

FAQs: eviCore healthcare

Advanced Imaging, Cardiac Studies, Non-OB Ultrasound (For Martin's Point Generations Advantage Members)

Who is eviCore healthcare?

eviCore healthcare (eviCore) is an independent, medical benefits management company providing utilization management services for Martin's Point Health Care.

What is the relationship between Martin's Point Health Care and eviCore?

Starting on September 18, 2017, eviCore will manage radiology, cardiology, nuclear cardiac imaging, and non-OB ultrasound authorizations for the **Martin's Point Generations Advantage** health plan (for dates of service on or after October 1, 2017).

How can I initiate a prior authorization request?

The most efficient way to obtain prior authorization is through the 24/7 self-service web portal at <u>www.evicore.com</u>. Prior authorization can also be obtained via phone at 888-693-3211.

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

eviCore healthcare's prior authorization call center is available from 7 am–8 pm local time, Monday through Friday. The phone number is 888-693-3211. The web portal is available for access 24/7.

Who can request a prior authorization?

A representative of the ordering physician's staff can ask for authorization. This could be someone from the clinical, front office or billing staff, acting on behalf of the ordering physician.

Do add-on procedures require review?

No. Add-on procedures are payable and reviewable under the primary procedure when an approval for the primary procedure code is on file.

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

The most efficient way to obtain urgent prior authorizations is via phone, as an immediate approval can be obtained. Please contact eviCore healthcare directly at 888-693-3211, indicating the request is urgent.

Once I ask for a prior authorization, how long will it take to get a decision?

eviCore healthcare is committed to reviewing all requests and giving case decisions within fourteen (14) calendar days of receiving all necessary clinical information. When advanced radiology and cardiology services are required due to a medically urgent condition, eviCore healthcare will give a decision within 72 hours of receiving all necessary demographic and clinical information. Please state that the authorization is for medically urgent care.

What authorization information will be visible on the eviCore website?

- Prior Authorization/Case Numbers
- Status of Request
- CPT Code
- Procedure Name
- Site Name and Location
- Prior Authorization Date
- Expiration Date

How long will the authorization approval be valid?

Prior Authorizations are valid for 45 calendar days from the date of the approval.

What are the parameters of an appeals request?

eviCore does not manage 1st-level appeals. An authorized representative, including a provider, with the member's written consent, may file an appeal to Martin's Point on behalf of a member.



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Authorization Required

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

- MRI/MRA
- CT/CTA
- PET
- Non-OB Ultrasound
- NCM/MPI (Nuclear Cardiac Imaging)
- Nuclear Medicine
- Stress Echocardiograms
- Cardiac Imaging (MR, PET, CT)

x 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 **72 hours of receipt** of all necessary information. In most cases where requisite information is provided in the initial call, they render and communicate a decision within 1 business day. Indicate the request 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.





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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 prior to a decision being made is sufficient to satisfy medical necessity criteria. After a decision has been made the peer-to-peer consultation will be for educational purposes only, the decision cannot be changed.

We offer two 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 is 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 **1-888-693-3211** from 7AM to 8PM 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.**

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 Martin's Point HealthCare 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:

www.eviCore.com/healthplan/martins_point

