Lab Management | Genetic Testing

Provider Orientation Session for Alliance Health

July 2024

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Agenda

- Program Overview
- Submitting Requests
- Prior Authorization Outcomes, Special Considerations & Post Decision Options
- Provider Portal Overview
- Additional Provider Portal Features
- Provider Resources
- Q & A
- Appendix
  - Portal Case Submission
  - Online P2P Scheduling Tool

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Program Overview

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Clinical Approach

"Our guidelines are the foundation of who we are"

eviCore's Evidence-Based Guidelines

The foundation of our solutions

Annually Reviewed Guidelines	Experts associated with academic institutions	Current clinical literature

Evidence-based medical policy incorporating:

- Independent health technology assessments

- Annual review of current clinical literature

- Internal specialty expertise

- National society recommendations

- External academic institution subject matter experts

- Medical Advisory Board

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Alliance Health Medicaid Prior Authorization Services

eviCore healthcare (eviCore) will begin accepting prior authorization requests for Laboratory services on July 1st for dates of service **July 1st, 2024** and after.

Applicable Membership:	Prior authorization applies to the following services:	Prior authorization from eviCore does NOT apply to services performed in:
• Medicaid	• Outpatient • Elective / Non-emergent	• Emergency Rooms • Observation Services • Inpatient Stays

*Providers should verify member eligibility and benefits by contacting the number listed on the back of the member's ID card.

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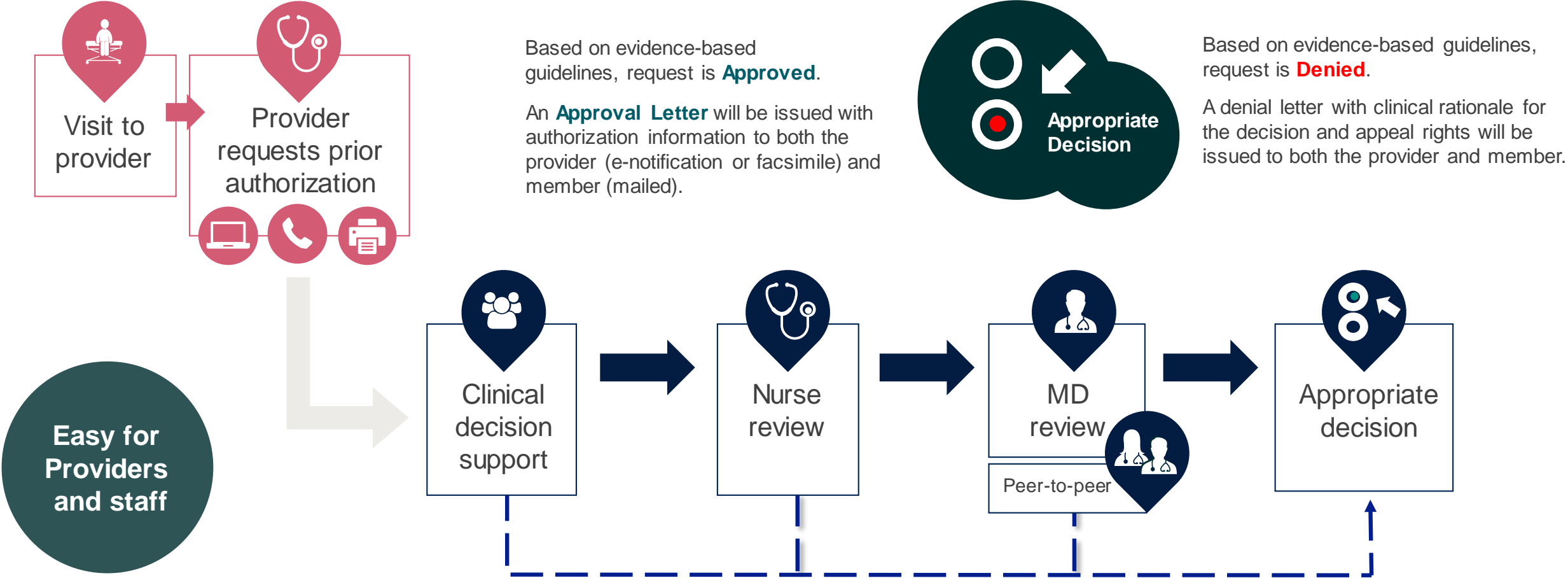HEALTH SERVICES

Lab Management Solution

Genetic Testing

- Hereditary Cancer Syndromes

- Carrier Screening Tests

- Tumor Marker / Molecular profiling

- Hereditary Cardiac Disorders

- Cardiovascular Disease and Thrombosis Risk Variant Testing

- Pharmacogenomics Testing

- Neurologic Disorders

- Mitochondrial Disease Testing

- Intellectual Disability / Developmental Disorders

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Submitting Requests

Utilization Management – the Prior Authorization Process

Visit to provider

Provider requests prior authorization

Based on evidence-based guidelines, request is **Approved**.

An **Approval Letter** will be issued with authorization information to both the provider (e-notification or facsimile) and member (mailed).

Appropriate Decision

Based on evidence-based guidelines, request is **Denied**.

A denial letter with clinical rationale for the decision and appeal rights will be issued to both the provider and member.

Easy for Providers and staff

Clinical decision support

Nurse review

MD review

Peer-to-peer

Appropriate decision

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Methods to Submit Prior Authorization Requests

eviCore Provider Portal (preferred)

- **Saves time**: Quicker process than phone authorization requests

- **Available 24/7**: You can access the portal any time and any day

- **Save your progress**: If you need to step away, you can save your progress and resume later

- **Upload additional clinical information**: No need to fax in supporting clinical documentation, it can be uploaded on the portal to support a new request or when additional information is requested

- **View and print determination information**: Check case status in real-time

- **Dashboard**: View all recently submitted cases

- **E-notification**: Opt-in to receive email notifications when there is a change to case status

- **Self-Service Tool**: schedule clinical consultations and initiate appeals via the portal

- **Duplication feature**: If you are submitting more than one prior authorization request, you can duplicate information to expedite submittals
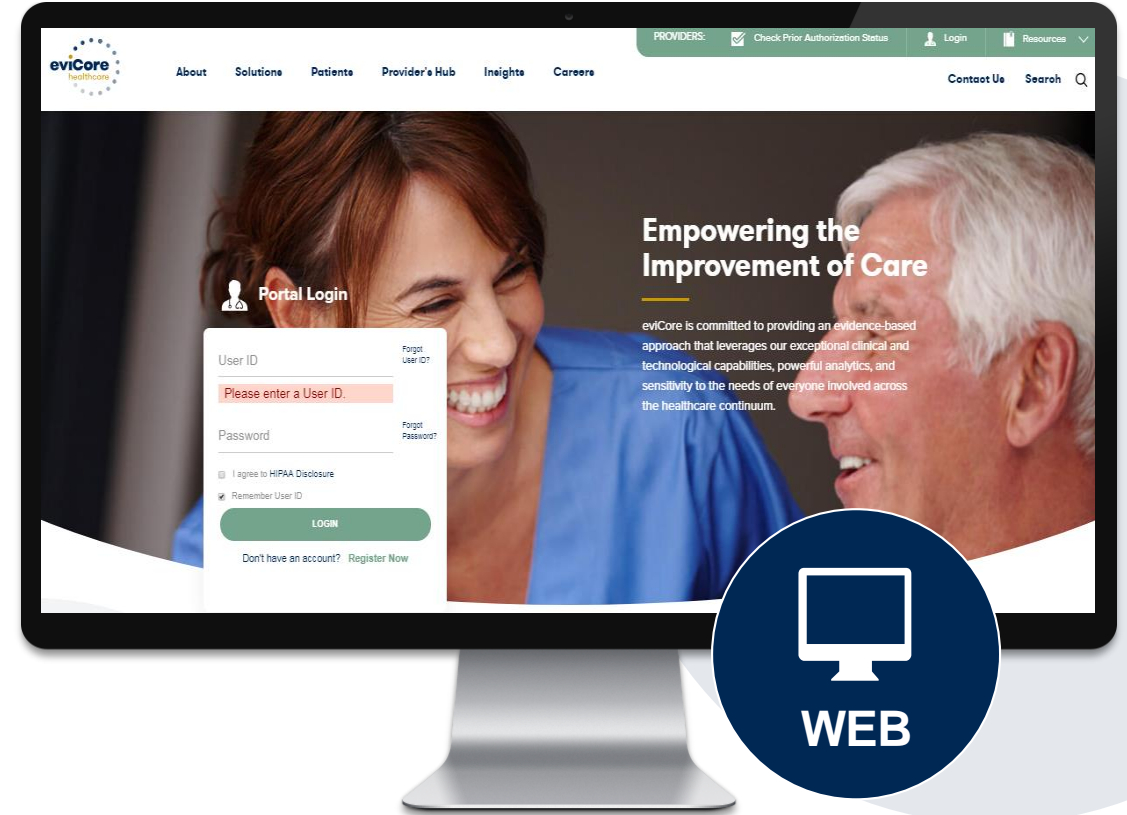
Phone Number:
888-333-8641
Monday through Friday:
7 am – 7 pm local time

Fax Number:
Lab:| 844-545-9213

Necessary Information for Prior Authorization

To obtain prior authorization on the very first submission, the provider submitting the request will need to gather four categories of information:

1. Member
- Health Plan ID
- Member name
- Date of birth (DOB)

2. Referring (Ordering) Physician
- Physician name
- National provider identifier (NPI)
- Phone & fax number

3. Rendering Facility
- Facility name
- Address
- National provider identifier (NPI)
- Tax identification number (TIN)
- Phone & fax number

4. Supporting Clinical
- Pertinent clinical information to substantiate medical necessity for the requested service
- CPT/HCPCS Code(s)
- Diagnosis Code(s)
- Previous test results

Necessary Information

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Insufficient Clinical – Additional Documentation Needed

Additional Documentation to Support Medical Necessity

If during case build all required pieces of documentation are not received, or are insufficient for eviCore to reach a determination, the following will occur:

A Hold Letter will be faxed to the Requesting Provider requesting additional documentation	The Provider must submit the additional information to eviCore	eviCore will review the additional documentation and reach a determination
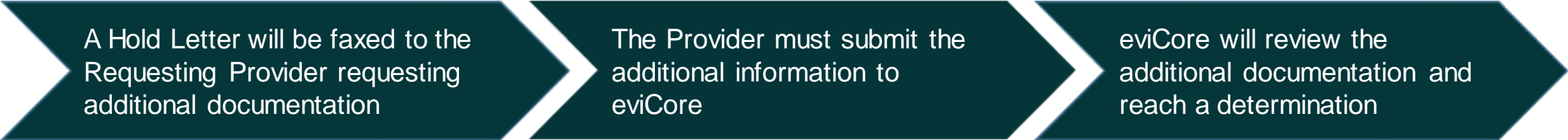
The Hold notification will inform the provider about what clinical information is needed as well as the <u>date by which it is needed.</u>

Requested information must be received within the timeframe as specified in the Hold Letter, or eviCore will render a determination based on the original submission.

Determination notifications will be sent

Appropriate Decision

Providing Additional Information

I've received a request for additional clinical information. What's next? There are three ways to supply the requested information to eviCore for review:

- Additional clinical information must be submitted to eviCore in advance of the due date referenced

  - Additional clinical information should be submitted to eviCore for consideration per the instructions received, clinical can be **faxed** to **844-545-9213** or **uploaded** directly into the case via the provider portal at **www.eviCore.com (preferred)**

- Alternatively, providers can choose to request a **Pre-Decision Clinical Consultation** instead of submitting additional clinical information. This consultation can be requested via the eviCore website (see the end of this presentation for instructions).

  - The Pre-Decision Clinical Consultation must occur prior to the due date referenced

- If the additional clinical documentation is shared with eviCore via fax or uploaded on the portal, that clinical will be sent on to be reviewed for medical necessity determination. Once the documentation is shared, the case advances to review and the case is **not** held further for a Pre-Decision Clinical Consultation, even if the due date has not yet lapsed

- Once the determination is made, notifications will go out to the ordering provider, rendering lab and member, and status will be available on **www.eviCore.com**

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Prior Authorization Outcomes, Special Considerations, and Post Decision Options

Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are valid for 60 days from the specimen collection date.

- **Denied Requests**: Based on evidence-based guidelines, if a request is determined as inappropriate, a notification with the rationale for the decision and post decision/ appeal rights will be issued

- **Partially Approved Requests**: In instances where multiple CPT codes are requested, some may be approved and some denied. In these instances, the determination letter will specify what has been approved as well as post decision options for denied codes, including denied Site of Care (if applicable).

Notifications:

- Authorization letters will be faxed to the ordering physician

- Web initiated cases will receive e-notifications when a user opts in to receive

- Members will receive a letter by mail

- Approval information can be printed on demand from the eviCore portal:

  www.eviCore.com

Special Circumstances

Retrospective (Retro) Authorization Requests

- Retrospective requests are not in scope for Alliance Health.

Urgent Prior Authorization Requests

- eviCore uses the NCQA/URAC definition of **urgent**: when a delay in decision-making may seriously jeopardize the life or health of the member

- Can be initiated on provider portal or by phone

- Urgent cases are typically reviewed within 24 to 72 hours

Special Circumstances cont.

Alternative Recommendation

- An alternative recommendation may be offered, based on eviCore's evidence-based clinical guidelines

- The ordering provider can either accept the alternative recommendation or request a reconsideration for the original request

- Providers have up to 14 calendar days to contact eviCore to accept the alternative recommendation

Authorization Update

- If updates are needed on an existing authorization, you can contact eviCore by phone at **1-888-333-8641**.

- While eviCore needs to know if changes are made to the approved request, any change could result in the need for a separate clinical review and require a new request (and the original approved request would need to be withdrawn).

- If the authorization is not updated, it may result in a claim denial.

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Post-Decision Options: Medicaid Members

My case has been denied. What's next?

Your determination letter is the best immediate source of information to assess what options exist on a case that has been denied. You may also call eviCore at **1-888-333-8641** to speak to an agent who can provide available option(s) and instruction on how to proceed. Alternatively, select 'All Post Decisions' on **www.eviCore.com** , under the authorization lookup function, to see available options.

Reconsiderations

- Reconsiderations must be requested within 14 business days after the determination date

- Reconsiderations can be requested in writing or verbally via a Clinical Consultation with an eviCore physician

Appeals

- eviCore **will not** process first-level appeals

- Please refer to the denial notice for instructions, and requirements, to submit an appeal

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Provider Portal Overview

Portal Compatibility

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

- Microsoft Edge

- Google Chrome

- Mozilla Firefox

+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.

![Provider's Hub Portal Login screen showing User ID and Password fields with Forgot User ID?, Forgot Password?, checkboxes for "I agree to HIPAA Disclosure" and "Remember User ID", a LOGIN button, and "Don't have an account? Register Now" link. Navigation shows Solutions, Patients, Provider's Hub.]
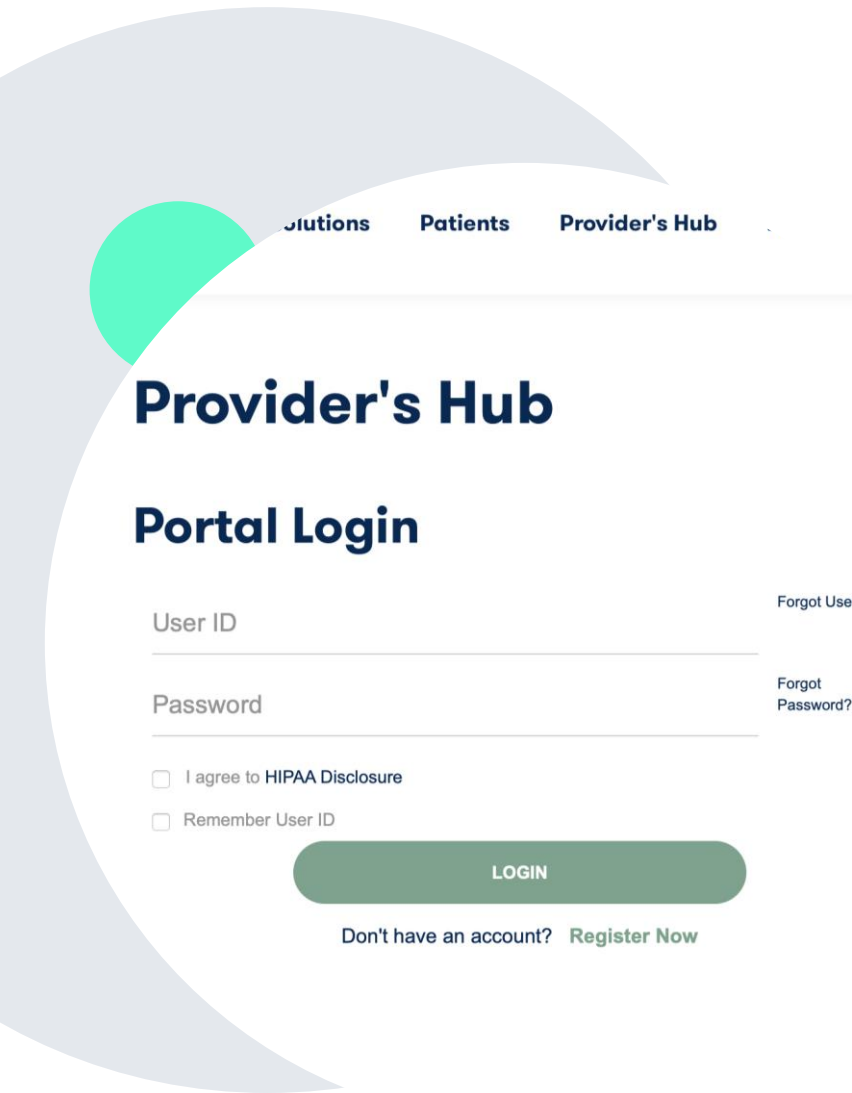
eviCore healthcare Website

Visit www.evicore.com

Already a user?

If you already have access to eviCore's online portal, simply log-in with your User ID and Password, complete the Multi-Factor Authentication, and begin submitting requests in real-time!

Don't have an account?

Click "Register Now" and provide the necessary information to receive access today!

Creating An Account

- Select **CareCore National** as the Default Portal, complete the User Information section in full, and **Submit Registration.**
- You will immediately be sent an email with a link to create a password. Once you have created a password, you will be redirected to the log-in page.

Multi-Factor Authentication MFA

- To safeguard your patients' private health information (PHI) we have implemented a **multifactor authentication (MFA)** process.

- After you log in, you will be prompted to enter your email address or mobile phone number. This preference will be saved for future use.

- Select "**Send Pin**," and a 6-digit pin is generated and sent to your chosen device.

- After entering the provided PIN# in the portal display, you will successfully be authenticated and logged in. **You will need to perform the MFA process every time you log in.**

Add Practitioners

Manage Your Account

Office Name:

CHANGE PASSWORD   EDIT ACCOUNT

Address:

Primary Contact:

Email Address:

ADD PROVIDER

Click Column Headings to Sort

No providers on file

CANCEL

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

FIND MATCHES   CANCEL

- Select the "Manage Your Account" tab, then the Add Provider
- Enter the NPI, state, and zip code to search for the provider
- Select the matching record based upon your search criteria
- Once you have selected a practitioner, your registration will be complete
- You can also click "Add Another Practitioner" to add another provider to your account
- You can access the "Manage Your Account" at any time to make any necessary updates or changes

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Welcome Screen | CareCore National

- **You can access the MedSolutions Portal at any time.**
- **Click the MedSolutions Portal on the banner to seamlessly toggle back and forth between the two portals.**

eviCore Provider Portal | Add Providers
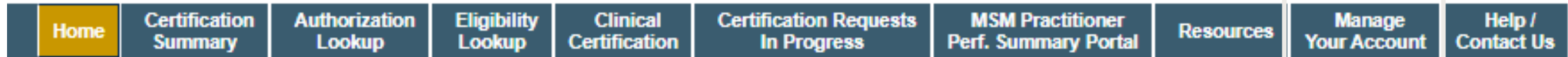
On the CareCore National Portal, practioners/groups will need to be added to your account prior to case submission. To add practioners/groups:

- Click the **Manage Your Account** tab to add provider information.

- Select **Add Provider**.

- Enter the NPI, state, and zip code to search for the provider.

- Select the matching record based upon your search criteria.

- Once you have selected a practitioner, your registration will be complete.

- You can also click **Add Provider** to add another practitioner/group to your account.

- You can access the **Manage Your Account** at any time to make any necessary updates or changes.

Manage Your Account

CHANGE PASSWORD   EDIT ACCOUNT

Office Name:

Address:

Primary Contact:
Email Address:

ADD PROVIDER

Click Column Headings to Sort

No providers on file

CANCEL

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

FIND MATCHES   CANCEL

Initiating A Case

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

Request an Authorization

To begin, please select a program below:

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

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

[Please Select ▾]

CONTINUE

Click here for help

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

[Please Select ▾]

| Please Select |
| Referring Provider |
| Rendering Lab |

CONTINUE

- **Choose Clinical Certification to begin a new request**
- **Select Lab Management Program**
- **Select if you are the referring provider or rendering lab then proceed to entering information**

Clinical Certification Request | Search for and Select Provider

Search for and select the **Practitioner/Group** for whom you want to build a case. If the **Practitioner/Group** is not on your list (of providers added to your account), you can now **Search By NPI.**

Clinical Certification Request | Search for and Select Provider

Clinical Certification Request | Select Health Plan

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

Choose Your Insurer

Requesting Provider: [redacted]

Please select the insurer for this authorization request.

Please Select a Health Plan ▼

BACK   CONTINUE

- Choose the appropriate **Health Plan** for the request.
- Another drop down will appear to select the appropriate address for the **provider/group**.
- Click **CONTINUE**.

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Clinical Certification Request | Enter Contact Information

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

Add Your Contact Info

Provider's Name:* [BI, SUCAI] [2]

Who to Contact:* [   ] [2]

Fax:* [802) 405-8445] [2]

Phone:* [802) 258-4575] [2]

Ext.: [   ] [2]

Cell Phone: [   ]

Email: [amyni00v@gmail.com]

☑ Receive notification of case status changes

[BACK] [CONTINUE]

Click here for help

- Enter/edit the **provider's name** and appropriate information for the point of contact/who to contact individual.

- Practitioner name, fax, and phone will pre-populate; edit as necessary.

> The e-notification box is checked by default to enable email notices for any updates on case status changes. Make sure to uncheck this box if you prefer to receive faxed notices.

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Member & Request Information

Patient Eligibility Lookup

Patient ID:*

Date Of Birth:* MM/DD/YYYY

Patient Last Name Only:* [?]

ELIGIBILITY LOOKUP

BACK

Requested Service + Diagnosis

Lab Management Program Procedures

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

LABTST ▼ MOLECULAR GENETIC TEST ▼

Don't see your procedure code or type of service? Click here

Diagnosis

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

LOOKUP

Trouble selecting diagnosis code? Please follow these steps

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

Secondary diagnosis is optional for Lab Management Program

LOOKUP

- **Enter the member information** including the patient ID number, date of birth and last name. Click **Eligibility Lookup**

- **On the next screen, choose LABST from the drop down menu**

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Verify Service Selection

Requested Service + Diagnosis

Confirm your service selection.

CPT Code:	LABTST
Description:	MOLECULAR GENETIC TEST
Primary Diagnosis Code:	R97.1
Primary Diagnosis:	Elevated cancer antigen 125 [CA 125]
Secondary Diagnosis Code:	
Secondary Diagnosis:	

Change Procedure or Primary Diagnosis

Change Secondary Diagnosis

BACK **CONTINUE**

Click here for help

- **Verify requested service & diagnosis**
- **Edit any information if needed by selecting change procedure or primary diagnosis**
- **Click continue to confirm your selection**

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Site Selection

Start by searching NPI or TIN for the site where the procedure will be performed. You can search by any fields listed. Searching with NPI, TIN, and zip code is the most efficient.

Add Site of Service

Specific Site Search

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.

NPI: [　　　　] Zip Code: [　　　　] Site Name: [　　　　]

TIN: [　　　　] City: [　　　　] ⦿ Exact match
　　　　　　　　　　　　　　　　　　　　　　　　○ Starts with

LOOKUP SITE

- **Select the specific Lab where the test will be performed**

Clinical Certification

Proceed to Clinical Information

You are about to enter the clinical information collection phase of the authorization process.

Once you have clicked "Continue," you will not be able to edit the Provider, Patient, or Service information entered in the previous steps. Please be sure that all this data has been entered correctly before continuing.

In order to ensure prompt attention to your on-line request, be sure to click SUBMIT CASE before exiting the system. This final step in the on-line process is required even if you will be submitting additional information at a later time. Failure to formally submit your request by clicking the SUBMIT CASE button will cause the case record to expire with no additional correspondence from eviCore.

BACK   CONTINUE

- Verify that all information is entered and make any changes needed

- You will not have the opportunity to make changes after this point

Standard or Urgent Request?

- If your request is urgent select **No**

- When a request is submitted as Urgent, you will be <u>required</u> to upload relevant clinical information

- If the case is standard select **Yes**

- You can upload up to FIVE documents in .doc, .docx, or .pdf format – max 5MB document size

- Your case will only be considered Urgent if there is a successful upload

Proceed to Clinical Information – Example of Questions

Proceed to Clinical Information

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(s) and procedure code(s) are being considered. The next several questions will guide test and procedure code selection.

ℹ To the best of your knowledge, has a previous prior authorization request been made for this member and this test?
○ Yes ○ No ○ Unknown

ℹ Has the specimen been collected?
○ Yes ○ No ○ Unknown

SUBMIT

Proceed to Clinical Information

ℹ What is the specimen collection or retrieval from storage date? If the date is unknown, please use today's date.

[_____] 📅

SUBMIT

Proceed to Clinical Information

ℹ What kind of testing is being done?
☐ Testing related to cancer
○ Testing related to pregnancy
○ Other
○ Unknown

ℹ What test is being requested? Please provide the test name or a short description.
[_____]

ℹ Do you know the procedure codes that will be billed for this test?
○ Yes ○ No

SUBMIT

☐ Finish Later

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

- **Clinical Certification** questions will populate based upon the information provided

- You can save your request and **finish later** if needed
  - Please complete the case before the end of the day
  - When logged in, you can resume a saved request by going to Certification Requests in Progress

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Proceed to Clinical Information – More Examples

Proceed to Clinical Information

What is the name of the test you are requesting? A selection from the list below is REQUIRED in order to proceed with this request.

This is a list of commonly requested tests from the lab you selected. They are in alphabetic order by the lab's actual test name, which can usually be found on the test requisition.

ⓘ Submitting your request will be much faster if the test name can be found.

	Test Brand Name	Test Category
○	None Of These	
○	ATM Analysis	ATM Sequencing and Deletion/Duplication Analysis
○	BRACAnalysis {Integrated BRACAnalysis; CPT 81162}	BRCA1/2 Sequencing and Deletion/Duplication Analysis
○	BRACAnalysis {Integrated BRACAnalysis; CPT 81163, 81164)}	BRCA1/2 Sequencing and Deletion/Duplication Analysis
○	BRACAnalysis and myRisk {Integrated BRACAnalysis and myRisk; CPT 81162, 81479}	Hereditary Breast and Ovarian Cancer Panel Tests
○	BRACAnalysis and myRisk {Integrated BRACAnalysis and myRisk; CPT 81163, 81164, 81479}	Hereditary Breast and Ovarian Cancer Panel Tests
○	BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81162, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
○	BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81163, 81164, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
○	BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81163, 81164, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
○	BRACAnalysis and PALB2 {2020 codes; Integrated BRACAnalysis and PALB2; 81162, 81307}	Hereditary Breast and Ovarian Cancer Panel Tests

1 2 3 4 5 6 7

All | A | B | C | E | G | M | N | P | S | T

** NOTE: If you know the name of the test, choose the first letter of the test name above. Otherwise, you can scroll through all tests using the page numbers. If you cannot find the test, please return to page 1 of the "All" tab and select "None of These".

***FOR LAB REPRESENTATIVES: If you would like to correct or add to this list, please email labmanagement@evicore.com.

Clinical Certification questions will populate based upon the information provided

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Proceed to Clinical Information – Free Text Questions

Proceed to Clinical Information

Answer the following questions in clinical detail:

ⓘ Why is this test being requested and how will the results be used to change management?

ⓘ Describe any applicable current or past medical history, lab testing, or procedure results.

ⓘ If relevant to the testing, describe the family history, including the applicable clinical findings, diagnoses, and/or test results.

Free text answers allow for further explanation

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Next Step: Criteria not met

If criteria is not met based on clinical questions, you will receive a similar request for additional info:

ⓘ Is there any additional information specific to the member's condition you would like to provide?
- ○ I would like to upload a document after the survey
- ○ I would like to enter additional notes in the space provided
- ○ I would like to upload a document and enter additional notes
- ○ I have no additional information to provide at this time

SUBMIT

Summary of Your Request

Please review the details of your request below and if everything looks correct click CONTINUE

Your case has been sent to Medical Review.

Provider Name: **Provider Address:**		**Contact:** **Phone Number:** **Fax Number:**
Patient Name: **Insurance Carrier:**		**Patient Id:**
Site Name: **Site Address:**		**Site ID:**

Primary Diagnosis Code:	R68.89	**Description:** Other general symptoms and signs
Secondary Diagnosis Code:		**Description:**
Date of Service:	Not provided	
CPT Code:	LABTST	**Description:** MOLECULAR GENETIC TEST
Case Number:		
Review Date:	7/15/2020 5:27:45 PM	
Expiration Date:	N/A	
Status:	Your case has been sent to Medical Review.	

CANCEL **PRINT** **CONTINUE**

Tips:
- Upload clinical notes on the portal to avoid any delays by faxing
- Additional information uploaded to the case will be sent for clinical review
- Print out summary of request that includes the case # and indicates 'Your case has been sent to clinical review'

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Criteria Met

If your request is authorized during the initial submission you can print out the summary of the request for your records.

Summary of Your Request

Please review the details of your request below and if everything looks correct click CONTINUE

The following testing is approved: BRCA1 and/or 2 Gene Testing. Procedure code(s) approved: 81162.

Provider Name:
Provider Address:

Contact:
Phone Number:
Fax Number:

Patient Name:
Insurance Carrier:

Patient Id:

Site Name:
Site Address:

Site ID:

Primary Diagnosis Code:	Z01.419	**Description:**	Encounter for gynecological examination (general) (routine) without abnormal findings
Secondary Diagnosis Code:		**Description:**	
Date of Service:	Not provided		
CPT Code:	LABTST	**Description:**	MOLECULAR GENETIC TEST
Authorization Number:			
Review Date:	7/15/2020 5:21:21 PM		
Expiration Date:	1/9/2021		
Status:	The following testing is approved: BRCA1 and/or 2 Gene Testing. Procedure code(s) approved: 81162.		

CANCEL   **PRINT**   **CONTINUE**

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Additional Provider Portal Features

Portal Features

Certification Summary

- Allows you to track recently submitted cases

Authorization Lookup

- You can look-up authorization status on the portal and print any correspondence
- Search by member information OR by authorization number with ordering NPI
- Review post-decision options, submit appeal and schedule a peer-to-peer

Eligibility Lookup

- Confirm if member requires prior authorization

Clinical Certification

- You can begin an authorization request

WEB

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Authorization Lookup Example

Authorization Lookup

Authorization Number:	NA
Case Number:	[redacted]
Status:	Pending eviCore Review
P2P Status:	
Approval Date:	
Service Code:	LABTST
Service Description:	MOLECULAR GENETIC TEST
Site Name:	MOUNT SINAI GENOMICS
Expiration Date:	
Date Last Updated:	7/15/2020 5:30:44 PM

P2P AVAILABILITY

Correspondence: **UPLOADS & FAXES**

Clinical Upload: Upload Additional Clinical

The option to attach clinical information is not available for this case at this time:
Please fax clinical information to 800-540-2406

Authorization Number:	[redacted]
Case Number:	[redacted]
Status:	Approved
P2P Status:	
Approval Date:	7/13/2020 12:00:00 AM
Service Code:	LABTST
Service Description:	MOLECULAR GENETIC TEST
Site Name:	MOUNT SINAI GENOMICS
Expiration Date:	1/9/2021
Date Last Updated:	7/15/2020 5:25:14 PM

P2P AVAILABILITY

Correspondence: **UPLOADS & FAXES**

A final decision has not yet been rendered on this case OR it requires special handling. If you have received a request for additional clinical information, please respond to our notice per the instructions received.
If you would like to understand additional options available, please contact our Physician Support Unit at 1-800-792-8744, option 1

Uploads & Faxes

[Attached Faxes | Sent Letters & Faxes | Document Uploads]

3 documents sent.

Episode ID	Date Sent	Time Sent	Document Name	Recipient	View
[redacted]	07/15/2020	17:25:44	OSC0101 - Approval Standard PHYS	Physician	VIEW
[redacted]	07/15/2020	17:25:44	OSC0104 - Approval Standard SITE	Site	VIEW
[redacted]	07/15/2020	17:25:45	OSC0100 - Approval Standard MBR	Patient	VIEW

CLOSE

Duplication Feature

Success

Thank you for submitting a request for clinical certification. Would you like to:

- Return to the main menu
- Start a new request
- Resume an in-progress request

You can also start a new request using some of the same information.

Start a new request using the same:

○ Program (Radiation Therapy Management Program)
○ Provider ( )
○ Program and Provider (Radiation Therapy Management Program and)
○ Program and Health Plan (Radiation Therapy Management Program and CIGNA)

GO

- Duplicate feature allows you to start a new request using same information
- Eliminates entering duplicate information
- Time saver!

Provider Resources

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Dedicated eviCore Teams | Alliance Health

Call Center

- Phone: (888) 333-8641

- Representatives available 7 a.m. to 7 p.m. (local time)

Web Support

- Live chat

- Email: **portal.support@evicore.com**

- Phone: (800) 646-0418 (Option #2)

Client & Provider Operations Team

- Email: **clientservices@eviCore.com**

- Eligibility issues (member or provider not found in system)

- Transactional authorization related issues requiring research

Provider Engagement

Regional team that works directly with the provider community

Merritt Senters

p: 615-788-5568

e: Merritt.Senters@evicore.com

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Provider Resource Website

Provider Resource Pages

eviCore's Provider Experience team maintains provider resource pages that contain client- and solution-specific educational materials to assist providers and their staff on a daily basis. The provider resource page will include, but is not limited to, the following educational materials:

- Frequently Asked Questions

- Quick Reference Guides

- Provider Training

- CPT code list

To access these helpful resources, please visit:

evicore.com/resources/healthplan/alliance-health

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HEALTH SERVICES

Clinical Guidelines

How to access our Guidelines

1. Go to www.evicore.com and select the 'Resources' drop down menu on the far right hand side of your browser.

2. Then select the 'Clinical Guidelines' button to be directed to the main clinical guidelines page.

3. Scroll down and select the 'Laboratory Management' solution.

4. Type in desired health plan in the 'Search Health Plan' search bar and press enter.

5. Select the appropriate guideline specific to the requested test(s).

   Examples:
   - Specific genetic testing
   - Molecular and genomic testing
   - Huntington Disease testing

Resources

CLINICAL GUIDELINES

Laboratory Management
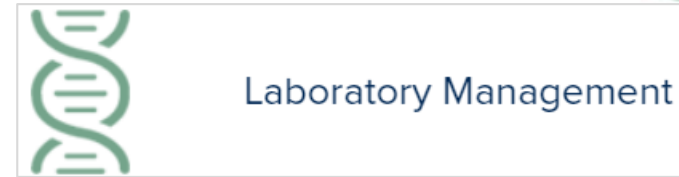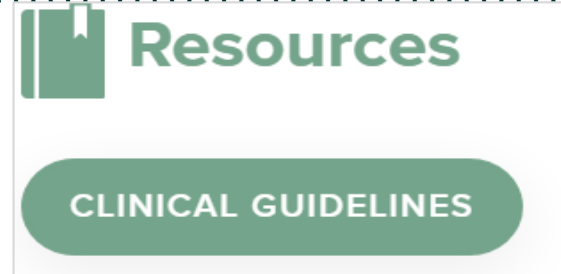
Laboratory Management

Instructions for accessing the guidelines:
1. Search by health plan name to view clinical guidelines.
2. Locate the **reason for denial** section found in your letter. Identify the guideline title and then search by the provided guideline title. Select appropriate guideline document.
Example for **4Kscore for Prostate Cancer Risk Assessment**: *We based this decision on the guidelines listed below:* **4Kscore for Prostate Cancer Risk Assessment (MOL. TS. 120).**

Search Health Plan ...

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Clinical Guidelines

Health Plan specific Guidelines

1. Current, Future, and Archived lists and Guidelines are found here.

2. You can select the entire Code List or the health plan specific Policy Book.

3. Shown here is an example of the Administrative Guidelines you will find on our resource site.

4. There are also Lab Guidelines for Clinical Use and Test Specific Guidelines on our resource site (not shown on this screen)

CURRENT   FUTURE   ARCHIVED

Code Lists

Lab Management Code List

Guidelines

████████ Commercial Lab Policy Book
Effective 07/01/2020

ADMINISTRATIVE ⊖

Date of Service and Effective Date of the Authorization Period
Effective 07/01/2020

Molecular Pathology Tier 2 Molecular CPT Codes
Effective 07/01/2020

Information Requirements for Medical Necessity Review
Effective 07/01/2020

Unique Test Identifiers for Non-Specific Procedure Codes
Effective 07/01/2020

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Provider Newsletter

Stay Updated With Our Free Provider Newsletter

eviCore's provider newsletter is sent out to the provider community with important updates and tips. If you are interested in staying current, feel free to subscribe:

- Go to **EviCore.com**

- Scroll down and add a valid email to subscribe

- You will begin receiving email provider newsletters with updates

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Provider Resource Review Forums

The eviCore website contains multiple tools and resources to assist providers and their staff during the prior authorization process.

We invite you to attend a Provider Resource Review Forum, to navigate **www.eviCore.com** and understand all the resources available on the Provider's Hub. Learn how to access:

- eviCore's evidence-based clinical guidelines

- Clinical worksheets

- Check-status function of existing prior authorization

- Search for contact information

- Podcasts & Insights

- Training resources

How to register for a Provider Resource Review Forum?

You can find a list of scheduled **Provider Resource Review Forums** on **www.eviCore.com** → Provider's Hub → Scroll down to eviCore Provider Orientation Session Registrations → Upcoming

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Thank You!

Appendix

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Online P2P Scheduling Tool

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How to schedule a Peer to Peer Request

- Log into your account at www.evicore.com

- Perform Authorization Lookup to determine the status of your request.

- Click on the "P2P Availability" button to determine if your case is eligible for a Peer to Peer conversation:

- If your case is eligible for a Peer to Peer conversation, a link will display allowing you to proceed to scheduling without any additional messaging.

P2P AVAILABILITY   Request Peer to Peer Consultation
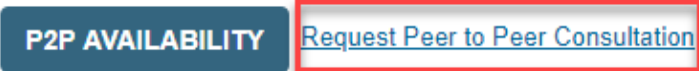
Authorization Lookup

Authorization Number:	NA
Case Number:	
Status:	Denied
P2P Status:	

P2P AVAILABILITY

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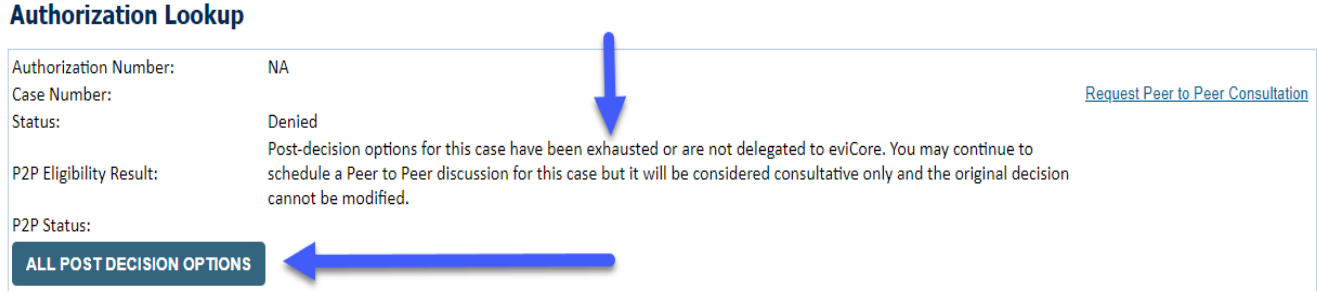
How to schedule a Peer to Peer Request

Pay attention to any messaging that displays. In some instances, a Peer to Peer conversation is allowed, but the case decision cannot be changed. When this happens, you can still request a Consultative Only Peer to Peer. You may also click on the "All Post Decision Options" button to learn what other action may be taken.

Once the "Request Peer to Peer Consultation" link is selected, you will be transferred to our scheduling software via a new browser window.

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How to Schedule a Peer to Peer Request

Upon first login, you will be asked to confirm your default time zone.

You will be presented with the Case Number and Member Date of Birth (DOB) for the case you just looked up.

You can add another case for the same Peer to Peer appointment request by selecting "Add Another Case"

To proceed, select "Lookup Cases"

You will receive a confirmation screen with member and case information, including the Level of Review for the case in question. Click Continue to proceed.

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How to Schedule a Peer to Peer Request

You will be prompted to identify your preferred Days and Times for a Peer to Peer conversation. All opportunities will automatically present. Click on any green check mark to deselect the option and then click Continue.

You will be prompted with a list of eviCore Physicians/Reviewers and appointment options per your availability. Select any of the listed appointment times to continue.

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How to Schedule a Peer to Peer

Confirm Contact Details

- Contact Person Name and Email Address will auto-populate per your user credentials

- Be sure to update the following fields so that we can reach the right person for the Peer to Peer appointment:

  - Name of Provider Requesting P2P

  - Phone Number for P2P

  - Contact Instructions

- Click submit to schedule appointment. You will be presented with a summary page containing the details of your scheduled appointment.

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Canceling or Rescheduling a Peer to Peer Appointment

To cancel or reschedule an appointment

- Access the scheduling software per the instructions above

- Go to "My P2P Requests" on the left pane navigation.

- Select the request you would like to modify from the list of available appointments

- Once opened, click on the schedule link. An appointment window will open

- Click on the Actions drop-down and choose the appropriate action

- If choosing to reschedule, you will have the opportunity to select a new date or time as you did initially.

- If choosing to cancel, you will be prompted to input a cancellation reason

- Close browser once done

Appointment

Actions ▾

Appointment Details:

ⓘ SCHEDULED
📅 Mon 5/18/20
🕐 6:30 pm EDT
👤

Reschedule Appointment

Cancel Appointment

P2P Contact Info:

Name of Provider Requesting P2P	Dr. Jane Doe
Contact Person Name	Office Manager John Doe
Contact Person Location	Provider Office
Requesting Provider Email	droffice@internet.com
Phone Number for P2P	(555) 555-5555 ext. 12345
Contact Instruction	Request Dr. Doe

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