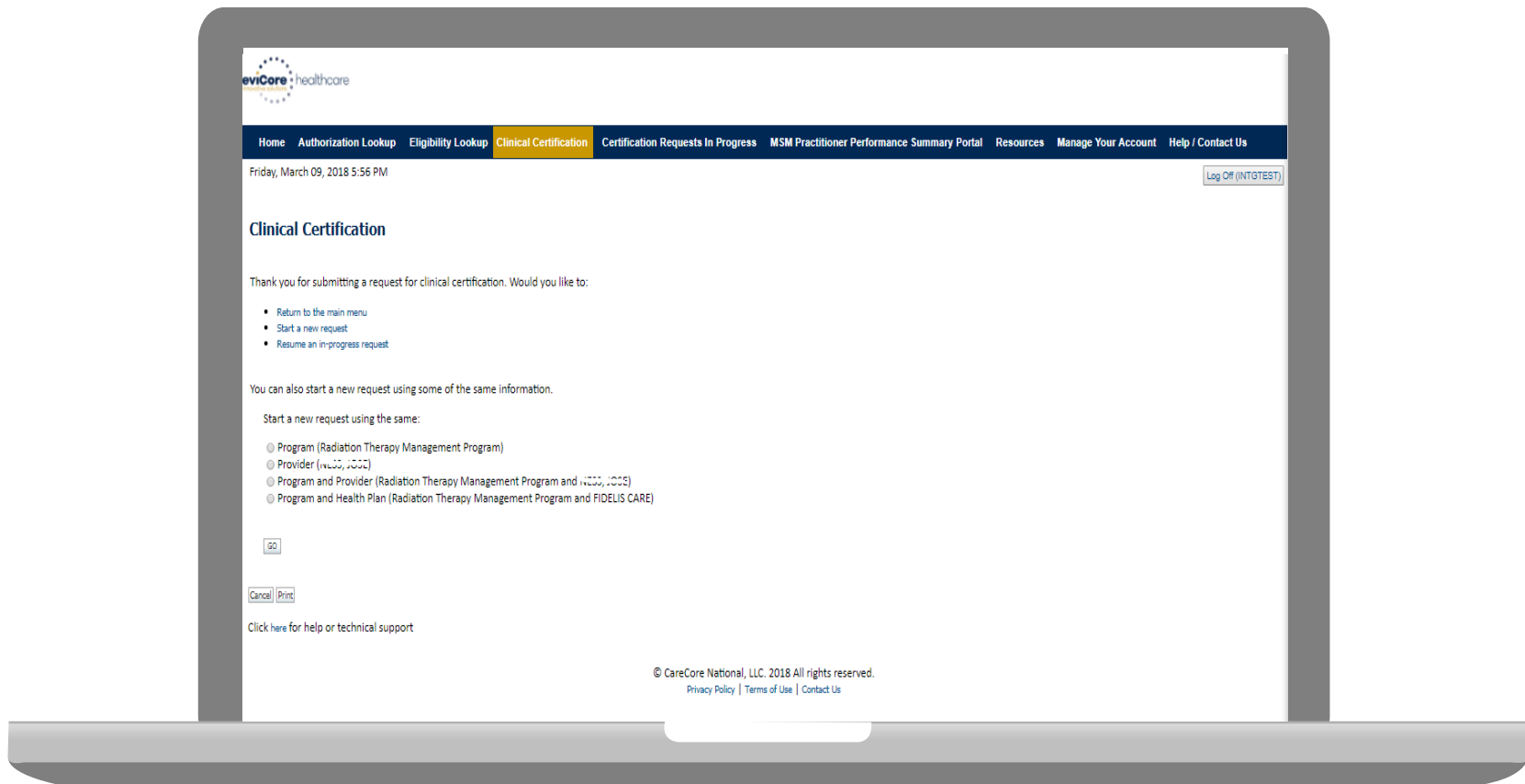
Print Continue

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, an **approval** will be issued.

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



# Building Additional Cases



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

eviCore healthcare

Home Authorization Lookup Eligibility Lookup Clinical Certification Certification Requests In Progress MSM Practitioner Performance Summary Portal Resources Manage Your Account

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

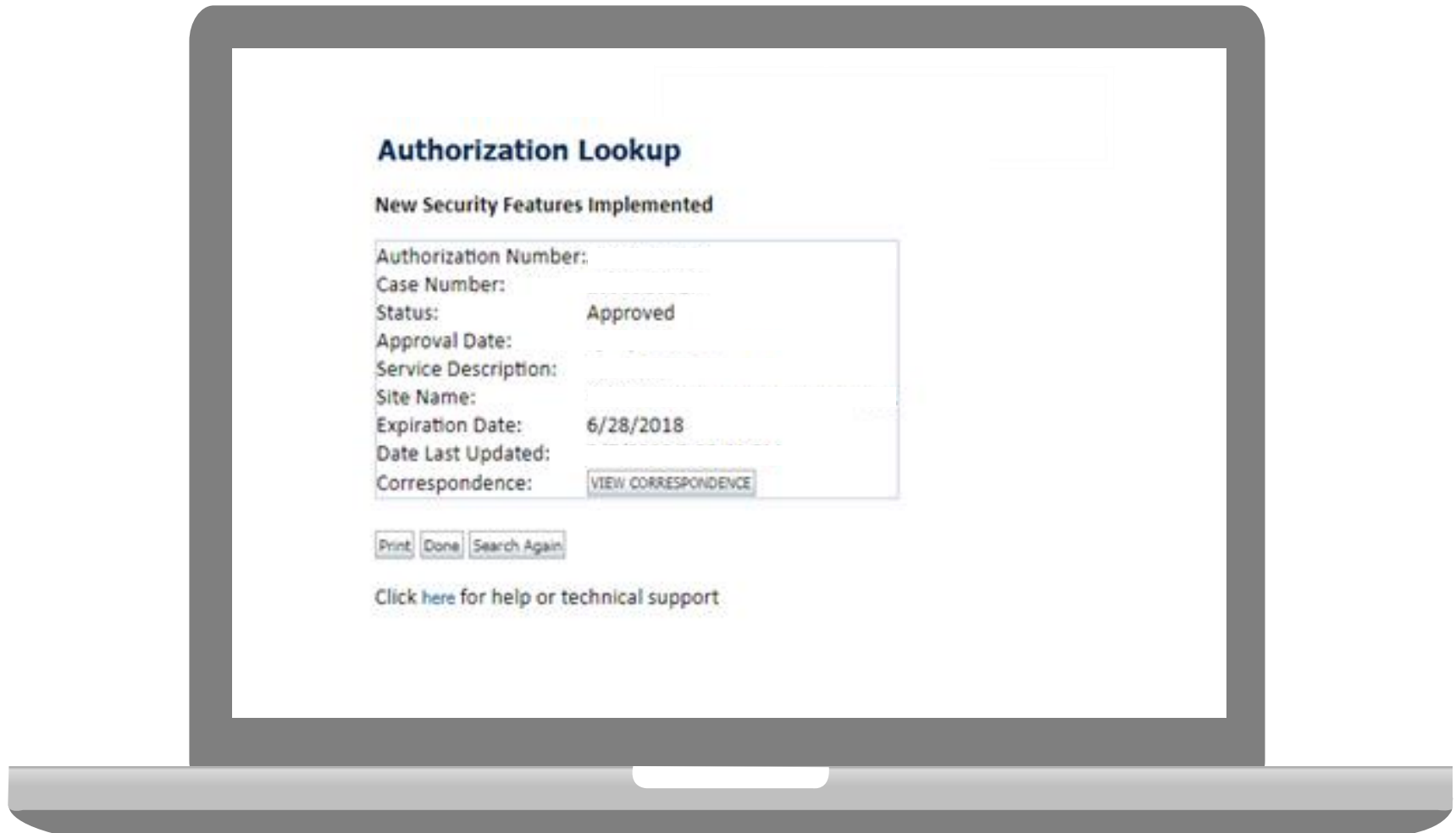
REQUIRED FIELDS

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.

# Authorization Status



**Authorization Lookup**

New Security Features Implemented

Authorization Number:

Case Number:

Status:

Approval Date:

Service Description:

Site Name:

Expiration Date:

Date Last Updated:

Correspondence:

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

The authorization will then be accessible to review. To print authorization correspondence, select **View Correspondence**.

# 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

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You may also confirm the patient's eligibility by selecting the **Eligibility Lookup** tab.

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# Provider Resources



# Evidence-Based Criteria

## Comprehensive Lab Program Policy Manual by state:

[https://www.evicore.com/healthplan/BCBSIL\\_Lab](https://www.evicore.com/healthplan/BCBSIL_Lab)

[https://www.evicore.com/healthplan/BCBSMT\\_Lab](https://www.evicore.com/healthplan/BCBSMT_Lab)

[https://www.evicore.com/healthplan/BCBSNM\\_Lab](https://www.evicore.com/healthplan/BCBSNM_Lab)

[https://www.evicore.com/healthplan/BCBSOK\\_Lab](https://www.evicore.com/healthplan/BCBSOK_Lab)

[https://www.evicore.com/healthplan/BCBSTX\\_Lab](https://www.evicore.com/healthplan/BCBSTX_Lab)

Or to request specific criteria used in your case:

<https://www.evicore.com/resources/pages/providers.aspx#ReferenceGuidelines>

**Clinical Guidelines**

Please select clinical guidelines by first selecting the appropriate solution. Adobe PDF Reader is required to view clinical guideline documents.

Benefits, coverage policies, and eligibility issues pertaining to each health plan may take precedence over eviCore's clinical guidelines. Select the **view more** option to access health plan-specific guidelines.

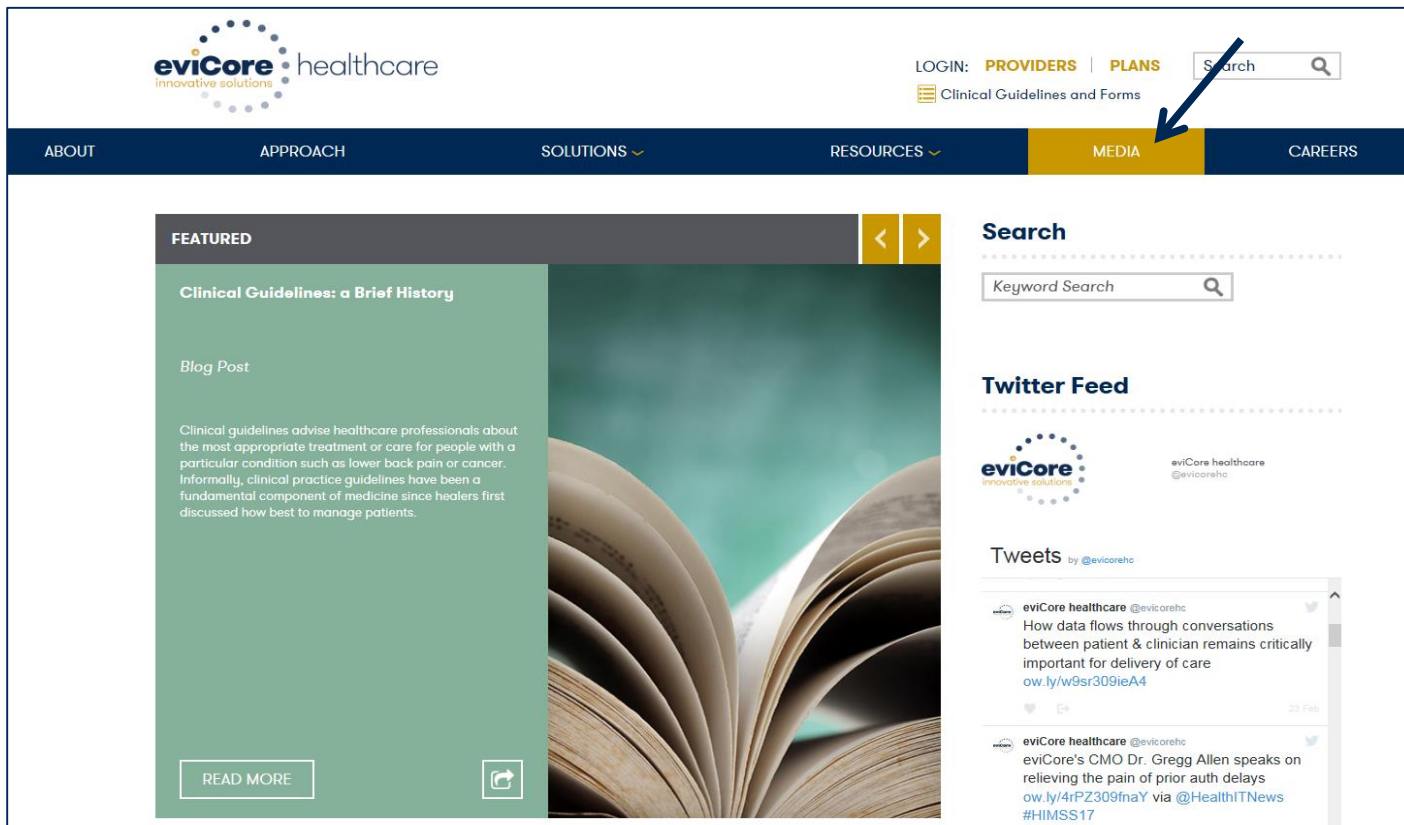
Lab Management ▼

[Click Here for Form](#)

eviCore Request for Criteria Web Form

# eviCore Provider Blog Series

- The eviCore blog series focuses on making processes more efficient and easier to understand by providing helpful tips on how to navigate preauthorizations, avoid peer-to-peer phone calls, and utilize our clinical guidelines.
- You can access the blog publications from the **Media** tab or via the direct link at <https://www.evicore.com/pages/media.aspx>.



# Provider Resources: Preauthorization Call Center



Pre-Certification  
Call Center



Web-Based  
Services



Client Provider  
Operations



Documents

**7:00 AM - 7:00 PM local time: 855-252-1117**

- Obtain preauthorization 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





Pre-Certification  
Call Center



Web-Based  
Services



Client Provider  
Operations



Documents

## Provider Resources: Web-Based Services

[www.evicore.com](http://www.evicore.com)

*To speak with a Web Specialist, call (800) 646-0418 (Option #2) or email [portal.support@evicore.com](mailto: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

[clientservices@evicore.com](mailto:clientservices@evicore.com)

- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Request for an authorization to be re-sent to the health plan

# Provider Resources: Implementation Site



Pre-Certification  
Call Center



Web-Based  
Services



Client Provider  
Operations



Documents

## Provider Enrollment Questions

Contact your Provider Network Consultant for more information

Blue Cross and Blue Shield Implementation site - includes all implementation documents:

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

- Provider Orientation Presentation
- CPT code list of the procedures that require preauthorization
- 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](mailto:ClientServices@evicore.com).

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# Thank You!

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