

Quick Reference Guide

Authorization Required

All out-patient, non-emergent, diagnostic advanced imaging services including:

- MRI/MRA
- CT/CTA
- PET
- Nuclear Medicine

Authorization Not Required

- Inpatient Radiology
- Radiology testing done in the ER
- 23 hour observation
- Outpatient Radiology services other than indicated

Urgent Requests

When service is required due to a medically urgent condition, the referring physician's office must **call eviCore healthcare at 888.693.3211** for authorization. eviCore will make a good faith effort to render a decision within 48 hours for members enrolled in Commercial membership and 24 hours for Medicare members after receipt of all necessary information. In most cases where requisite information is provided in the initial call, a decision is rendered and communicated within 1 business day. Please indicate that the notification is for **medically urgent care**.

Authorization Requirements

To ensure the authorization process is as quick and efficient as possible, we highly recommend that the physician's office submitting requests have:

- 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 related to the diagnosis and
- Notes
- Type and duration of treatment performed

- Patient's name, address, and current
- Member ID

Authorizations

An authorization number will be faxed to the ordering physician and requested facility upon approval. eviCore healthcare will approve the specific facility performing the imaging study and the CPT code or codes for diagnostic imaging. **Contact eviCore healthcare for changes to facility or study.**

It is the responsibility of the performing facility to confirm that the referring physician completed the prior authorization process for advanced imaging procedures. Verification may be obtained via the eviCore healthcare website or by calling 888.693.3211.

Important! Authorization from eviCore healthcare 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.

Claims submitted for unauthorized procedures are subject to denial, and the member must be held harmless. Please verify the member's eligibility with the health plan.

Authorization Denials

eviCore healthcare notifies the referring physician in writing of a denial and provides a rationale for the determination within one working day of decision. This communication sets forth the appeal options per current state policy. eviCore healthcare also offers the ordering physician a consultation with an eviCore healthcare Medical Director on a peer-to-peer basis. In certain instances, additional information provided during the peer-to-peer consultation is sufficient to satisfy medical necessity criteria.

Quick Reference Guide

We offer three convenient methods to request authorizations:

Web Portal

The eviCore healthcare Web Portal is available 24/7 at <https://evicore.com/Pages/ProviderLogin.aspx>.

After a one-time registration, you are able to initiate a case, view case/authorization details, verify eligibility, and more. The Web Portal remains the quickest, most efficient way to obtain information.

If you have questions or need assistance, please contact the Web Portal team via email at portal.support@evicore.com or via phone at **800-646-0418 (Option 2)**.

Phone

Contact us toll-free at 888.693.3211 from 8AM to 9PM EST. For faster service, you'll need all pertinent clinical information before you call. Outside of normal business hours, you may call eviCore healthcare and leave a message for a return call the next business day.

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. **The web is available 24/7, 365 days a year.**

Fax

Fax requests can be submitted to 888.693.3210. You can obtain modality specific forms on the eviCore healthcare website at www.evicore.com under the Clinical Guidelines and Forms section. Complete the appropriate fax form, and fax to the number above. eviCore healthcare will respond by fax when the authorization decision is complete.

Guidelines on the Web

To access the eviCore healthcare Guidelines, visit our Advanced Imaging site at the following link:

<https://www.evicore.com/solution/pages/radiology.aspx>

From there you can access important information and resources:

- Education Tools
- Program Overview
- Clinical Guidelines & Quick Reference Guides
- Online Forms

Need Clinical Support?

If your case requires further clinical discussion for approval, we welcome requests for clinical determination discussions from referring physicians and radiologists. One of eviCore healthcare's physicians can assist in a consideration of imaging study options. To request a clinical discussion, call eviCore healthcare at 888.693.3211 and request a peer to peer discussion.

This is not where claim denials reconsideration would be discussed. For claim denials, you must follow the appeal process.

Implementation Site

The eviCore Medical Mutual of Ohio implementation website contains web registration and submission information, comprehensive CPT code list, FAQ documents, and other important resources that are kept up-to-date for your convenience:

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