Lab Management

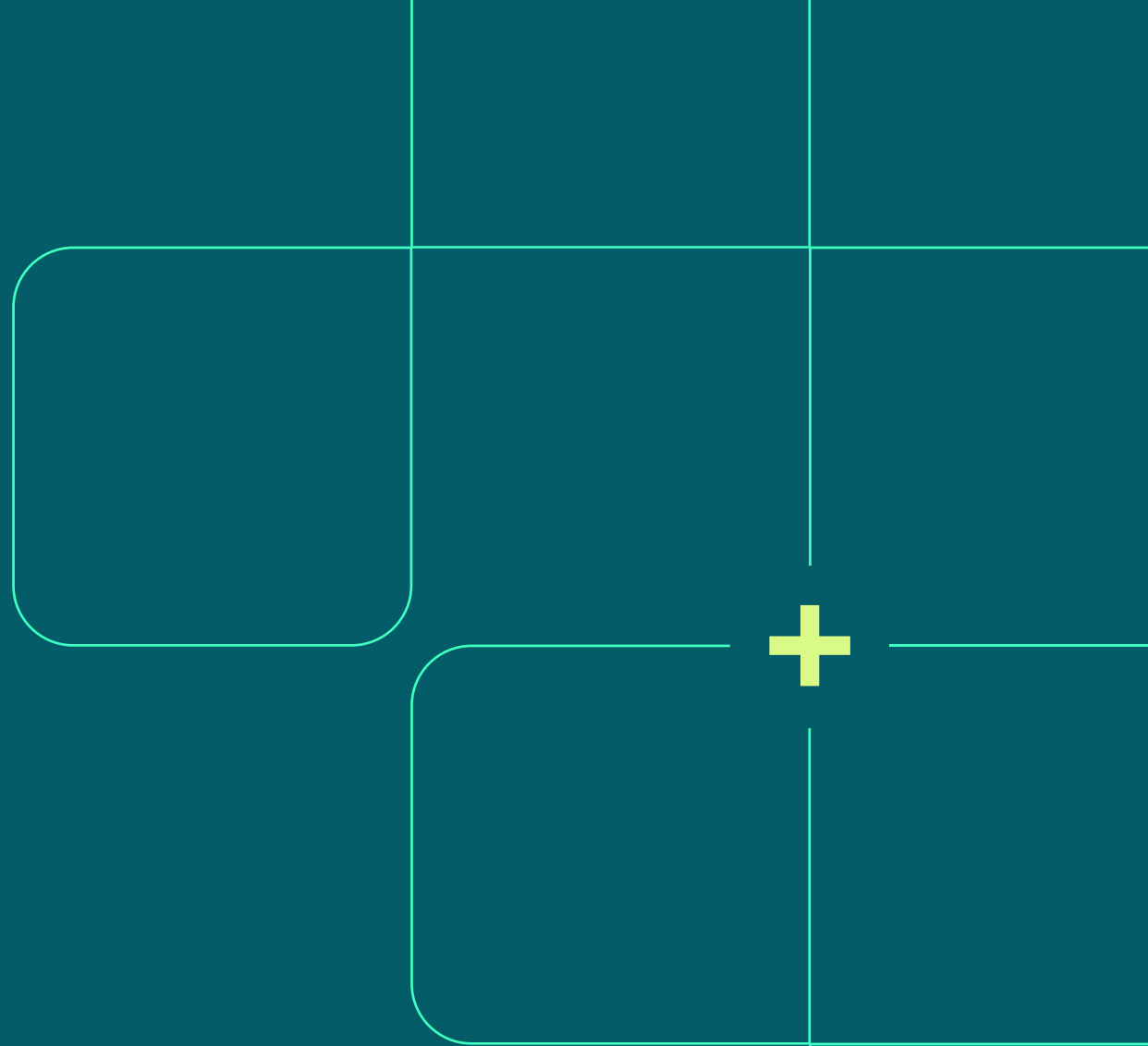## SummaCare

Agenda

Solutions Overview
Lab Management

Submitting Requests

Prior Authorization Outcomes, Special Considerations & Post-Decision Options

EviCore Provider Portal
Overview, Features & Benefits

Provider Resources

Questions & Next Steps

Appendix

EviCore
By **EVERNORTH**

Solution Overview

EviCore
By EVERNORTH

3/19/2024

SummaCare Prior Authorization Services

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

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

EviCore
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Lab Management Solution

Covered Services

- Hereditary Cancer Syndromes

- Carrier Screening Tests

- Tumor Marker / Molecular Profiling

- Immunohistochemistry (IHC)

- Hereditary Cardiac Disorders

- Cardiovascular Disease and Thrombosis Risk Variant Testing

- Pharmacogenomics Testing

- Neurologic Disorders

- Mitochondrial Disease Testing

- Intellectual Disability / Developmental Disorders

EviCore
By EVERNORTH

How to Request Prior Authorization

The EviCore Provider Portal is the easiest, most efficient way to request clinical reviews and check statuses.

- **Save time**: Quicker process than requests by phone or fax.

- **Available 24/7.**

- **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 supporting clinical documentation; it can be uploaded on the portal.

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

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

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

- **Duplication feature**: If you are submitting more than one request, you can duplicate information to expedite submissions.

To access the EviCore Provider Portal, visit **www.EviCore.com**

Phone: 888-996-8710
Monday – Friday
7 AM – 7 PM (local time)

Fax: 844-545-9213

EviCore
By **EVERNORTH**

Evidence-Based Guidelines

The foundation of our solutions

Annually Reviewed Guidelines

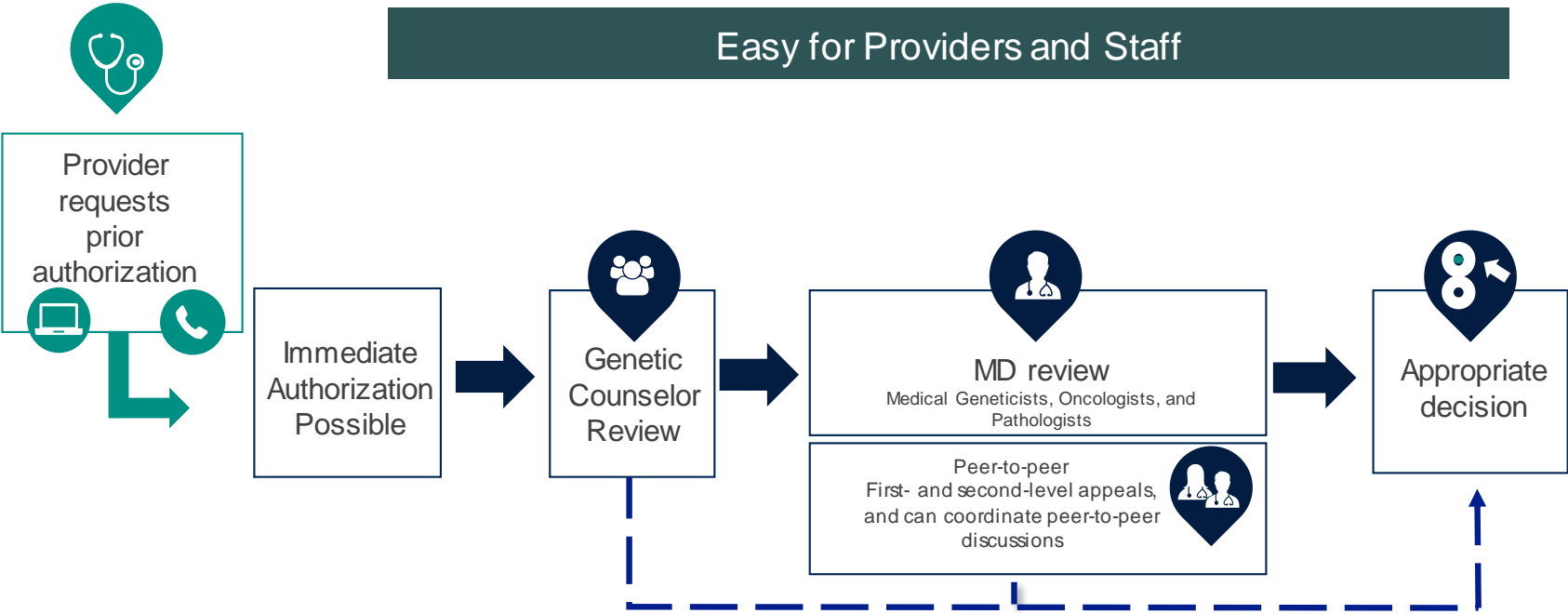**Experts associated with academic institutions**

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

EviCore
By EVERNORTH

Utilization Management | Prior Authorization Process

Recommend Prior Authorization on Approximately 398 CPT Codes

Easy for Providers and Staff

Provider requests prior authorization

Immediate Authorization Possible

Genetic Counselor Review

MD review
Medical Geneticists, Oncologists, and Pathologists

Peer-to-peer
First- and second-level appeals, and can coordinate peer-to-peer discussions

Appropriate decision

Non-Clinical Information Needed

The following information must be provided to initiate the prior authorization request:

Member Information

- First and Last Name
- Date of Birth
- Member Identification Number
- Phone Number (If Applicable)

Ordering Physician Information

- First and Last Name
- Practice Address
- Individual National Provider Identification (NPI) Number
- Tax Identification Number (TIN
- Phone and Fax Numbers

Rendering Laboratory Information

- Laboratory Name
- Street Address
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Numbers

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Clinical Information Needed

If clinical information is needed, this may include, but is not limited to:

- Details about the test being performed (test name, description and/or unique identifier)

- All information required by applicable policy

- Test indication, including any applicable signs and symptoms or other reasons for testing

- Any applicable test results (laboratory, imaging, pathology, etc.)

- Any applicable family history

- How test results will impact patient care

Insufficient Clinical | Additional Documentation Needed

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 letter will inform the provider about what clinical information is needed as well as the **date by which it is needed.**	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.

EviCore
By **EVERNORTH**

Pre-Decision Options | Medicare Members

I've received a request for additional clinical information. What's next?

Before a denial decision is issued on Medicare cases, EviCore will notify providers telephonically and in writing. From there, additional clinical information must be submitted to EviCore in advance of the due date referenced.

There are three ways to supply the requested information:

1. **Fax** to **800-540-2406**.
2. **Upload** directly into the case via the provider portal at **EviCore.com**.
3. **Request a Pre-Decision Clinical Consultation.**
   This consultation can be requested via the EviCore website, and must occur prior to the due date referenced in the notification.

PLEASE NOTE: If the additional clinical information is faxed/uploaded, that clinical is what is used for the review and determination. 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 to the provider and member, and status will be available on EviCore.com.

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Prior Authorization Outcomes, Special Considerations & Post-Decision Options

Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are valid for up to **90 calendar days** from the date of approval.

- **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).

- **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.

Notifications:

- Authorization letters will be faxed to the ordering provider.

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

- Members will receive a letter by mail.

- Approval information can be printed on demand from the EviCore portal: www.EviCore.com

EviCore
By EVERNORTH

Special Circumstances

Retrospective (Retro) Authorization Requests

- EviCore is not delegated retro reviews for SummaCare.

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

Alternative Recommendations

- 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 **888-996-8710**.

- 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.

EviCore
By **EVERNORTH**
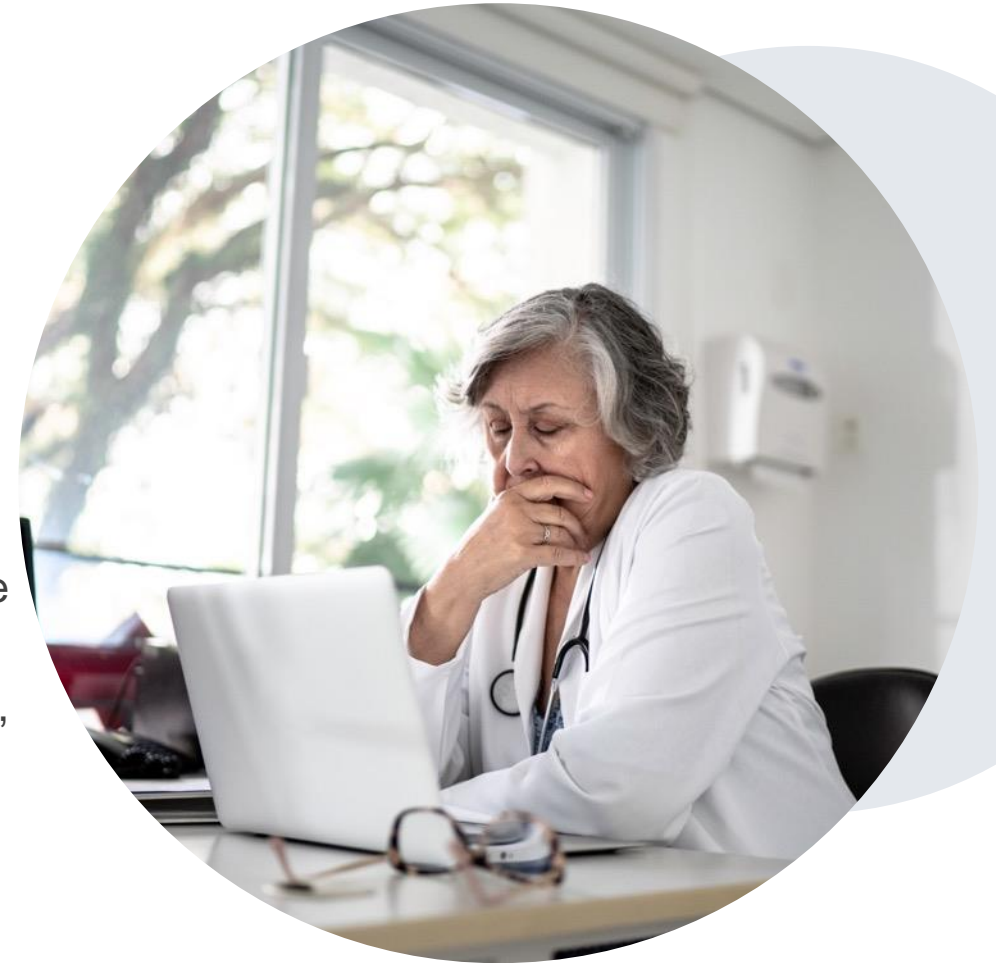
Post-Decision Options
Commercial Members

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 **888-996-8710** to speak with an agent who can provide available option(s) and instruction on how to proceed.

Alternatively, select **All Post Decisions** under the authorization lookup function on **EviCore.com** to see available options.

Reconsiderations

- Although SummaCare does not allow a commercial case to be overturned via peer-to-peer (P2P) after it has been denied, requests for a consultative P2P are always welcome.

Appeals

- EviCore will process first-level appeals. Please refer to the denial letter for instructions.

- Appeal requests can be submitted in writing or verbally via a Clinical Consultation with an EviCore physician.

- A written notice of the appeal decision will be mailed to the member and faxed to the ordering provider.

EviCore
By EVERNORTH

Post-Decision Options
Medicare Members

My case has been denied. What's next?

Clinical Consultation

- Providers can request a Clinical Consultation with an EviCore physician to better understand the reason for denial.

- Once a denial decision has been made, however, the decision cannot be overturned via Clinical Consultation.

Reconsideration

- Medicare cases **do not** include a reconsideration option.

Appeals

- EviCore **will not** process first-level appeals for Medicare members.

EviCore Provider Portal

EviCore
By EVERNORTH

EviCore Provider Portal | Features

Eligibility Lookup

- Confirm if patient requires clinical review

Clinical Certification

- Request a clinical review for prior authorization on the portal

Prior Authorization Status Lookup

- View and print any correspondence associated with the case
- Search by member information OR by case number with ordering national provider identifier (NPI)
- Review post-decision options, submit appeal, and schedule a peer-to-peer

Certification Summary

- Track recently submitted cases

EviCore Provider Portal | Access and Compatibility

Most providers are already saving time submitting clinical review requests online vs. telephone.

To access resources on the EviCore Provider Portal, visit **EviCore.com/provider**

Already a user?

Log in with User ID & Password.

Don't have an account?
Click **Register Now**.

Portal Login

User ID

Forgot User ID?

Password

Forgot Password?

☐ I agree to HIPAA Disclosure

☐ Remember User ID

LOGIN

Don't have an account? **Register Now**
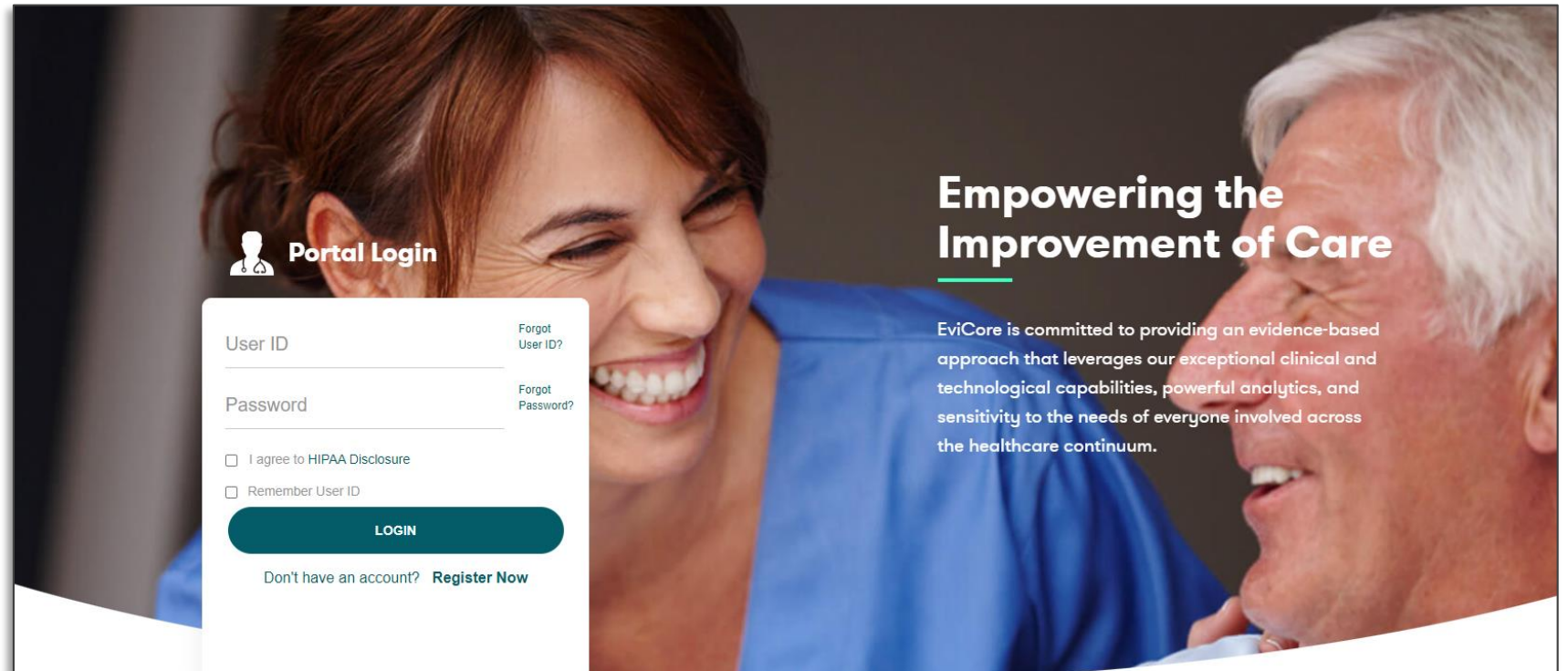
Empowering the Improvement of Care

EviCore is committed to providing an evidence-based approach that leverages our exceptional clinical and technological capabilities, powerful analytics, and sensitivity to the needs of everyone involved across the healthcare continuum.

EviCore's website is compatible with **all web browsers**. If you experience issues, you may need to **disable pop-up blockers** to access the site.

EviCore
By EVERNORTH

Creating an EviCore Provider Portal 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 login page.

Setting Up Multi-Factor Authentication (MFA)

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

- After you log in, you will be prompted to register your device for MFA.

- Choose which authentication method you prefer: Email or SMS. Then, **enter your email address or mobile phone number.**

- Once you select **Send PIN**, a 6-digit pin will be generated and sent to your chosen device.

- After entering the provided PIN in the portal display, you will successfully be authenticated and logged in.

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EviCore Provider Portal | Add Providers

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

You can add providers to your account by:

- Click the **Manage Your Account** tab.

- Select **Add Provider**.

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

- Select the matching record based upon your search criteria and the provider will be added to your provider list in your account.

- Click **Add Provider** to add other providers to your account.

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

Manage Your Account

Office Name:

Address:

Primary Contact:
Email Address:

CHANGE PASSWORD   EDIT ACCOUNT

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

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By EVERNORTH

Initiating a Case

- 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.

Select Referring Provider

- Select the ordering **provider** or **group** for the requested service.
- Choose the appropriate **health plan** for the request.

Select Rendering Lab

This window will populate with the ordering physician's name and contact information, and will be based on the NPI number you entered.

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**.
- Next screen you can enter **LABST**.

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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.

Site Selection

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

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

- Search for the **site of service** where the procedure will be performed (for best results, search with NPI, TIN, **or** zip code).

- **Select** the specific site where the procedure will be performed.

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Proceed to Clinical Information | Example 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.

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

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

SUBMIT

Proceed to Clinical Information

ⓘ 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

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

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

ⓘ 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.

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 that may be needed.

Next Step: Criteria Not Met

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

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 number and indicates "Your case has been sent to clinical review."

Criteria Met

If your request is authorized during the initial submission, you can print 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:		**Contact:**	
Provider Address:		**Phone Number:**	
		Fax Number:	
Patient Name:		**Patient Id:**	
Insurance Carrier:			
Site Name:		**Site ID:**	
Site Address:			

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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By EVERNORTH

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).

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

Resources

CLINICAL GUIDELINES

Laboratory Management
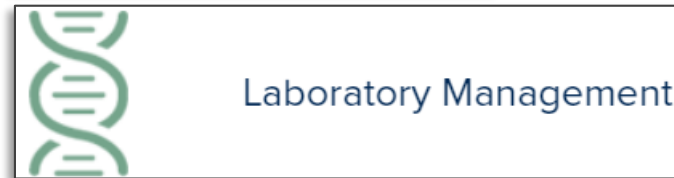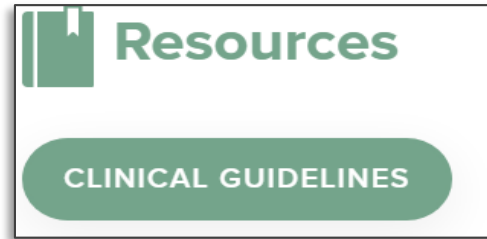
Laboratory Management

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

- Current, future, and archived lists and guidelines are found here.

- You can select the entire code list or the health plan specific policy book.

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

- 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 |

EviCore
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CareCore National Portal Features

EviCore
By EVERNORTH

3/19/2024

Provider Portal | Feature Access

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

User Worklist

Most popular portal feature

Check if a member requires an auth

Pick up where you left off

REQUEST AN AUTH

RESUME IN-PROGRESS REQUEST

SUMMARY OF AUTH

AUTH LOOKUP

MEMBER ELIGIBILITY

EviCore
By **EVERNORTH**

Certification Summary | User Worklist

- **Certification Summary** tab allows you to track recently submitted cases.
- The worklist can also be filtered.

EviCore
By EVERNORTH

Authorization Lookup | Popular Tool

- You can lookup an authorization case status on the portal.

- Search by member information **OR**

- Search by authorization number with ordering NPI.

- Initiate appeals and/or schedule Peer-to-Peer calls.

- View and print any correspondence.

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
Correspondence:	**UPLOADS & FAXES**
Clinical Upload:	Upload Additional Clinical

P2P AVAILABILITY

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
Correspondence:	**UPLOADS & FAXES**

P2P AVAILABILITY

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.
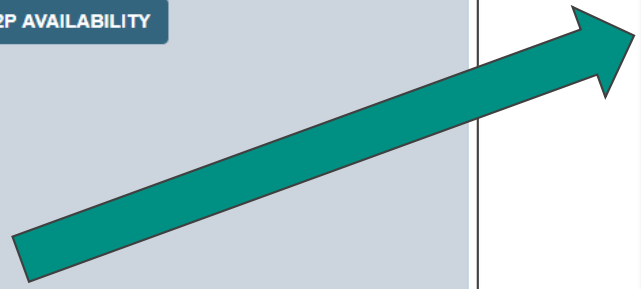
Uploads & Faxes

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

EviCore By EVERNORTH

Provider Resources

3/19/2024

Contact EviCore's Dedicated Teams

Client and Provider Services

For eligibility issues (member or provider not found in system) or transactional authorization related issues requiring research.

- Email: **ClientServices@EviCore.com**

- Phone: **800-646-0418** (option 4).

Web-Based Services and Portal Support

- Live chat

- Email: **Portal.Support@EviCore.com**

- Phone: **800-646-0418** (option 2)

Provider Engagement

Regional team that works directly with the provider community.

Provider Engagement Manager Territory List

Call Center/Intake Center

Call **888-996-8710.** Representatives are available from 7 a.m. to 7 p.m. local time.

EviCore
By **EVERNORTH**

Provider Resources at EviCore.com

EviCore maintains provider resource pages that contain health-plan-specific and solution-specific educational material to assist providers and their staff on a daily basis. This page will include:

- Frequently asked questions

- Quick reference guides

- Provider training

- CPT code list

To access these helpful resources, visit:

https://www.EviCore.com/resources/healthplan/summacare_apex

EviCore also maintains online resources <u>not</u> specific to health plans, such as guidelines and our required clinical information checklist.

To access these helpful resources, visit EviCore's **Provider's Hub**.

EviCore
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Ongoing Provider Portal Training

The EviCore Portal Team offers general portal training, twice a week, every week.

All online orientation sessions are free of charge and will last approximately one hour. Advance registration is required, so follow the instructions below to sign up:

How To Register:

1. Go to **http://EviCore.webex.com/**

2. Click on the "hamburger" menu on the far left hand side (below the EviCore logo), then choose **Webex Training**.

3. On the **Live Sessions** screen, click the **Upcoming** tab. In the search box above the tabs, type: **EviCore Portal Training.**

4. Choose the date and time for the session you would like to attend, and click the **Register** link beside it. (You will need to register separately for each session.)

5. Complete the required information and click the **Register** button.

Immediately after registering, you will receive an e-mail containing the toll-free phone number, meeting number, conference password, and a link to the web portion of the conference. **Please keep the registration e-mail** so you will have the Web conference information for the session in which you will be participating.

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Provider Resource Review Forum

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 learn how to navigate **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
- Existing prior authorization request status information
- Search for contact information
- Podcasts & insights
- Training resources

Register for a Provider Resource Review Forum:

Provider's Hub > Scroll down to EviCore Provider Orientation Session Registrations > Upcoming

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EviCore's Provider Newsletter

Stay up to date with our free provider newsletter!

To subscribe:

- Visit **EviCore.com**.
- Scroll down to the section titled **Stay Updated With Our Provider Newsletter**.
- Enter a valid email address.

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Thank You

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3/19/2024

Appendix

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Peer-to-Peer (P2P) Scheduling Tool

How to Schedule a Peer-to-Peer (P2P) 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.
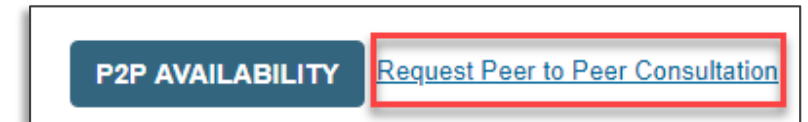
How to Schedule a Peer-to-Peer Request

- 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 with a list of EviCore physicians/reviewers and appointment options per your availability. Select any of the listed appointment times to continue.

- 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**.

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How to Schedule a Peer-to-Peer Request

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.

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 enter a cancellation reason.

- Close browser once done.

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