

Musculoskeletal Prior Authorization for Scott & White Health Plan

Provider Orientation



Company Overview



**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 and 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

Musculoskeletal Management Solution - Our Experience

30+ Regional

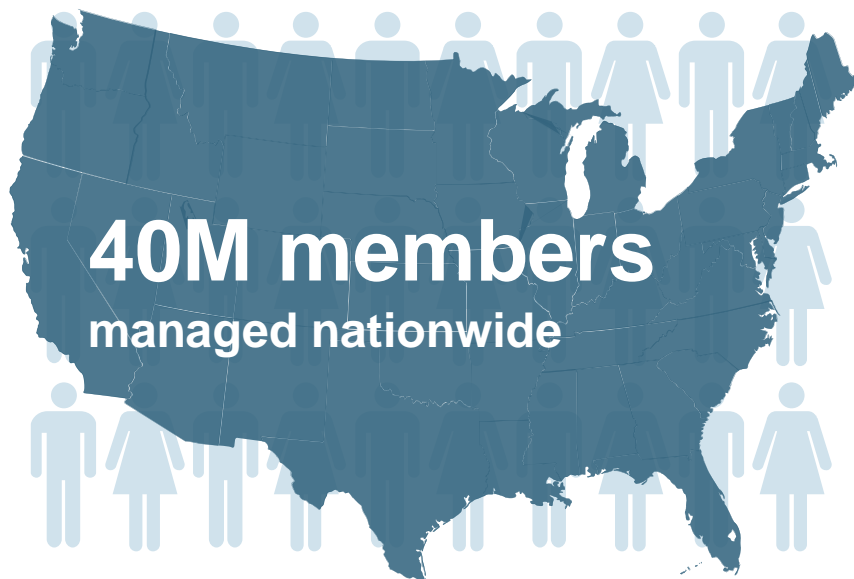
and National Clients

300k+

Cases built per day

10 Years

Managing Radiation Therapy Services



Members Managed

- 25.5M Commercial Memberships
- 2M Medicare Memberships
- 6.5M Medicaid Memberships



Clinical Staffing

44



**Musculoskeletal
physicians on staff**

66



**Musculoskeletal-trained
nurses on staff**

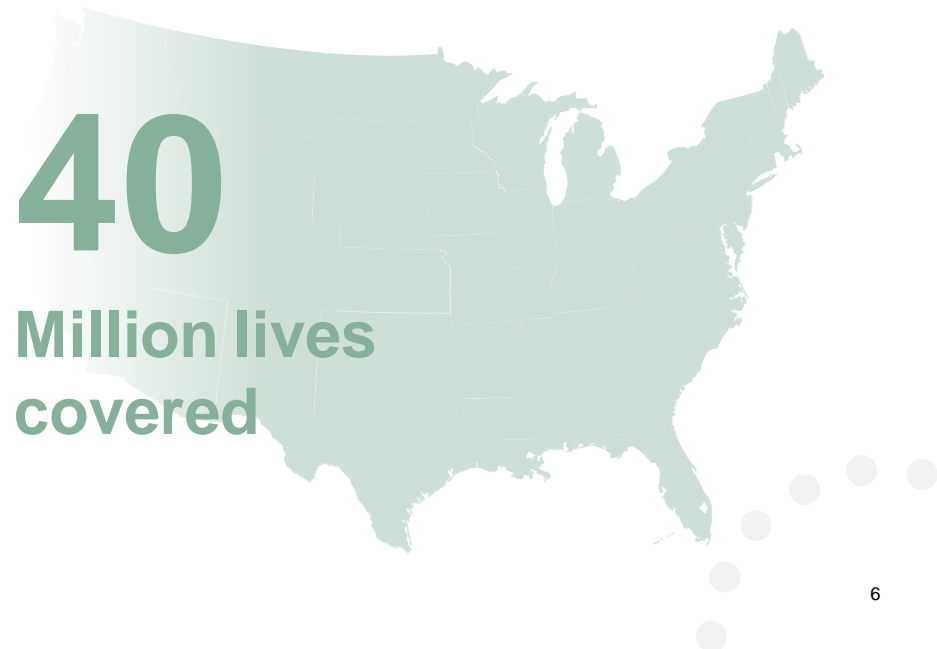
56



**Musculoskeletal
therapists**
(PT/OT/ST/MT/CHIRO/ACU)

40

**Million lives
covered**



Our Clinical Approach

Clinical Platform

Multi-Specialty Expertise

Family Medicine	Oncology/Hematology
Internal Medicine	Surgery
Pediatrics	<ul style="list-style-type: none">• General
Sports Medicine	<ul style="list-style-type: none">• Orthopedic• Thoracic
OB/GYN	<ul style="list-style-type: none">• Cardiac• Neurological
Cardiology	<ul style="list-style-type: none">• Otolaryngology• Spine
Nuclear Medicine	
Anesthesiology	Radiology
Radiation Oncology	<ul style="list-style-type: none">• Nuclear Medicine• Musculoskeletal• Neuroradiology
Sleep Medicine	

- **260 board-certified medical directors**
- **Diverse representation of medical specialties**
- **800 nurses with diverse specialties and experience**
- **Dedicated nursing and physician teams by specialty for Cardiology, Oncology, OB-GYN, Spine/Orthopedics, Neurology, and Medical/Surgical**

Evidence-Based Guidelines

The foundation of our musculoskeletal solution:



Dedicated
pediatric
guidelines



Medicare
LCDs & NCDs



Academic
institutional
experts and
community
physician panels



Current
clinical
literature

Aligned with National Societies

- American Academy of Neurology
- American College of Rheumatology
- American Association of Neurological Surgeons
- American Academy of Orthopedic Surgeons
- American Society of Interventional Pain Physicians
- North American Spine Society
- American College of Occupational and Environmental Medicine
- American Academy of Physical Medicine and Rehabilitation
- American Association of Hip and Knee Surgeons
- American Pain Society
- Official Disability Guidelines
- Medicare Guidelines
- Spine Intervention Society
- American Academy of Orthopedic Surgeons
- The American Orthopedic Society for Sports Medicine
- Cochrane Reviews
- American Physical Therapy Association
- American Chiropractic Association
- American Occupational Therapy Association
- American Speech Language Hearing Association
- American Society of Anesthesiologists

Service Model

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.

Musculoskeletal Prior Authorization Program for Scott & White Health Plan

Program Overview

eviCore will begin accepting requests on September 21, 2018 for dates of service October 1, 2018 and beyond.

Prior authorization applies to services that are:

- Outpatient
- Elective / Non-emergent

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

- Emergency room
- Inpatient
- 23-hour observation

It is the responsibility of the rendering provider to request prior authorization approval for services. In some instances, the provider may be required to furnish the referral or order the requested services.

Applicable Membership

Authorization is required for Scott & White Health Plan members enrolled in the following programs:

- Commercial Fully Insured
- Commercial Self Insured
- Medicare Advantage

Prior Authorization Required:

Joint Surgery

- Large joint replacement
- Arthroscopic and open procedures

Spine Surgery

- Spinal Implants
 - Spinal cord stimulators
 - Pain Pumps
- Cervical/Thoracic/Lumbar
 - Decompressions
 - Fusions

Interventional Pain

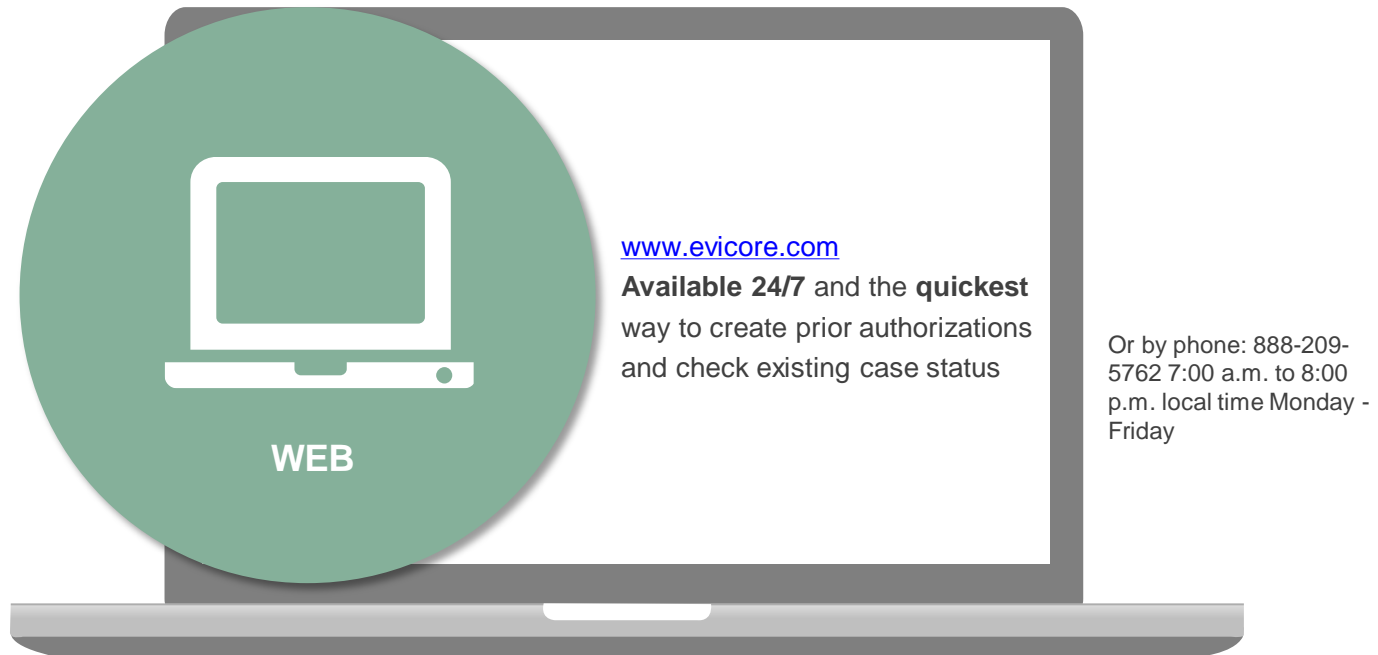
- Spinal injections
- Spinal implants
 - Spinal cord stimulators
 - Pain pumps

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

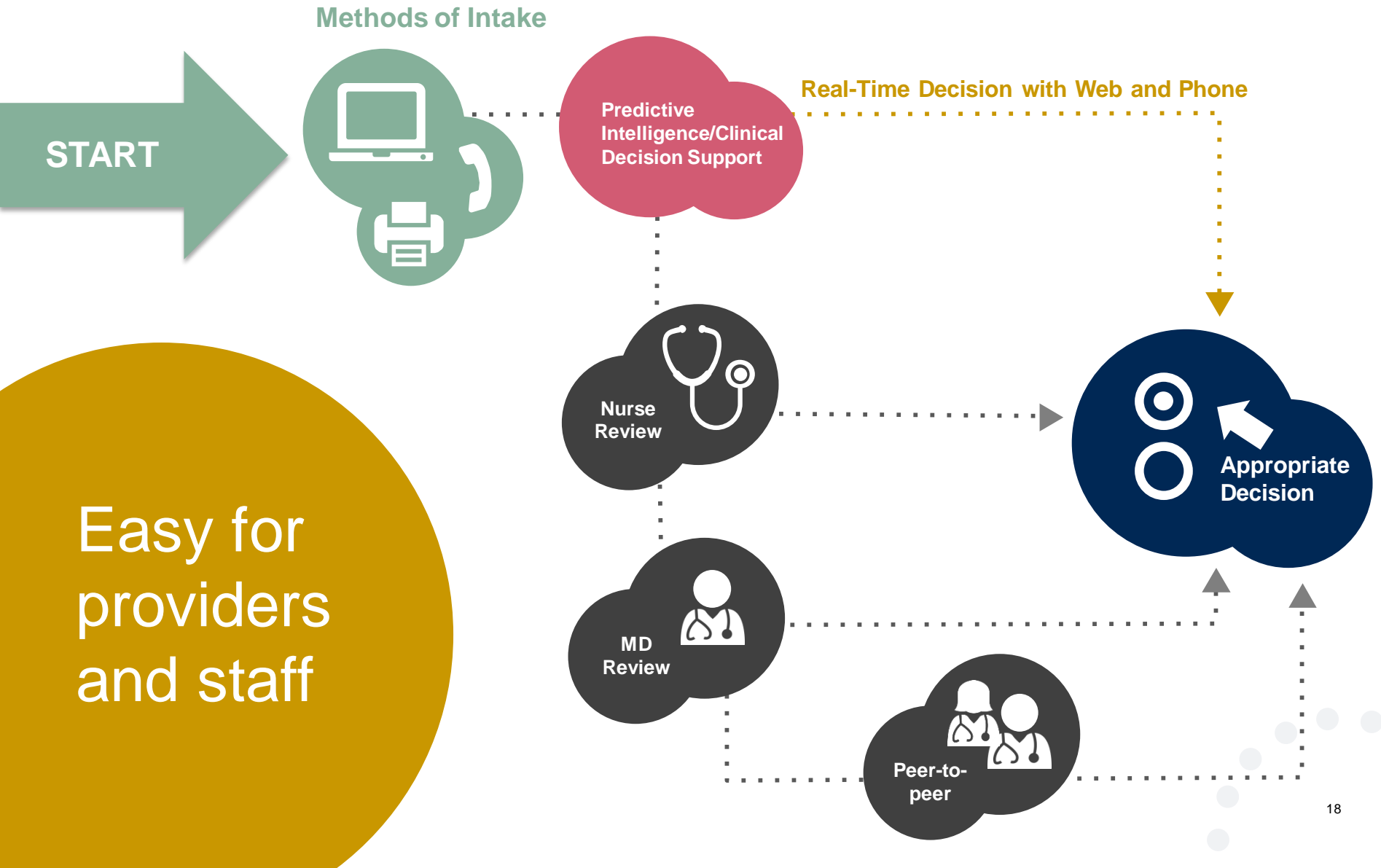
<https://www.evicore.com/healthplan/scottandwhite>

Prior Authorization Requests

How to request prior authorization:



Clinical Review Process



Needed Information

Member

Member ID
Member name
Date of birth (DOB)



Referring Physician

Physician name
National provider identifier (NPI)
Tax identification number (TIN)
Fax number



Facility

Facility name
National provider identifier (NPI)
Tax identification number (TIN)
Street address



Requests

CPT code(s) for
requested procedure

The appropriate
diagnosis code for the
working of differential
diagnosis



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

- Imaging studies and prior test results related to the diagnosis
- Office notes related to the current diagnosis

Prior Authorization Outcomes

Approved Requests:

- All requests are processed within 3 business days for commercial members, and 14 calendar days for Medicare.
- Authorizations are typically good for 45 days from date of request, however can vary depending on service being requested.

Delivery:

- Faxed to ordering provider and rendering facility
- Mailed to the member
- Information can be printed on demand from the eviCore healthcare Web Portal

Denied Requests:

- Clinical consult will be offered prior to a denial
- Communication of denial determination
- Communication of the rationale for the denial
- How to request a clinical consultation

Delivery:

- Faxed to the ordering provider
- Mailed to the member

Prior Authorization Outcomes



Clinical Consultations

- The referring provider will receive outreach prior to receiving a denial letter that will contain the reason the request has been recommended for denial. During this outreach a physician consult may be scheduled if needed to allow the opportunity to request a Physician-to-Physician discussion with an eviCore Medical Director, at which point any additional details can be offered for consideration when making a final decision.
- Please note that due to Texas State mandated decision-making time frames for commercial requests you will have one (1) business day to schedule the physician consult.
- After a denial has been issued for a Medicare request, no changes to the case decision can be made. A clinical consultation is considered educational only once an adverse determination has been made. At this point the appeal process will need to be followed.

Special Circumstances



Authorization Appeals:

- eviCore will process first level Commercial Fully insured appeals only. All other appeals must be submitted to the healthplan.
- Fully Insured Commercial appeals must be submitted to eviCore within 180 calendar days of the initial determination.
- The MSK request and all clinical information provided will be reviewed by a physician other than the one who made the initial determination.
- A written notice of the appeal decision will be mailed to the member and faxed to the provider



Retrospective Studies:

- For time sensitive services retrospective requests can be initiated by contacting eviCore at 888-209-5762 and requesting a retro auth. This must be done within seven (7) business days of the date of service. Requests will be reviewed and decisions made based on medical necessity/urgency of service.

Special Circumstances



Inpatient Stays:

- eviCore healthcare will review the surgery precertification request for medical necessity and make a determination based on the clinical information provided by the rendering provider. eviCore will collect the requested place of service during the precertification process. You will still need to notify Scott & White Health Plan of the inpatient stay, and include the approved prior authorization from eviCore. This will allow for timely processing of the inpatient request. eviCore does not provide concurrent bed day management for inpatient admissions. All modifications/extensions to the approved length of stay are handled by the healthplan using existing concurrent review processes.



Outpatient Urgent Studies:

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

Web Portal Services

Portal Compatibility

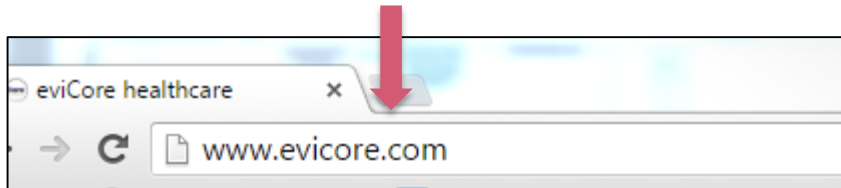
The eviCore.com website is compatible with the following web browsers:

- Google Chrome
- Mozilla Firefox
- Internet Explorer 9, 10, and 11

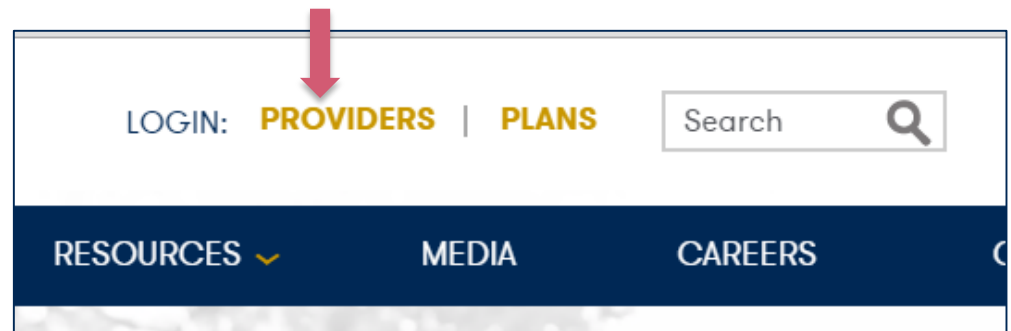
You may need to disable pop-up blockers to access the site. For information on how to disable pop-up blockers for any of these web browsers, please refer to our [Disabling Pop-Up Blockers guide](#).

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

Providers Delivering Medical
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!](#)

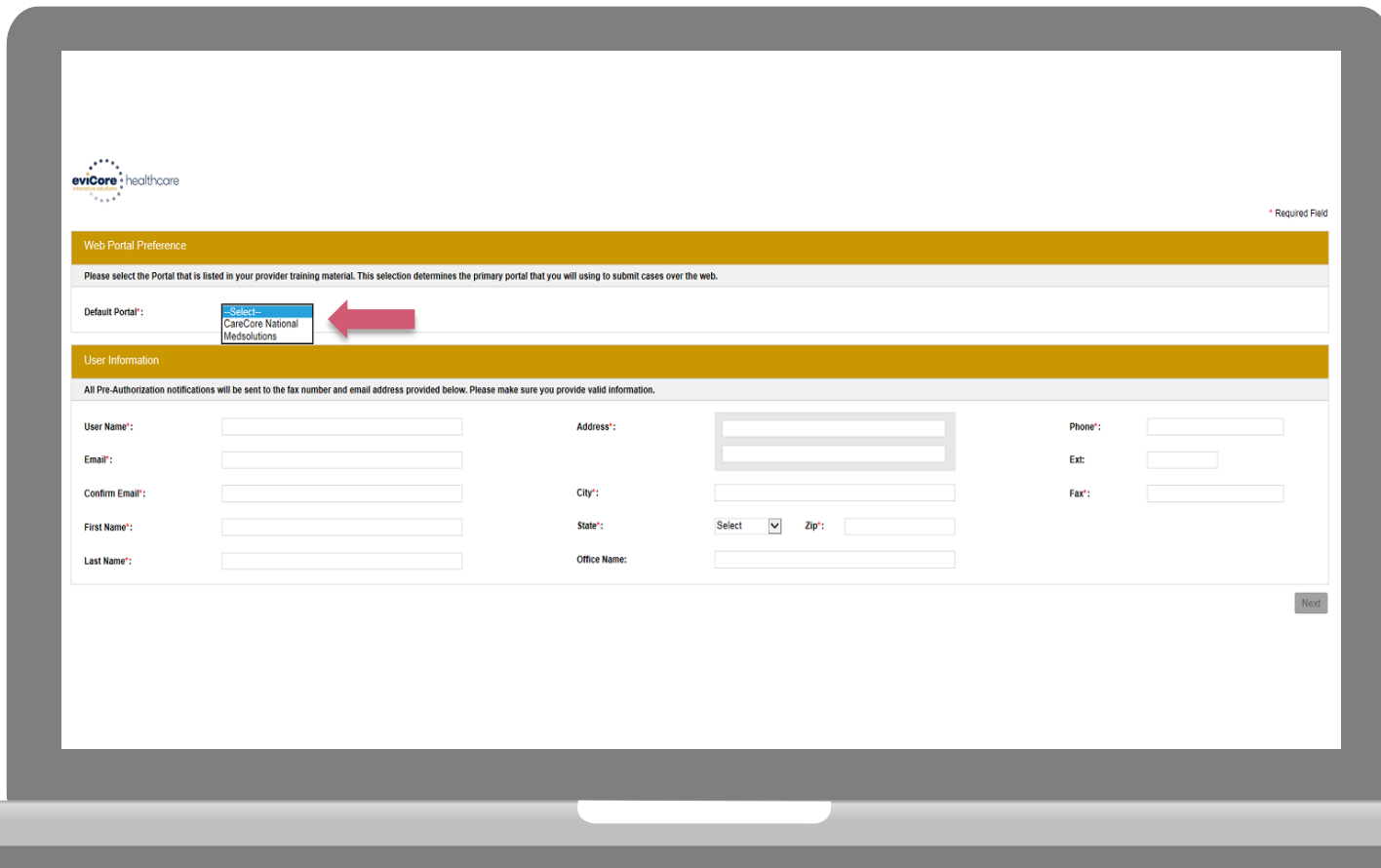
LOGIN

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



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

Creating An Account



The screenshot shows a web form for creating an account on the eviCore healthcare portal. The form is divided into two main sections: "Web Portal Preference" and "User Information".

Web Portal Preference: This section has a yellow header. Below it, a message states: "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." The "Default Portal:" label is followed by a dropdown menu. The dropdown menu is open, showing two options: "CareCore National" and "MedSolutions". A red arrow points to the "CareCore National" option. A red asterisk and the text "Required Field" are located in the top right corner of this section.

User Information: This section also has a yellow header. Below it, a message states: "All Pre-Authorization notifications will be sent to the fax number and email address provided below. Please make sure you provide valid information." The form contains several input fields:

- User Name*:** A single-line text input field.
- Email*:** A single-line text input field.
- Confirm Email*:** A single-line text input field.
- First Name*:** A single-line text input field.
- Last Name*:** A single-line text input field.
- Address*:** A multi-line text input field.
- City*:** A single-line text input field.
- State*:** A dropdown menu with "Select" and a downward arrow.
- Zip*:** A single-line text input field.
- Office Name:** A single-line text input field.
- Phone*:** A single-line text input field.
- Ext:** A single-line text input field.
- Fax*:** A single-line text input field.

A "Next" button is located at the bottom right of the form.

- Select CareCore National or MedSolutions as the **Default Portal**, and complete the user registration form.
- Please note: For the MedSolutions portal, you will also need to select the appropriate **Account Type**: Facility, Physician, Billing Office, and Health Plan.

Creating An Account

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*: Medsolutions

User Registration

UserName:	MYoder	Address:	731 Cool Springs Blvd	Phone:	800-575-4517
Email:	evicorejedi1234@gmail.com	City:	Franklin	Ext:	
Account Type:	Physician	State:	TN	Zip:	37067
First Name:	Mallory	Office Name:	eviCore	Fax:	615-468-4408
Last Name:	Yoder				

Provider Information

Physician FirstName:	TEST	Physician LastName:	DOCTOR	Street Address:	730 COOL SPRINGS BLVD
State:	TN	Tax ID:	*****6789	NPI:	7417417410

Please read below to sign up as an appropriate user.

Physician: An Individual Practitioner, A Medical Group Practice or an assistant of a Physician who would create and check status of a Pre-authorization.

Facility: Diagnostic Imaging Center, In-Office Provider (IOP), Hospital or Facility who would create and check status of a Pre-Authorization.

Billing Office: A billing Office who can check the status of Pre-Authorization, claims and payments. If you represent multiple Tax IDs, please register with your Primary Tax ID. You can tie additional preferred Tax Ids after your initial login.

Health Plan: A Health Plan representative who can check the status of Pre-Authorization and Claims.

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

User Registration

UserName: MYoder
Email: evicorejedi1234@gmail.com
Account Type: Physician
First Name: Mallory
Last Name: Yoder

Provider Information

Physician FirstName: TEST Physician LastName: Yoder
State: TN Tax ID:

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

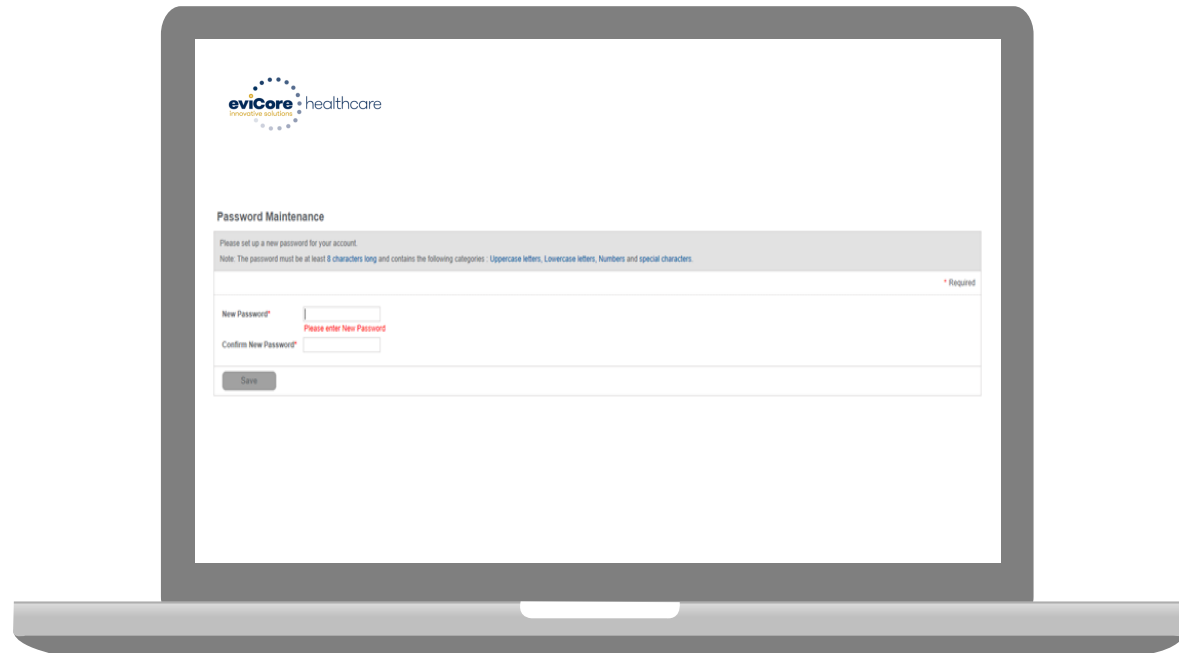


➤ You will receive a message on the screen confirming your registration is successful. You will be sent an email to create your password.

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 a section titled 'Password Maintenance'. The form contains the following elements:

- A header bar with the text: 'Please set up a new password for your account. Note: The password must be at least 8 characters long and contain the following categories: Uppercase letters, Lowercase letters, Numbers and special characters.' A small asterisk and the word 'Required' are on the right.
- A 'New Password*' field with a red error message 'Please enter New Password' below it.
- A 'Confirm New Password*' field.
- A 'Save' button at the bottom.

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

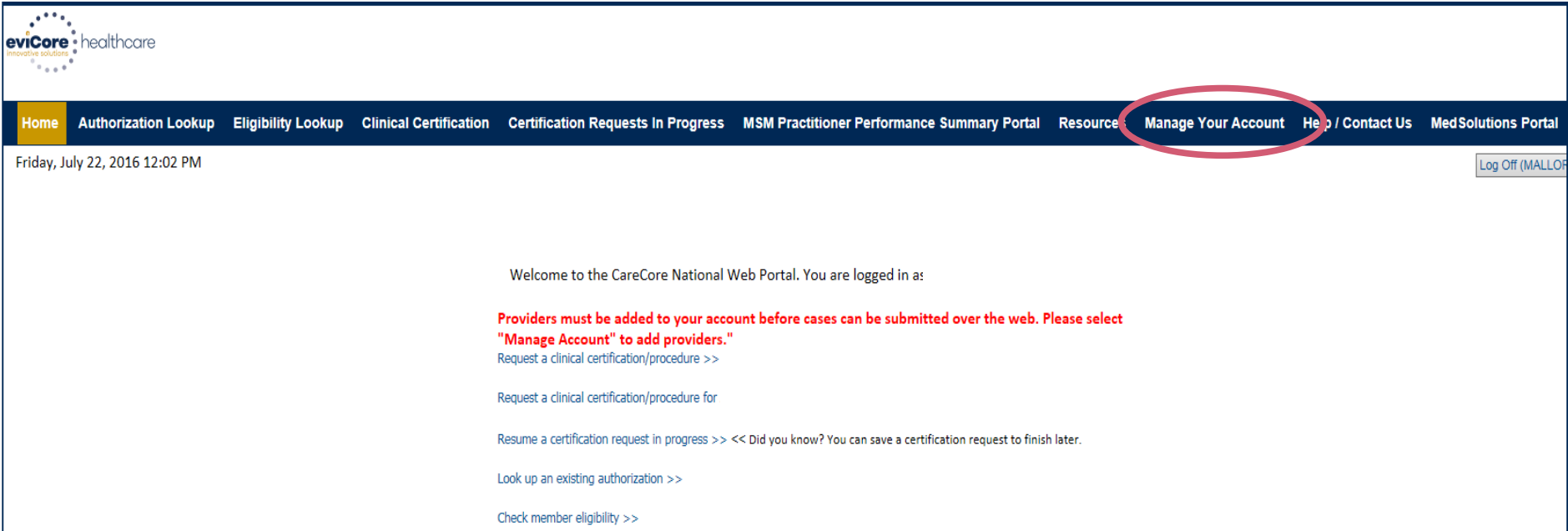
[Forgot UserName](#) | [Password?](#) | [Register](#)



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

Account Overview

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.](#)

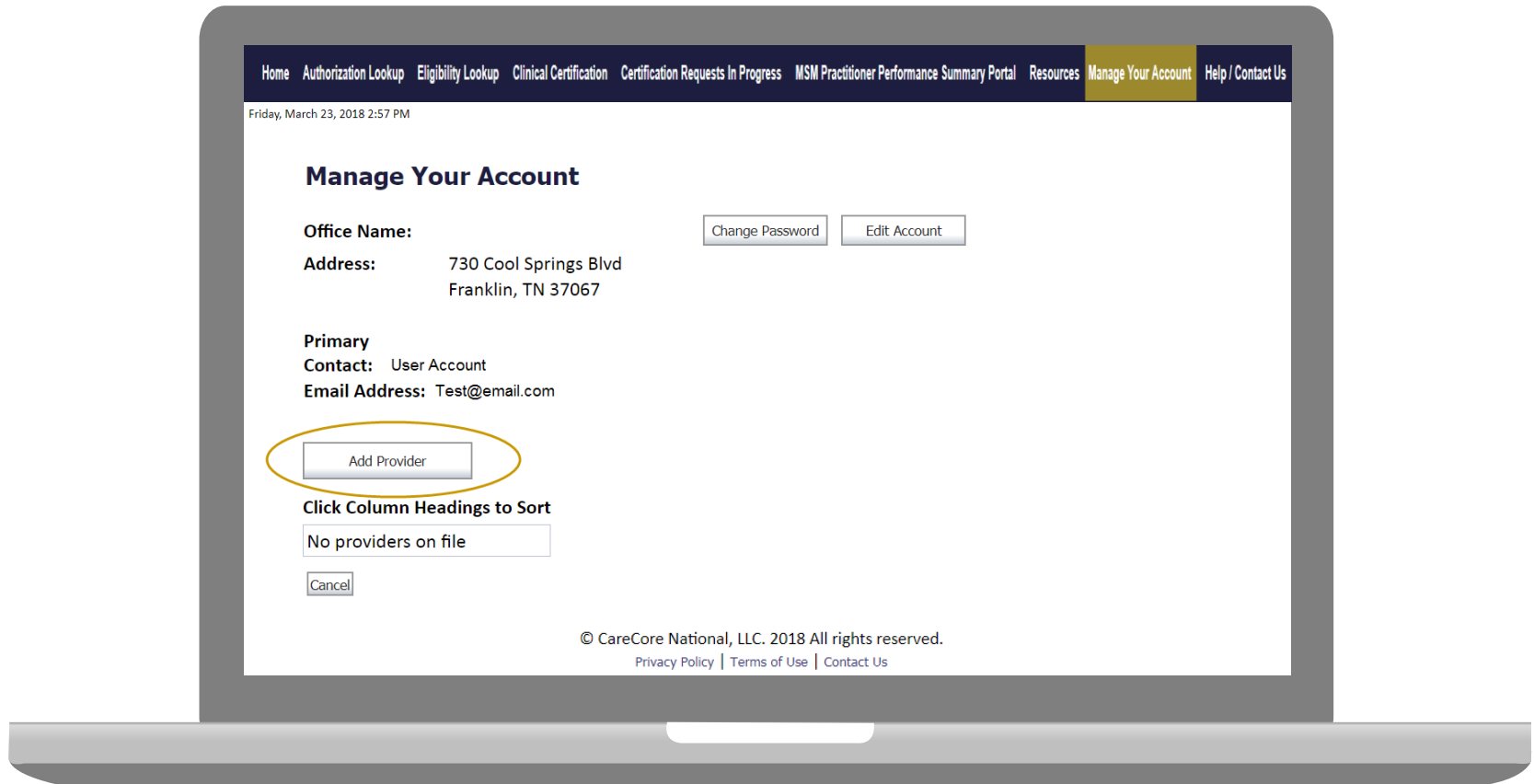
[Look up an existing authorization >>](#)

[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.

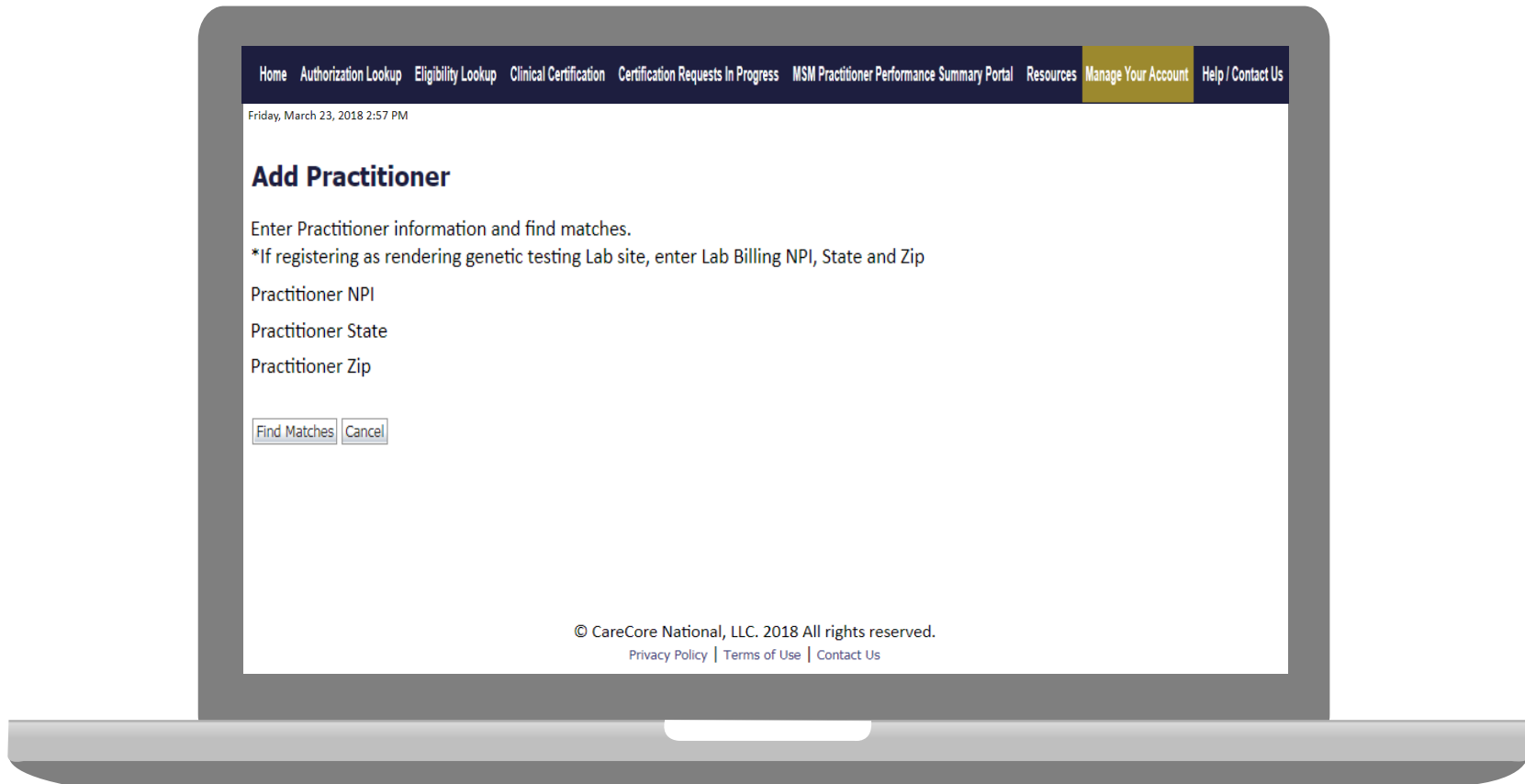
Note: You can access the MedSolutions Portal at any time if you are registered. Click the MedSolutions Portal button on the top right corner to seamlessly toggle back and forth between the two portals without having to log-in multiple accounts.

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 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 date and time 'Friday, March 23, 2018 2:57 PM' are displayed. The main heading is 'Add Practitioner'. The instructions state: 'Enter Practitioner information and find matches.' and '*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip'. The form fields are labeled 'Practitioner NPI', 'Practitioner State', and 'Practitioner Zip'. At the bottom of the form are two buttons: 'Find Matches' and 'Cancel'. The footer of the page contains the 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

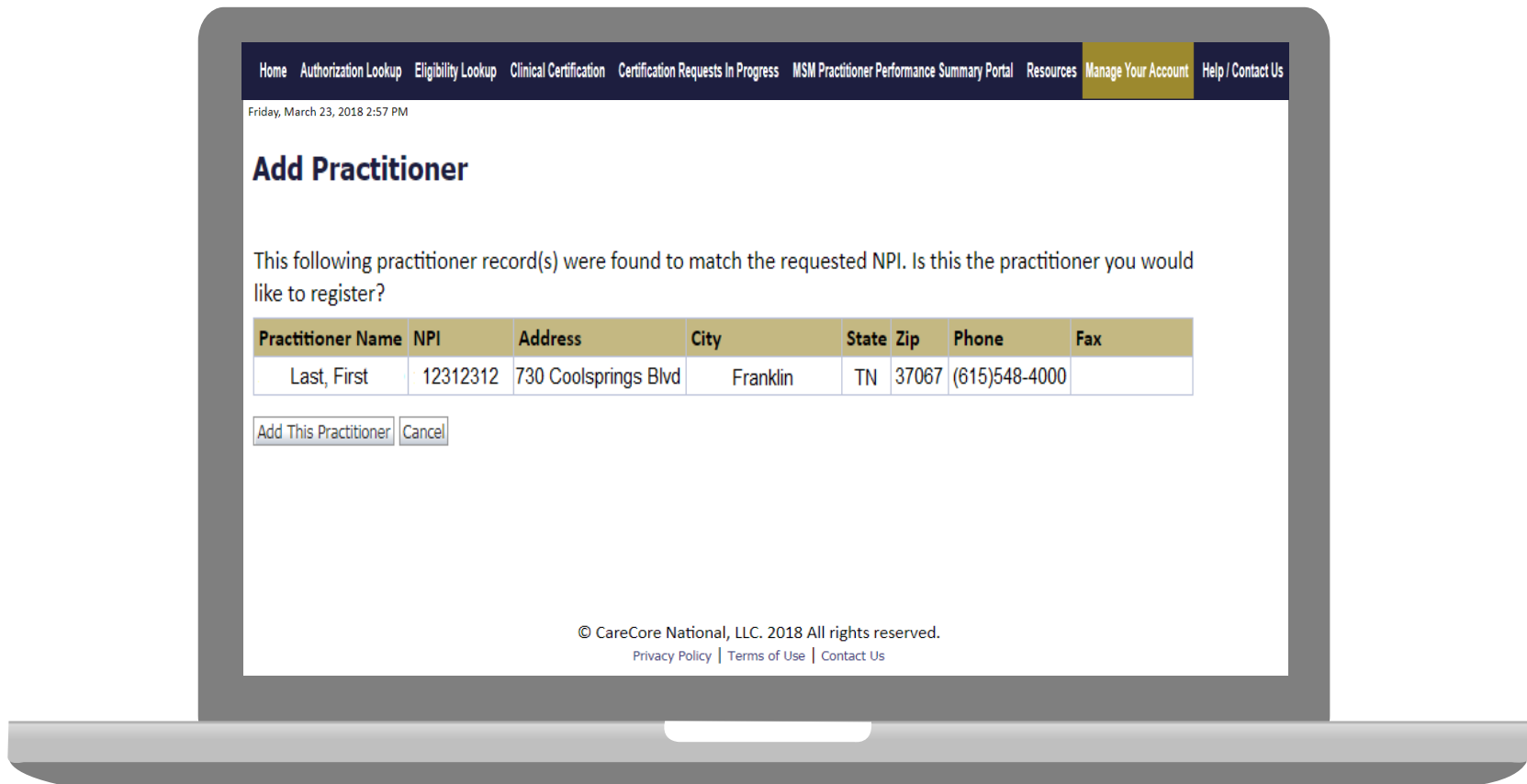
Enter Practitioner information and find matches.
*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip

Practitioner NPI
Practitioner State
Practitioner Zip

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

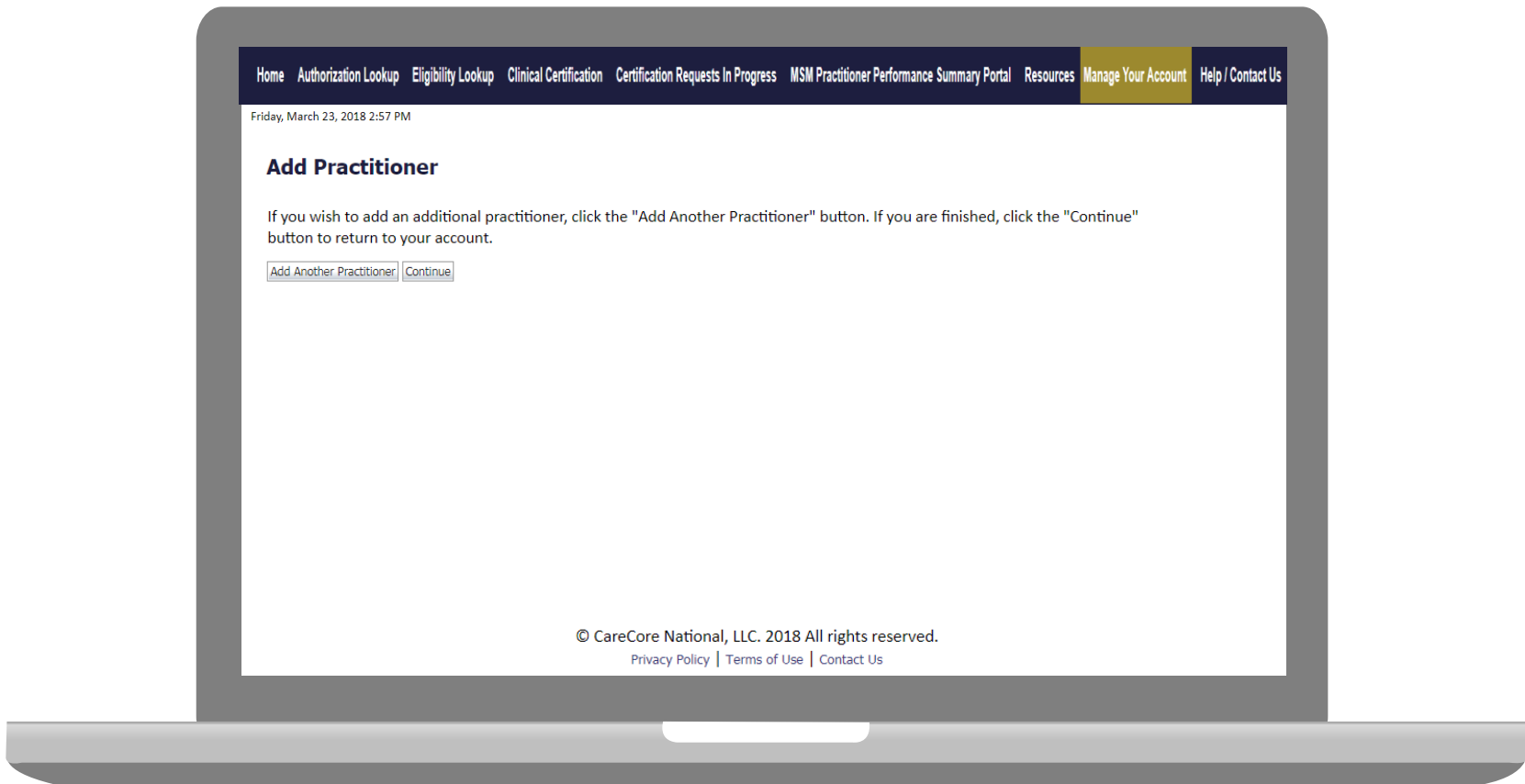
Enter the **Provider's NPI**, **State**, and **Zip Code** to search for the provider record to add to your account. You are able to add multiple Providers to your account.

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

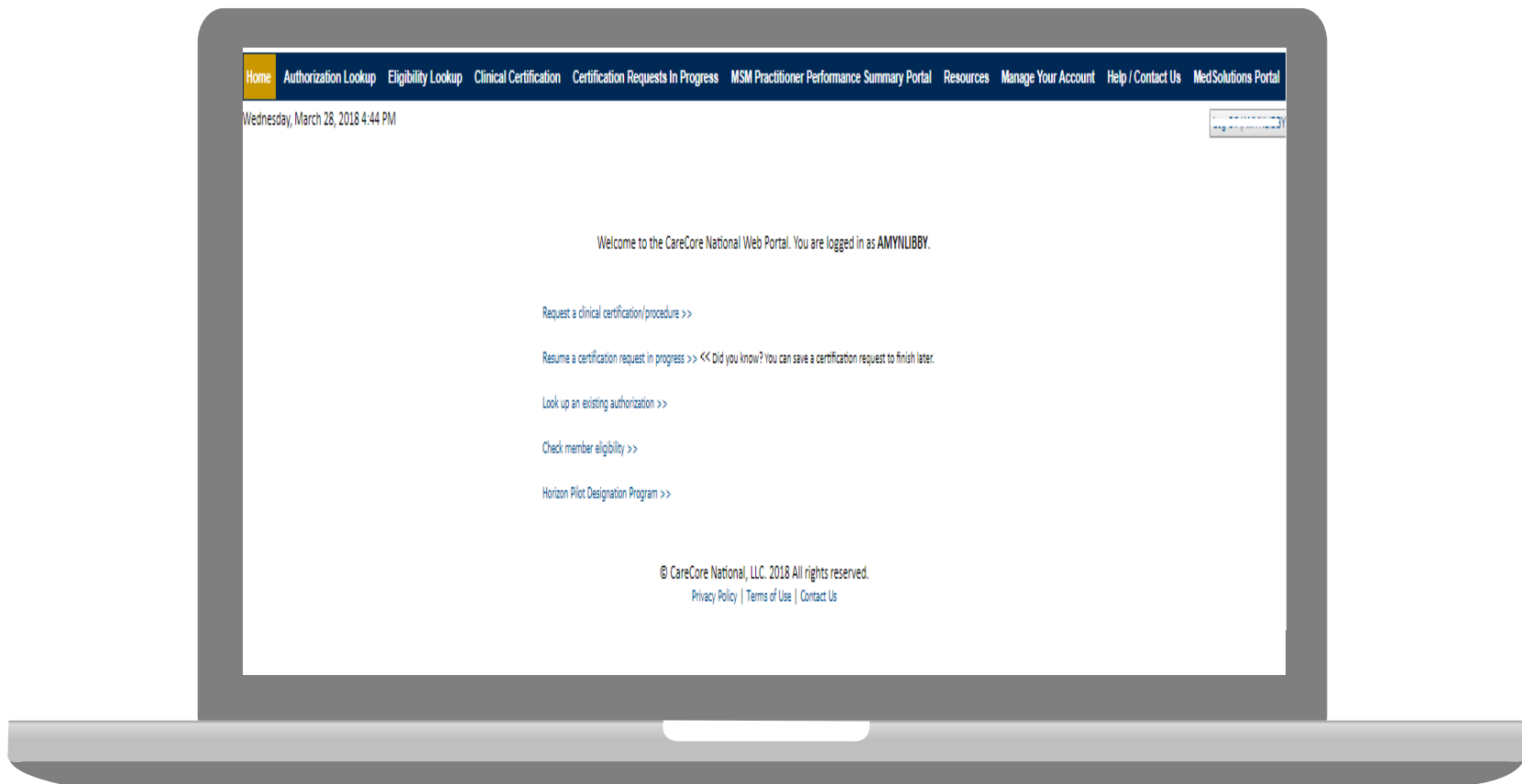
Manage Your Account



- 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.

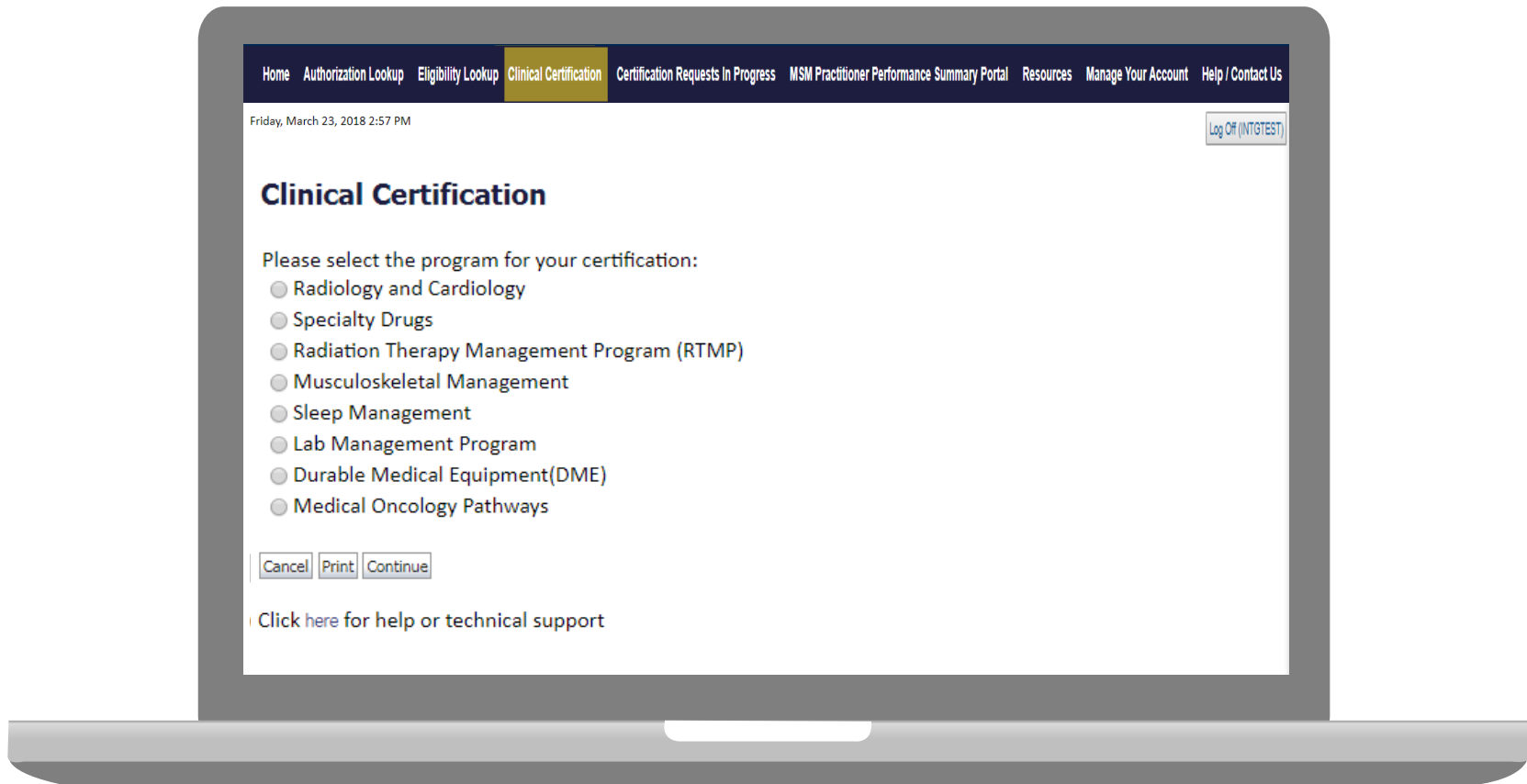
Case Initiation

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 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 on the left, and a 'Log Off (INTGTEST)' button is on the right. The main heading is 'Clinical Certification'. Below this, a prompt says 'Please select the program for your certification:'. A list of eight programs follows, each with an unselected radio button: Radiology and Cardiology, Specialty Drugs, Radiation Therapy Management Program (RTMP), Musculoskeletal Management, Sleep Management, Lab Management Program, Durable Medical Equipment(DME), and Medical Oncology Pathways. At the bottom of the list are three buttons: 'Cancel', 'Print', and 'Continue'. Below these buttons 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 Log Off (INTGTEST)

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

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

Select the **Program** for your certification.

[illegible]

Select Health Plan

The screenshot displays a web portal 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 'Friday, March 23, 2018 2:57 PM' are shown. On the left, a progress bar indicates '20% Complete'. 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: [REDACTED]'. The instruction reads: '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.' A dropdown menu is labeled 'Please Select a Health Plan'. At the bottom of the form are buttons for 'Cancel', 'Back', 'Print', and 'Continue'. A link for 'Click [here](#) for help or technical support' is also present.

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. Once the plan is chosen, please select the provider address in the next drop down box.

Contact Information

The screenshot shows 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 displayed as Friday, March 23, 2018 2:57 PM, and there is a Log Off (INTGTEST) button. On the left, a progress bar indicates 30% completion for the 'Provider and NPI' section. The main form area is titled 'Clinical Certification' and contains fields for Provider's Name, Who to Contact (with 'eviCore' entered), Fax, Phone, Ext., Cell Phone, and Email (with 'Test@test.com' entered). Below the form are buttons for Cancel, Back, Print, and Continue. A link for help or technical support is also present.

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

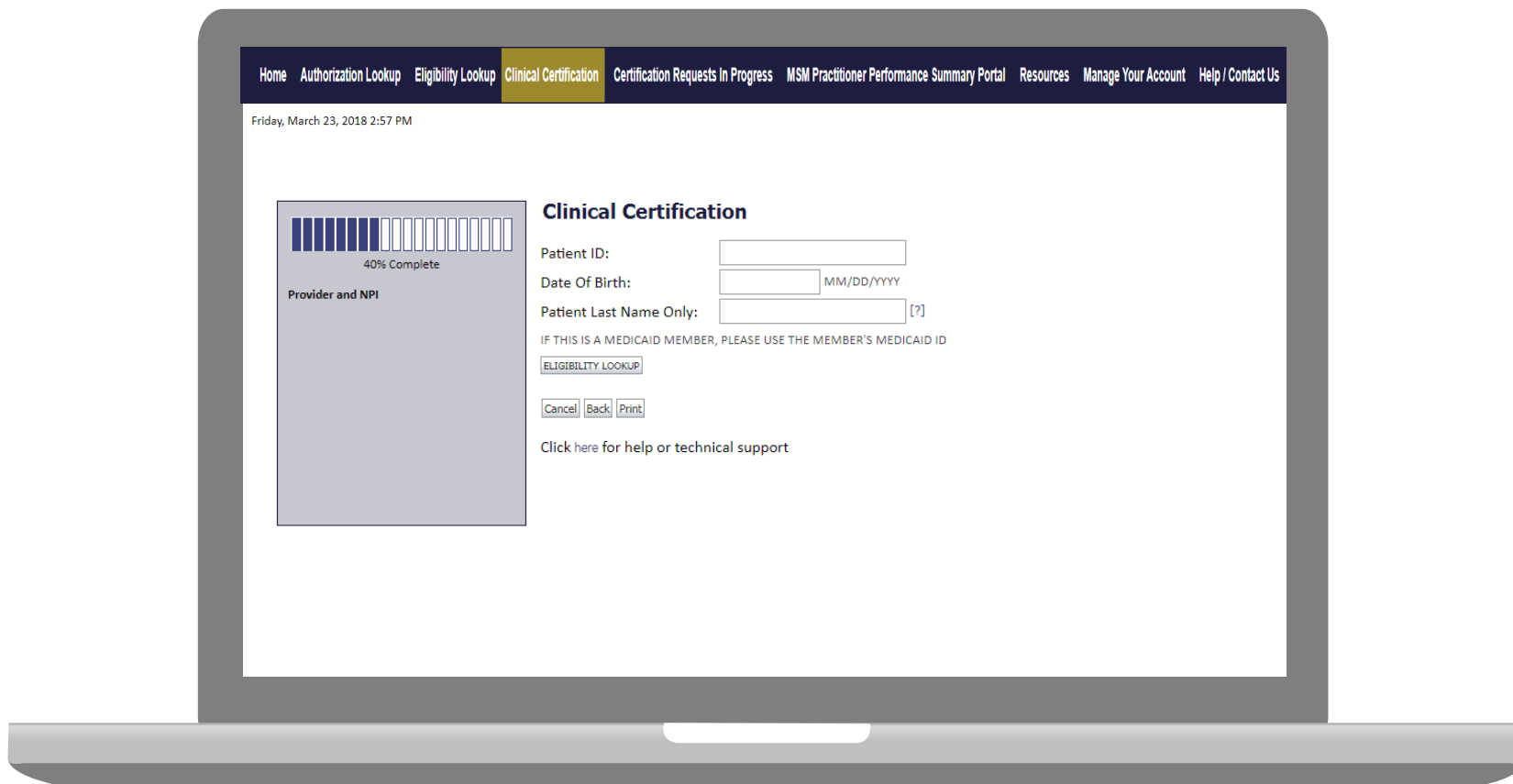
Email

[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 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. The date and time displayed are Friday, March 23, 2018 2:57 PM.

On the left side, there is a progress bar with 16 segments, 13 of which are filled, indicating 40% completion. Below the progress bar is a section titled "Provider and NPI" with a large empty box for input.

The main content area is titled "Clinical Certification" and contains the following fields and buttons:

- Patient ID:
- Date Of Birth: MM/DD/YYYY
- Patient Last Name Only: [?]
- IF THIS IS A MEDICAID MEMBER, PLEASE USE THE MEMBER'S MEDICAID ID
- [ELIGIBILITY LOOKUP](#)
- [Cancel](#) [Back](#) [Print](#)
- [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."**

Member/Procedure Information

The screenshot displays a web application interface for 'Member/Procedure Information'. 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. The date and time 'Friday, March 23, 2018 2:57 PM' are shown below the navigation bar.

The main content area is titled 'Clinical Certification'. It contains the following fields and buttons:

- Patient ID:
- Date Of Birth:
- Patient Last Name Only:
-
- Patient Cell Phone
- Patient Email
-
- [Click here for help or technical support](#)

An 'Attention!' modal dialog is open, containing the following fields and options:

- Patient ID:
- Patient Name:
- Time:
- Has this procedure been performed?
-

Verify if the procedure has already been performed.

Clinical Details

Clinical Certification

This procedure will be performed on 2/21/2017. [CHANGE](#)

Musculoskeletal Management Procedures

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

Diagnosis

Primary Diagnosis Code: **M25.561**

Description: **Pain in right knee**

[Change Primary Diagnosis](#)

Select a Secondary Diagnosis Code (Lookup by Code or Description)

Secondary diagnosis is optional for Musculoskeletal Management

[LOOKUP](#)

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

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

Verify Service Selection

The screenshot shows a web portal interface for a provider. At the top, there is a navigation bar with links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (which is highlighted), Certification Requests In Progress, Physician Criteria, and Manage Your Account. Below the navigation bar, the date and time are displayed: Friday, February 24, 2017 4:48 PM. The main content area is titled "Clinical Certification" and contains a progress bar showing 60% completion. To the left of the progress bar, there are two sections: "Provider and NPI" and "Patient", both with blurred information and an "EDIT" button. To the right of the progress bar, there is a list of fields: "Procedure Date:", "CPT Code:", "Description:", "Primary Diagnosis Code:", "Primary Diagnosis:", "Secondary Diagnosis Code:", and "Secondary Diagnosis:". The values for these fields are: "JOINT", "JOINT SURGERY", "M25.512", "Pain in left shoulder", and "Change Procedure or Primary Diagnosis" and "Change Secondary Diagnosis" for the secondary diagnosis section. At the bottom of the form, there are buttons for "Cancel", "Back", "Print", and "Continue". Below the buttons, there is a link: "Click here for help or technical support".

Provider Web Portal

Home | Authorization Lookup | Eligibility Lookup | **Clinical Certification** | Certification Requests In Progress | Physician Criteria | Manage Your Account

Friday, February 24, 2017 4:48 PM

Clinical Certification

Confirm your service selection.

Procedure Date: [Blank]

CPT Code: JOINT

Description: JOINT SURGERY

Primary Diagnosis Code: M25.512

Primary Diagnosis: Pain in left shoulder

Secondary Diagnosis Code:

Secondary Diagnosis:
Change Procedure or Primary Diagnosis
Change Secondary Diagnosis

Cancel Back Print Continue

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

Site Selection

The screenshot shows a web application interface for Clinical Certification. At the top is a navigation bar with 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 are displayed: Friday, March 23, 2018 2:57 PM. The main heading is "Clinical Certification". On the left side, there is a sidebar with a progress bar showing "80% Complete". Below the progress bar, there are three sections: "Provider and NPI" with a text input field and an "EDIT" link; "Patient" with a text input field and an "EDIT" link; and "Service" with a text input field and an "EDIT" link. The "Service" field contains the text "71250 CT THORAX W/O CONTRAST" and "R06.02 Shortness of breath". The main content area is titled "Specific Site Search" and contains the following text: "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." Below this text are four input fields: "NPI:" with the value "1234567890", "Zip Code:" with an empty field, "TIN:" with an empty field, and "City:" with an empty field. To the right of these fields is a "Site Name:" field with a dropdown menu showing "Exact match" and "Starts with" options. A "LOOKUP SITE" button is located to the right of the "Site Name" field. At the bottom of the main content area, there are "Cancel", "Back", and "Print" buttons, and a link that says "Click here for help or technical support".

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

Site Selection



The image shows a laptop screen with a web form titled "Clinical Certification". The form includes a "Selected Site:" label, a "FIND NEW SITE" button, a "Site Email (optional)" label, and an email input field. At the bottom of the form are four buttons: "Cancel", "Back", "Print", and "Continue". Below the buttons is a link that says "Click [here](#) for help or technical support".

Clinical Certification

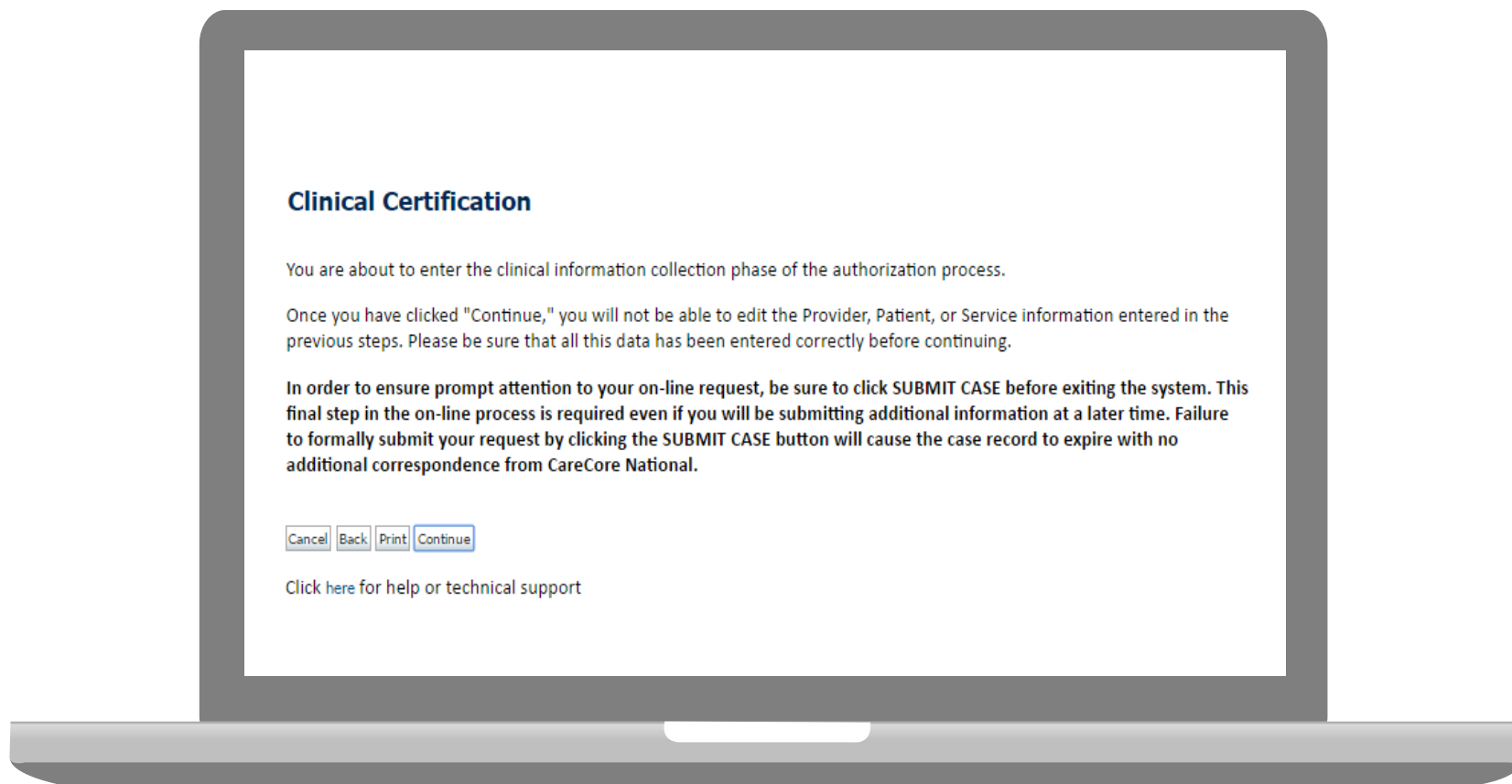
Selected Site:

Site Email (optional)

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

Confirm the site selection.

Clinical Certification



- Verify all information entered and make any needed changes prior to moving into the clinical collection phase of the prior authorization process.
- You will not have the opportunity to make changes after that point.

Contact Information

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

If your request is urgent select No, if the case is standard select Yes.



Clinical Certification

Is this case Routine/Standard?

☐ Yes ☐ No

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

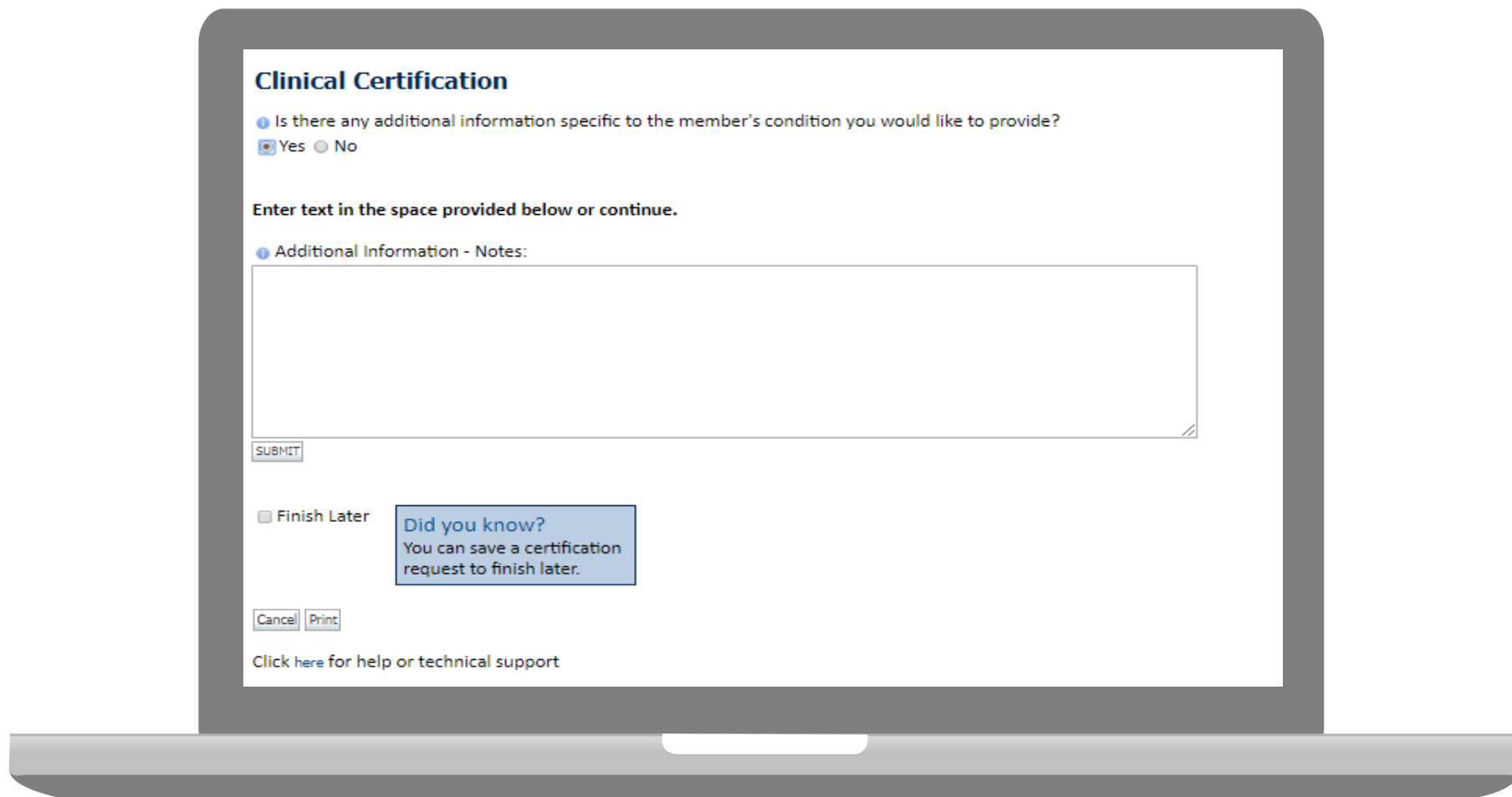
You can upload up to **FIVE documents** in .doc, .docx, or .pdf format. Your case will only be considered Urgent if there is a successful upload.

Pause/Save Option

The screenshot shows a web application interface for Clinical Certification. At the top, there is a navigation bar with links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, Physician Criteria, and Manage Your Account. Below the navigation bar, the date and time are displayed: Friday, April 25, 2014 9:57 AM. The main heading is "Clinical Certification". A question is asked: "What is the PRIMARY area of complaint? (choose ONE):". Below this question is a dropdown menu with the following options: Head/Neck - Cervical Spine, Upper Back - Thoracic Spine, Lower Back - Lumbar Spine, Upper Extremity, Lower Extremity, and Unknown. A "SUBMIT" button is located below the dropdown menu. Below the "SUBMIT" button is a checkbox labeled "Finish Later". A blue box with the text "Did you know? You can save a certification request to finish later." is positioned below the checkbox. At the bottom of the form, there are two buttons: "Cancel" and "Print".

➤ 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.

Medical Review



The screenshot shows a laptop screen displaying a web form titled "Clinical Certification". The form includes a question about providing additional information, a text input box for notes, and buttons for "SUBMIT", "Finish Later", "Cancel", and "Print". A blue callout box provides a tip about saving the request to finish later. A link for help or technical support is at the bottom.

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

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:

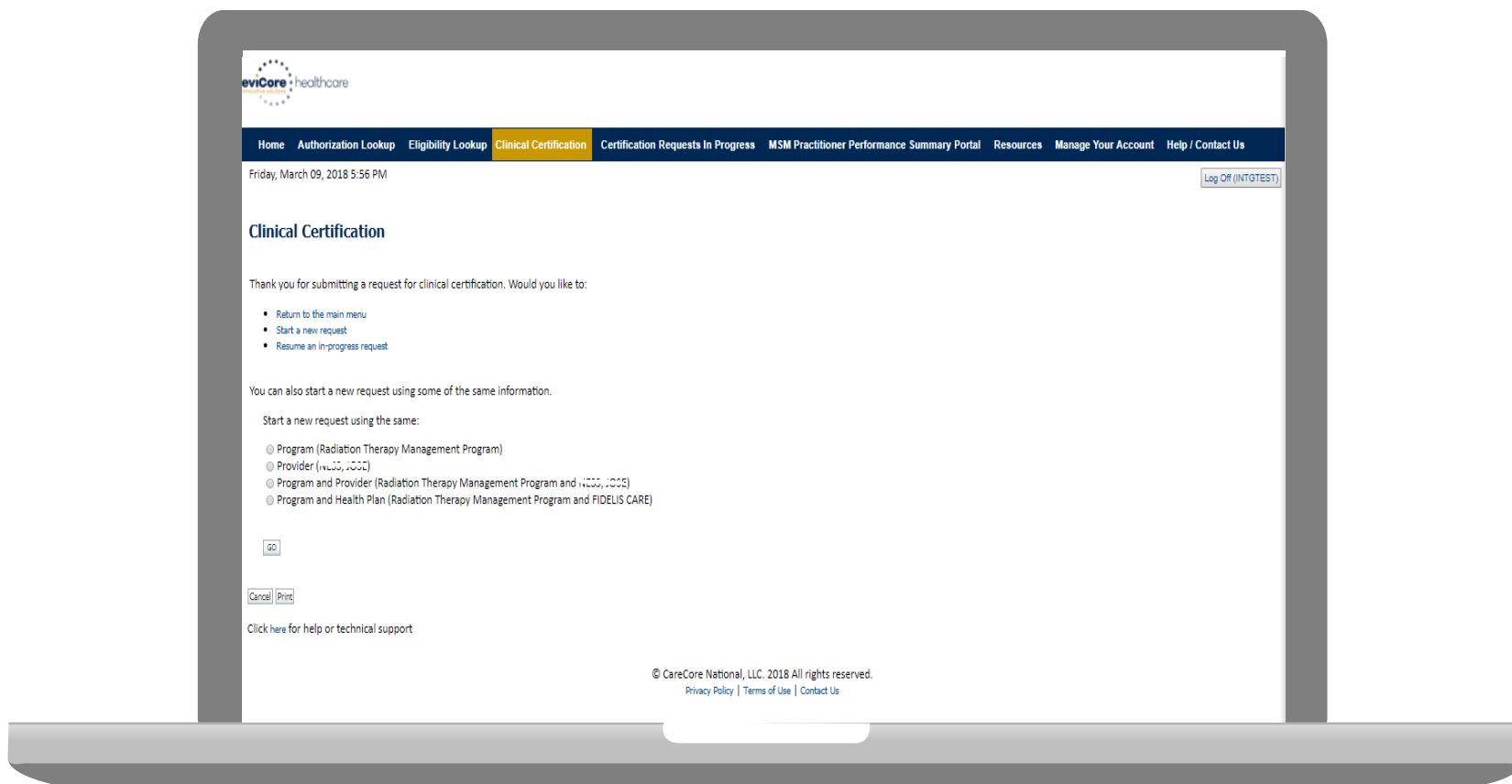
Status: Your case has been Approved.

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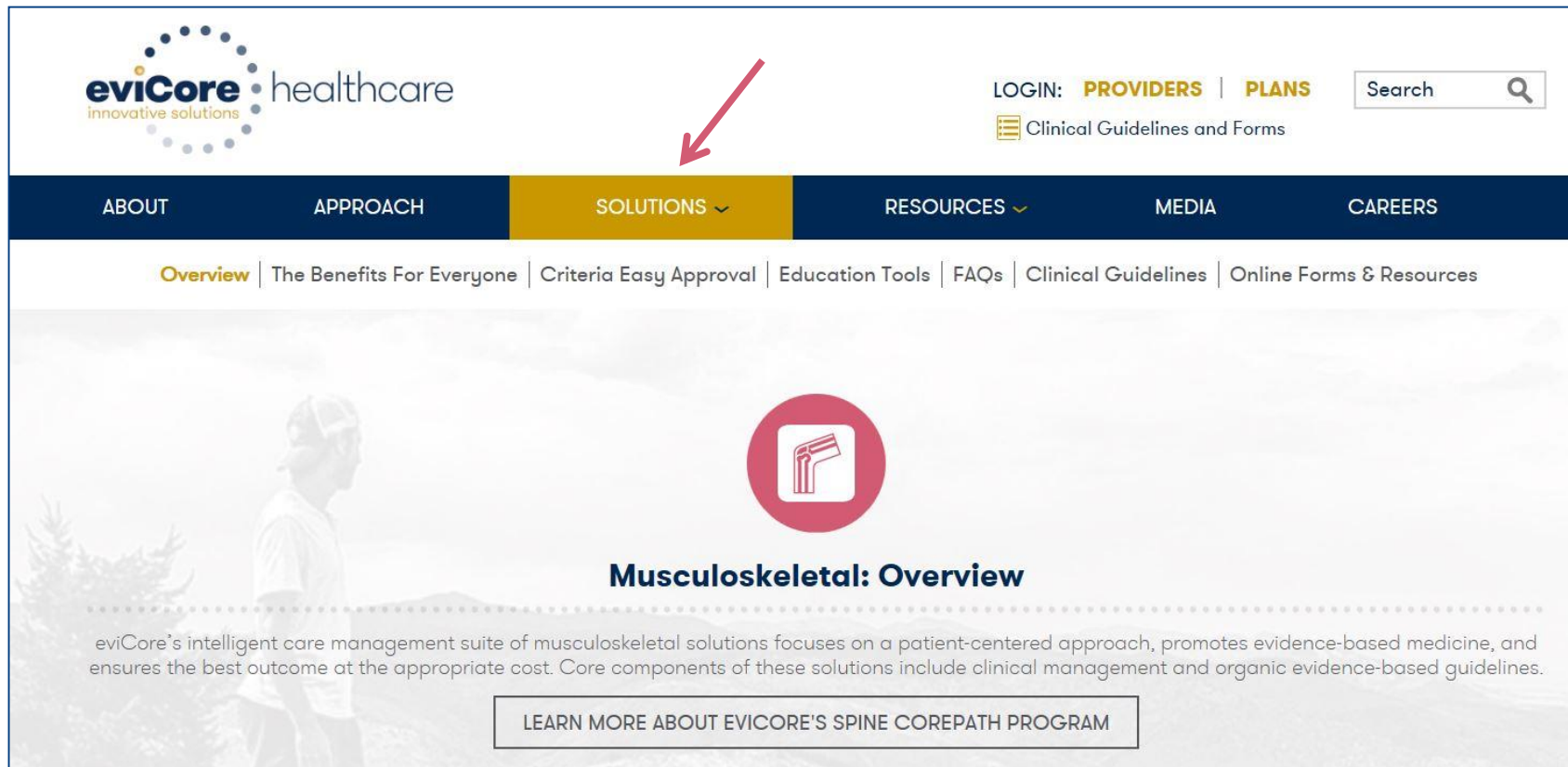
You may also confirm the patient's eligibility by selecting the **Eligibility Lookup** tab.

Provider Resources



Musculoskeletal Online Resources

Clinical Guidelines, FAQ's, Online Forms, and other important resources can be accessed at www.evicore.com. Click **"Solutions"** from the menu bar, and select the specific program needed.



The screenshot displays the eviCore healthcare website. The header includes the eviCore logo with the tagline 'innovative solutions', a login section for 'PROVIDERS' and 'PLANS', and a search bar. A red arrow points to the 'SOLUTIONS' menu item in the navigation bar. Below the navigation bar, a secondary menu lists various resources, with 'Overview' highlighted. The main content area features a large image of a person in a hard hat and a red circular icon with a white medical symbol. The title 'Musculoskeletal: Overview' is prominently displayed, followed by a paragraph describing eviCore's intelligent care management suite. A button at the bottom invites users to 'LEARN MORE ABOUT EVICORE'S SPINE COREPATH PROGRAM'.

eviCore healthcare
innovative solutions

LOGIN: **PROVIDERS** | **PLANS**
Clinical Guidelines and Forms

Search

ABOUT APPROACH **SOLUTIONS** RESOURCES MEDIA CAREERS

Overview | The Benefits For Everyone | Criteria Easy Approval | Education Tools | FAQs | Clinical Guidelines | Online Forms & Resources

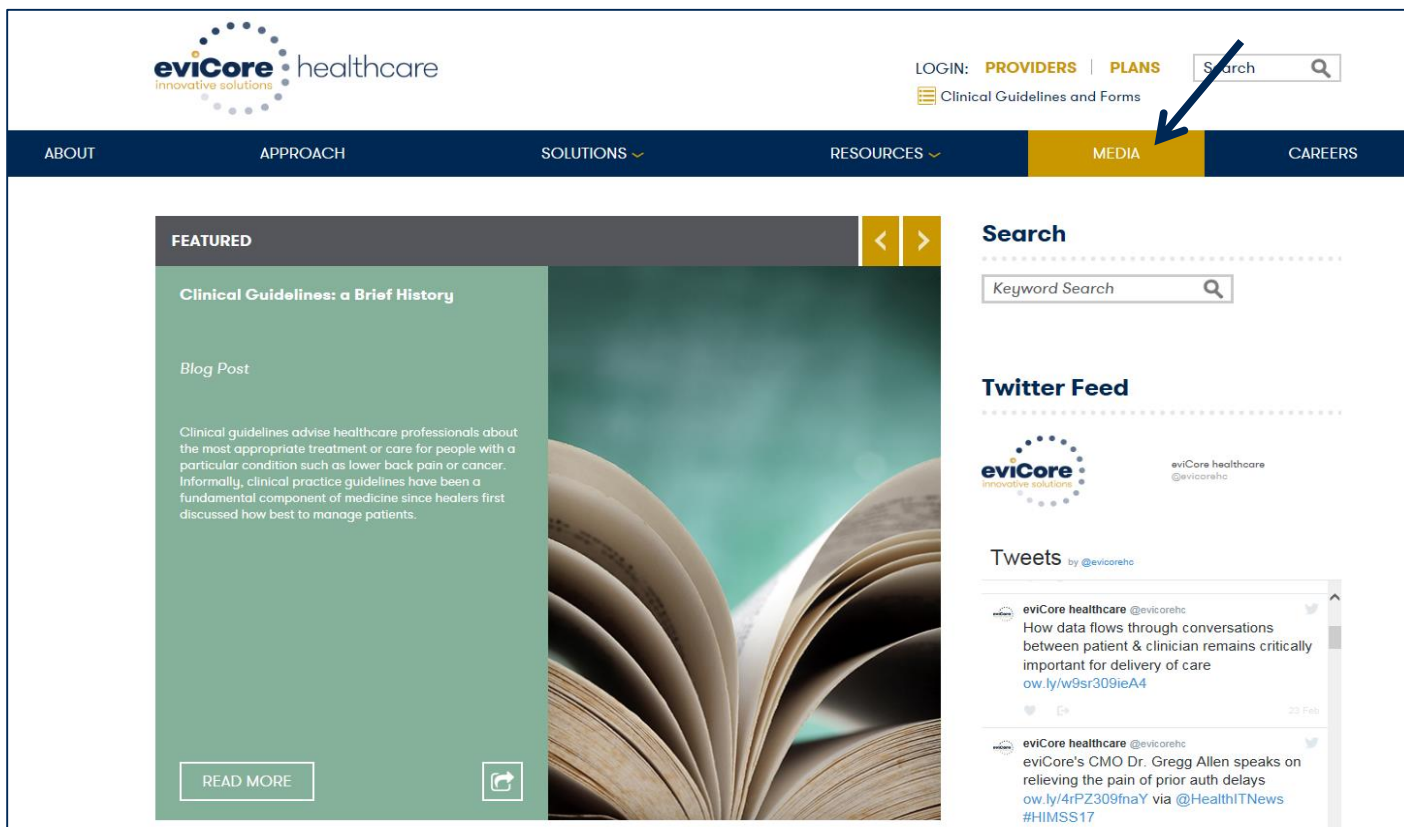
Musculoskeletal: Overview

eviCore's intelligent care management suite of musculoskeletal solutions focuses on a patient-centered approach, promotes evidence-based medicine, and ensures the best outcome at the appropriate cost. Core components of these solutions include clinical management and organic evidence-based guidelines.

LEARN MORE ABOUT EVICORE'S SPINE COREPATH PROGRAM

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 prior authorizations, 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: Prior Authorization Call Center



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

7:00 AM - 8:00 PM (Local Time): 888-209-5762

- Obtain pre-certification 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

Provider Resources: Web-Based Services



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

www.evicore.com

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

- Request authorizations and check case status online – 24/7
- Web Portal registration and questions
- 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

- Eligibility issues (member, rendering facility, and/or ordering physician)
- Questions regarding accuracy assessment, accreditation, and/or credentialing
- Issues experienced during case creation
- Request for an authorization to be resent to the health plan

Provider Resources: Implementation Site



Pre-Certification
Call Center



Web-Based
Services



Client Provider
Operations



Documents

Provider Enrollment Questions Contact Scott & White Health Plan at 800-321-7947

Scott & White Health Plan Implementation site - includes all implementation documents:

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

- **Provider Orientation Presentation**
- **CPT code list of the procedures that require prior authorization**
- **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.

Thank You!

