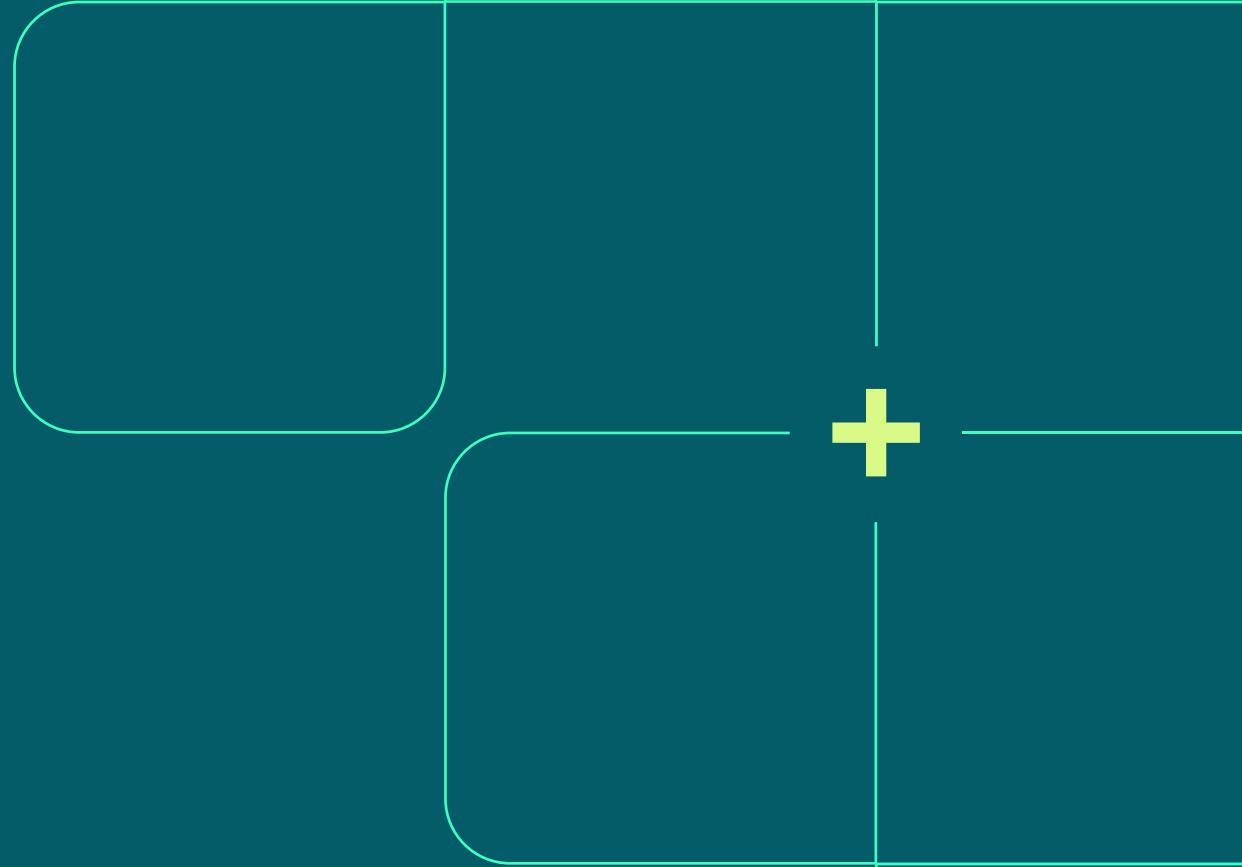


Medical Oncology

SummaCare



Agenda



Solutions Overview

Medical Oncology Services

Submitting Requests

**Prior Authorization Outcomes, Special Considerations
& Post-Decision Options**

EviCore Provider Portal

Overview, Features & Benefits

Provider Resources

Questions & Next Steps

Appendix

Solution Overview

SummaCare Prior Authorization Services

Applicable Membership

- Commercial
- Medicare

Prior authorization applies to the following services

- Outpatient
- Elective/Non-emergent

Prior authorization does NOT apply to services performed in

- Emergency Rooms
- Observation Services
- Inpatient Stays



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

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

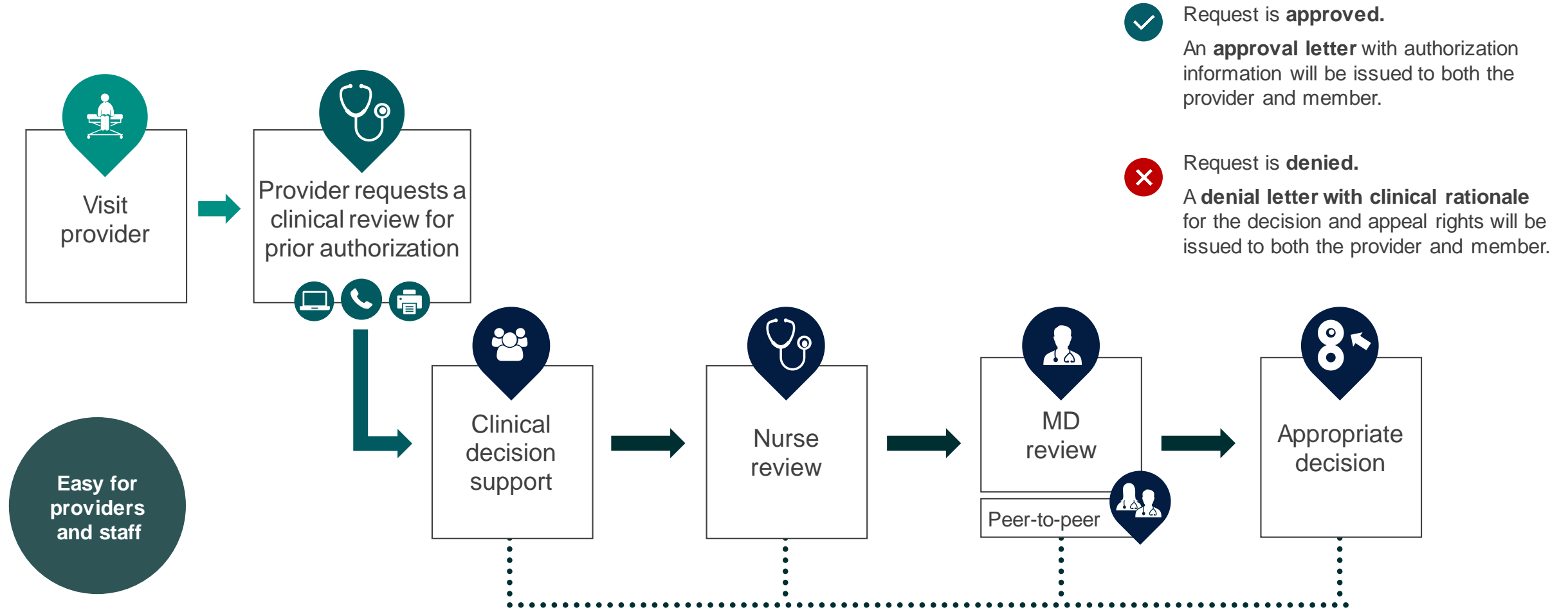


Phone: 888-996-8710

Monday – Friday
7 AM – 7 PM (local time)

Fax: 800-540-2406

Utilization Management | Prior Authorization



Scope of the Medical Oncology Program

<p>What types of drugs are included?</p>	<ul style="list-style-type: none">• The following types of drugs are included if being used to treat cancer<ul style="list-style-type: none">• <i>Primary Injectable and Oral Chemotherapy – Part B medications only [MEDICARE SPECIFIC]</i>• <i>Supportive Medications given with Chemotherapy</i>• The list of affected drugs can be viewed on https://www.EviCore.com/resources/healthplan/summacare_apex• Additionally, drugs covered under this program, but being used to treat non-cancer conditions may still require prior authorization through SummaCare. Contact the number on the ID card to confirm requirements.
<p>What is covered in my authorization?</p>	<ul style="list-style-type: none">• All drugs that are included in the treatment regimen – there are no partial approvals.• The HCPC codes associated with the approved drugs• The time period indicated on the authorization (8-14 months)
<p>How often do I need to update my authorization?</p>	<ul style="list-style-type: none">• When the authorization time has expired.• When there is a change in treatment including new or different drugs.• An update is not need if an approved drug is no longer being administered as a part of the approved regimen.

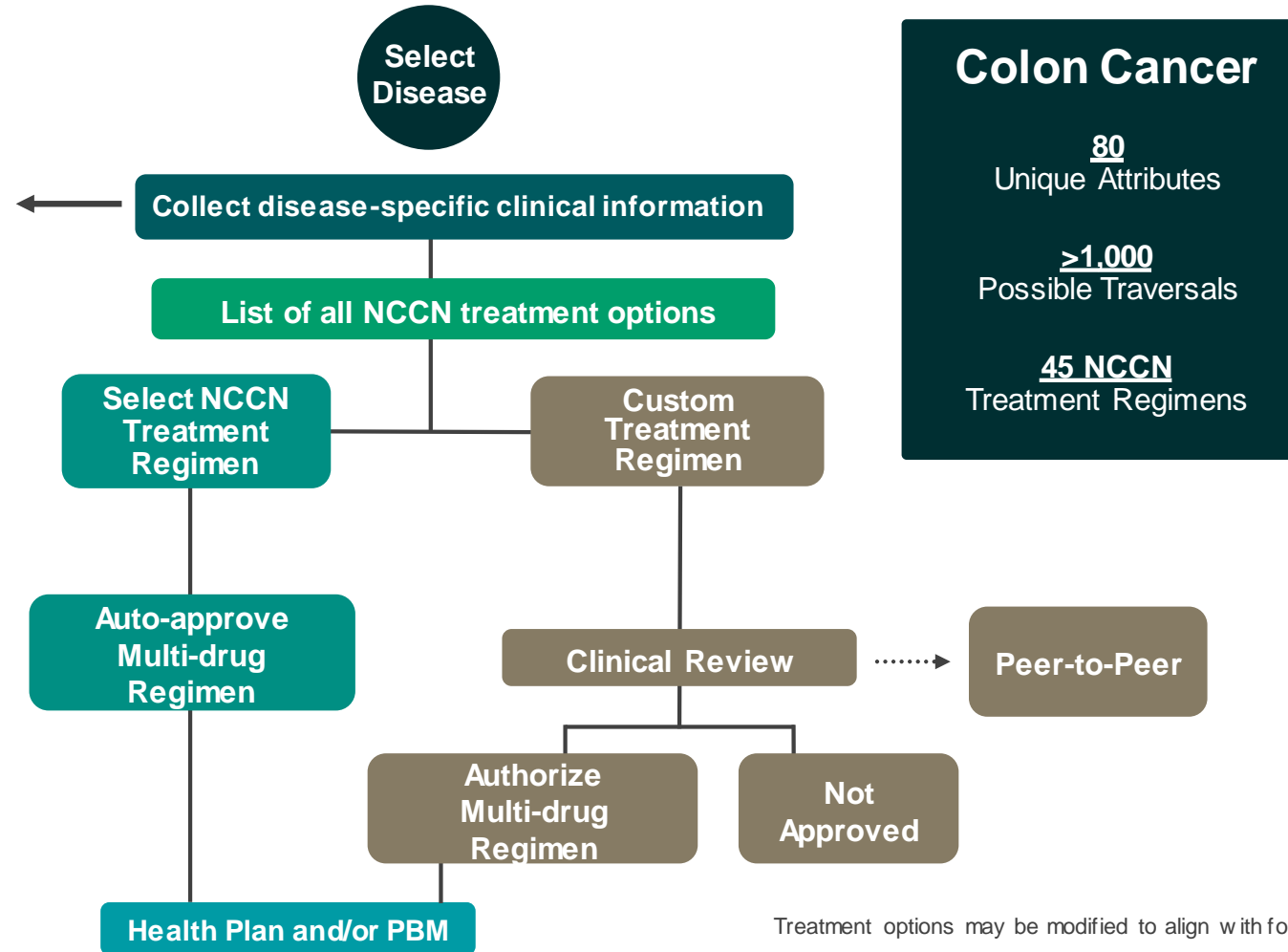
Medical Oncology Solution Defines a Complete Episode of Care

EviCore Medical Oncology Guideline Management

Disease-Specific Clinical Information

- Diagnosis at onset
- Stage of disease
- Clinical presentation
- Histopathology
- Comorbidities
- Patient risk factors
- Performance status
- Genetic alterations
- Line of treatment

5-9 minutes
to enter a complete case



Colon Cancer

80
Unique Attributes

≥1,000
Possible Traversals

45 NCCN
Treatment Regimens

Treatment options may be modified to align with formulary.

Clinical Information Needed

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

- Patient's clinical presentation.
- Diagnosis codes.
- Type and duration of treatments performed to date for the diagnosis
- Disease-specific clinical information:
 - ✓ Diagnosis at onset
 - ✓ Stage of disease
 - ✓ Clinical presentation
 - ✓ Histopathology
 - ✓ Comorbidities
 - ✓ Patient risk factors
 - ✓ Performance status
 - ✓ Genetic alterations
 - ✓ Line of treatment



Necessary Information for Prior Authorization

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

Member

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



Referring (Ordering) Physician

- Physician name
- National provider identifier (NPI)
- Phone & fax number



Rendering Facility

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



Supporting Clinical

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



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.

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](https://www.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](https://www.EviCore.com).



Prior Authorization Outcomes, Special Considerations & Post-Decision Options

Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are valid for up to **240-425 calendar days** from the date of approval. Please refer to the authorization notification for specific timeframe.
- **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



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.



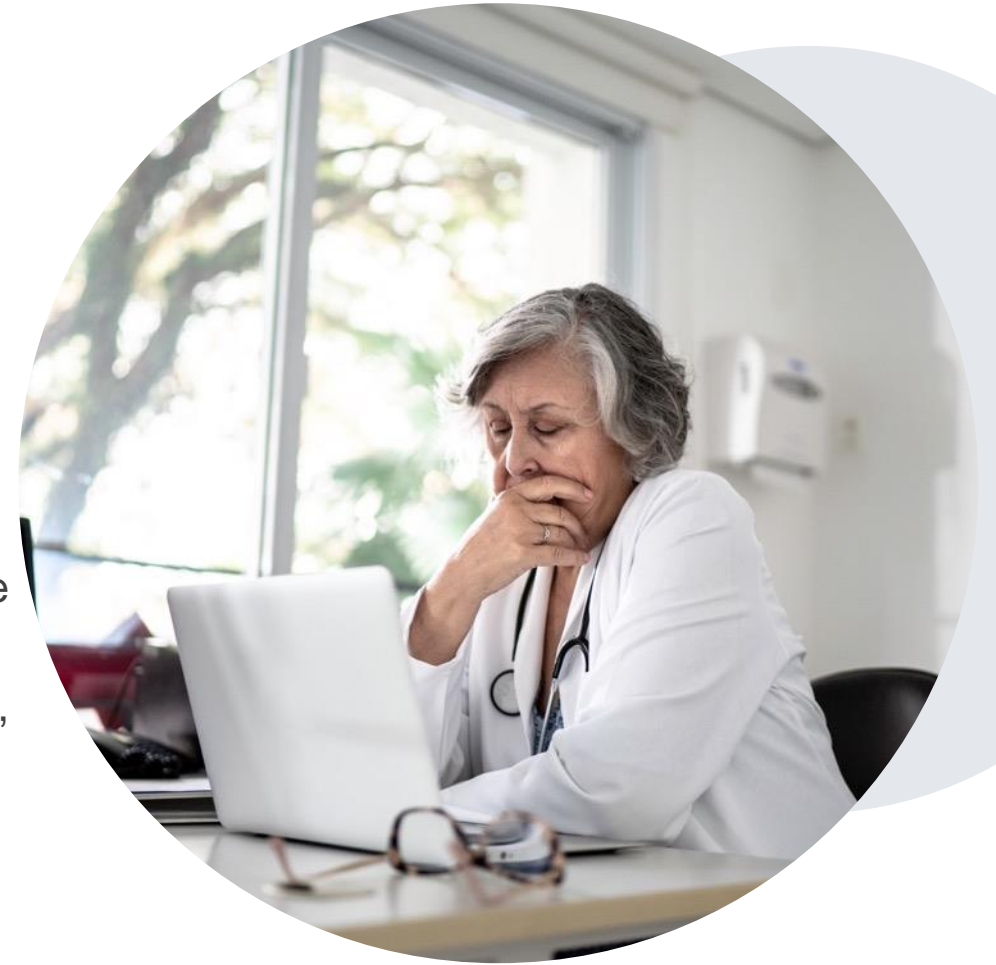
Special Circumstances

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.



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](https://www.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.

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 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.

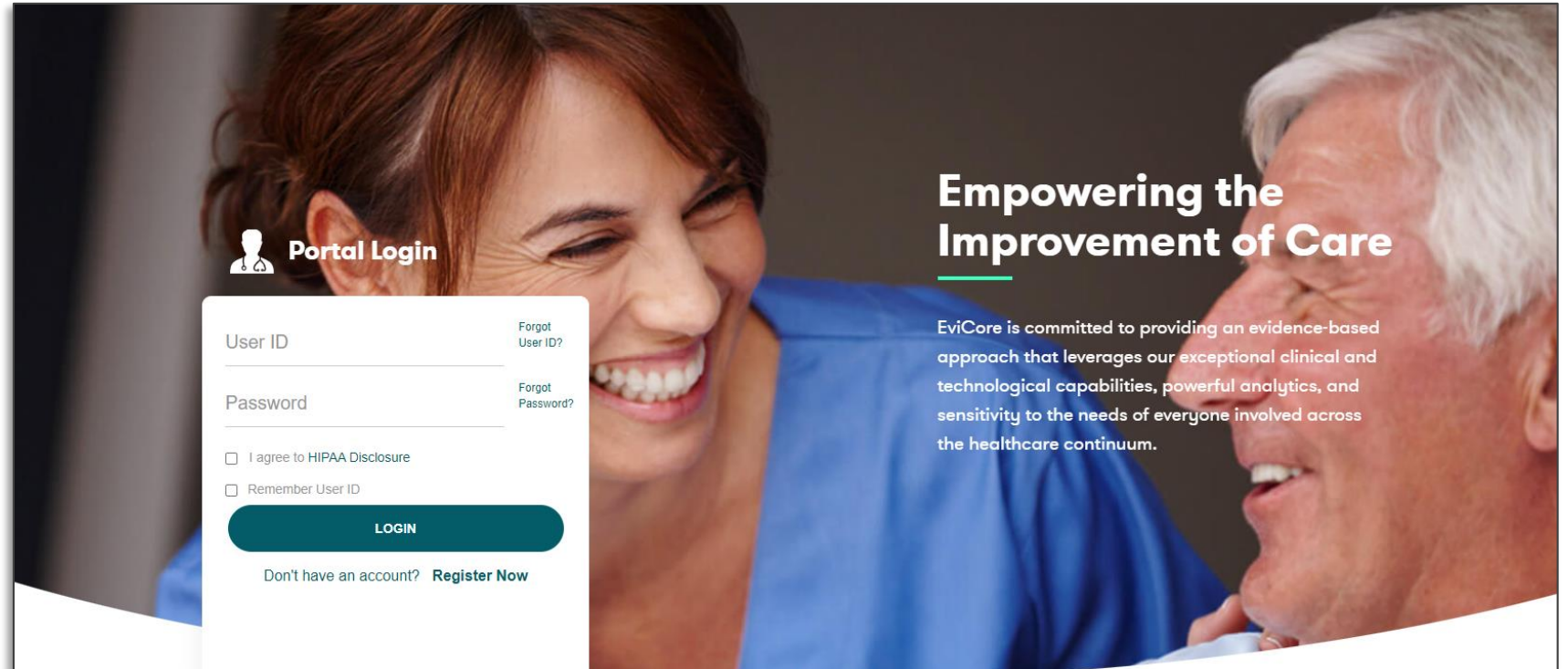
To access resources on the EviCore Provider Portal, visit EviCore.com/provider

Already a user?

Log in with User ID & Password.

Don't have an account?

Click **Register Now**.



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.

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.

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* Required Field

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*: --Select--

User Information

All Pre-Authorization notifications will be sent to the fax number and email address provided below. Please make sure you provide valid information.

User Name*: Address*:
Email*: City*: Phone*:
Confirm Email*: State*: Zip*: Ext:
First Name*: Office Name: Fax*:
Last Name*:

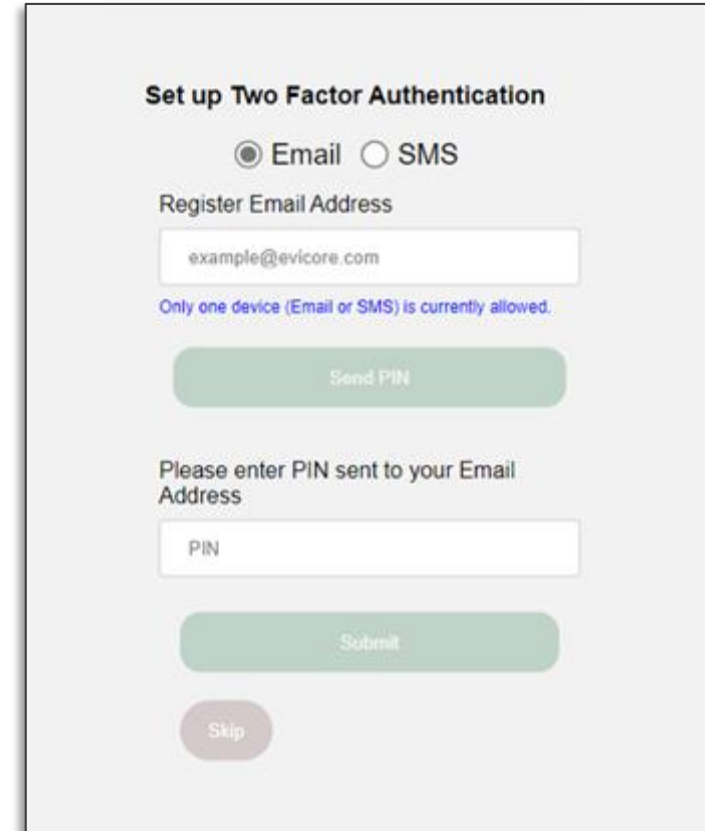
Next

Web Support 800-646-0418
Legal Disclaimer | Privacy Policy | Corporate Website | Report Fraud & Abuse | Guidelines and Forms | Contact Us
Copyright © 2014 MedSolutions. All Rights Reserved.

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.



The screenshot shows a web form titled "Set up Two Factor Authentication". At the top, there are two radio buttons: "Email" (which is selected) and "SMS". Below this is a text input field labeled "Register Email Address" containing the text "example@evicore.com". A small blue note below the field reads "Only one device (Email or SMS) is currently allowed." Below the field is a green button labeled "Send PIN". Underneath is another text input field labeled "Please enter PIN sent to your Email Address" containing the text "PIN". Below this field is a green button labeled "Submit" and a grey button labeled "Skip".

Medical Oncology Case Initiation

The screenshot displays the EviCore healthcare website interface. At the top, a dark teal navigation bar contains links for 'About', 'Solutions', 'Patients', 'Provider's Hub', 'Insights', and 'Careers'. On the right side of this bar, there are links for 'PROVIDERS: Check Prior Authorization Status', 'Login', and 'Resources'. Below this, a secondary navigation bar includes 'Contact Us' and 'Search'. A green arrow points to the 'Contact Us' link. The main content area features a 'Portal Login' form on the left with fields for 'User ID' and 'Password', checkboxes for 'I agree to HIPAA Disclosure' and 'Remember User ID', and a 'LOGIN' button. A green arrow points to the 'LOGIN' button. To the right of the login form is a navigation menu with options like 'Home', 'Certification Summary', 'Authorization Lookup', 'Eligibility Lookup', 'Clinical Certification', 'Certification Requests In Progress', 'MSM Practitioner Perf. Summary Portal', 'Resources', 'Manage Your Account', 'MedSolutions Portal', and 'Help / Contact Us'. Below the menu, the date and time 'Wednesday, November 17, 2021 3:50 PM' are displayed. The main content area on the right says 'Welcome to the CareCore National Web Portal. You are logged in as AVICKMAN.' and lists several buttons: 'REQUEST AN AUTH', 'RESUME IN-PROGRESS REQUEST', 'SUMMARY OF AUTH', 'AUTH LOOKUP', 'MEMBER ELIGIBILITY', and 'RAD THERAPY PROGRAM'.

- Prior to the patient starting treatment, log into EviCore's Web Portal: www.EviCore.com
- Navigate to the **CareCore National** portal.
- Select **Request an Auth** from the Home screen.

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: [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](#)

Clinical Certification Request | Initiating a Case



The screenshot shows a navigation bar with five items: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, and Clinical Certification (highlighted in yellow). Below the navigation bar is a timestamp: Monday, November 20, 2023 4:34 PM. The main heading is "Request an Authorization". A red oval highlights a message: "There are no active providers associated with your account. [Manage your account >>](#)". Below this message is a link: [Click here for help](#). At the bottom, there is a copyright notice: © CareCore National, LLC. 2023 All rights reserved. and links for [Privacy Policy](#), [Terms of Use](#), and [Contact Us](#).

- Click **Clinical Certification** to begin a new request.
- If you did **not** add providers to your account, then you will get a message indicating there are no active providers associated with your account. Then, click **Manage Your Account**.



The screenshot shows the "Request an Authorization" page. It starts with the heading "Request an Authorization" and the instruction "To begin, please select a program below:". A list of radio button options follows: Durable Medical Equipment(DME), Gastroenterology, Lab Management Program, Medical Oncology Pathways, Musculoskeletal Management, Pharmacy Drugs (Express Scripts Coverage), Radiation Therapy Management Program (RTMP), Radiology and Cardiology, Sleep Management, and Specialty Drugs. Below the list is a blue "CONTINUE" button and a link: [Click here for help](#).

- Select the **Program** for your certification.

Clinical Certification Request | Search and Select Provider

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

Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH

CLEAR SEARCH

	Provider
SELECT	

If the provider's NPI is not listed above, please use the search feature below to add a new provider and continue with case build.

Search By NPI:

SEARCH

BACK

CONTINUE

[Click here for help](#)

- Search for and select the **Provider/Group** for whom you want to build a case. This is the list of providers you added to your account.
- If the **Provider/Group** is not on your list of providers added to your account, you can now **Search by NPI**.

Clinical Certification Request | Search and Select Provider

Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH **CLEAR SEARCH**

Provider	
SELECT	

If the provider's NPI is not listed above, please use the search feature below to add a new provider and continue with case build.

Search By NPI: **SEARCH**

	Practitioner Name	NPI	Address	City	State	ZipCode	Phone	Fax
SELECT								

BACK **CONTINUE**

[Click here for help](#)

Attention!

Do you want to add this NPI () to your account for future requests ?

YES **NO**

By choosing **YES**, the practitioner will be added to the provider list in your account.

- Once the provider is found by searching **NPI**, the line will turn gray to indicate they are selected.

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:

Please select the insurer for this authorization request.

Please Select a Health Plan

BACK

CONTINUE

[Click here for help](#)

- Choose the appropriate **health plan** for the request.
- Another drop down will appear to select the appropriate address for the **provider**.
- Click **CONTINUE**.

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:* [?]

Who to Contact:* [?]

Fax:* [?]

Phone:* [?]

Ext.: [?]

Cell Phone:

Email:

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.
- 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.

EviCore

By EVERNORTH

Clinical Certification Request | Enter Member Information

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

Patient ID:*

Date Of Birth:* MM/DD/YYYY

Patient Last Name Only:* [?]

Leading zeros in the Patient ID will be ignored. Patient ID is 11 numeric digits.

ELIGIBILITY LOOKUP

BACK

[Click here for help](#)

- Enter **member information**, including patient ID number, date of birth, and last name.
- Click **ELIGIBILITY LOOKUP**.

Search Results

	Patient ID	Member Code	Name	DOB	Gender	Address
SELECT	000000000		WATSON, JONATHAN	01/01/1980	M	123 MAIN ST SPRINGFIELD, FL 32084

BACK

- Confirm the patient's information and click **SELECT** to continue.

Patient History Screen

Clinical Certification

The Patient History Screen becomes the hub for all future requests or data relating to this patient. Including a record of previous requests for services through EviCore, authorization numbers and dates, and clinical summaries based on the information provided through the request process.

Reviews					
Date	Physician	Case #	Cancer Type	Treatment	Status
3/04/2019			Colorectal	5-Fluorouracil (5FU; Aducril), Brentuximab Vedotin (Adcetris)	Pending
8/02/2018			Colorectal	Oxaliplatin (Eloxatin)	Approved
2/13/2017			Multiple Myeloma	Cyclophosphamide - inj (Cytoxan; Endoxan-Asta)	Approved

VIEW HISTORY

VIEW HISTORY

VIEW HISTORY

EXIT DETAIL

Case Summary

Review Status: Approved
Approved HCPCS code: Undetermined
Treatment: Undetermined
Review Date: 2/13/2020
Determination Date: 2/13/2020
Start Date: 3/1/2020
Expiration Date: 10/27/2020

Review History

Indicate
Specify
Please
Please
Was th
Has th
Enter t
Histo
Micro
Initial
Select
Select
Cape
eveni
per cyc

own enter "00" for MM. 01/2020
stability-low (MSI-L) or microsatellite-stable (MSS)
omy
Pharmacy. PO twice daily on days 1 (beginning in the
platin: 130 Mg/m2 for a duration of 18 with 1 doses
of service: Office Provider 11

Click to view clinical information, Jcodes, and expiration date.

Enter CPT code and Diagnoses

The screenshot shows the EviCore healthcare Clinical Certification page. At the top, there is a navigation menu with options: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, Help / Contact Us, and MedSolutions Portal. The page title is "Clinical Certification". On the left, there is a progress bar showing "60% Complete" and a sidebar with "Provider and NPI" and "Patient" sections, each with an "EDIT" button. The main content area is divided into three sections: "Medical Oncology Pathways" with a dropdown menu set to "CHEMO" and a "CHANGE" button; "Diagnosis" with a primary diagnosis code of "R68.89" and description "Other general symptoms and signs"; and a section for "Secondary Diagnosis Code" with a "LOOKUP" button. At the bottom, there are "Cancel", "Back", "Print", and "Continue" buttons, and a footer with copyright information and a link for help or technical support.

Select the CPT and Diagnosis codes.

- For primary **Chemotherapy** requests, the CPT code will be **CHEMO**.
- For **Supportive Therapy** requests, the CPT code will be **SPORT**.
- **NOTE:** The diagnosis code selected must equate to a cancer indication. Non-cancerous ICD10 codes are **not** managed under the Medical Oncology Program.

Verify Selections Made

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

Tuesday, November 05, 2019 9:09 AM Log Off

Clinical Certification

Confirm your service selection.

Procedure Date: 1/20/2019
Medical Oncology Pathways: CHEMO
Description: CHEMOTHERAPY
Primary Diagnosis Code: R68.89
Primary Diagnosis: Other general symptoms and signs
Secondary Diagnosis Code:
Secondary Diagnosis:
[Change Procedure or Primary Diagnosis](#)
[Change Secondary Diagnosis](#)

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

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

Click **Continue** to confirm your selection.

Clinical Certification Request | 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:	<input type="text"/>	Zip Code:	<input type="text"/>	Site Name:	<input type="text"/>
TIN:	<input type="text"/>	City:	<input type="text"/>	<input type="radio"/> Exact match	
				<input checked="" type="radio"/> 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.

Clinical Certification Request | Clinical Certification

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account
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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 correct.
- **You will not have the opportunity to make changes after this point.**

Clinical Information

Proceed to Clinical Information

1 Indicate the Cancer Type:

Colon/Rectal Cancer ▼

- Anal
- Bladder
- Bone
- Brain and Spinal Cord Tumors (CNS Tumors)
- Breast
- Breast Cancer Risk Reduction
- Cervical Cancer
- Colon/Rectal Cancer**
- Endometrial Cancer
- Ewing's Sarcoma
- Gallbladder Cancer
- Gastric/Esophageal Cancer
- Gestational Trophoblastic Neoplasia (GTN)
- Hairy Cell Leukemia
- Head and Neck Cancers
- Hepatic (Liver) Cancer

SUBMIT

Finish Later

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

The Clinical pathways begin with selection of the cancer type. This will dictate the questions that will be asked in the following screens. All cancer types covered by NCCN are available and an “Other” option is included for rare cancers not addressed by NCCN.

Exclusion Confirmation



Exclusions are confirmed, if applicable

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Help / Contact Us	
----------------------	---------------------------------------	--------------------------------------	------------------------------------	--	--	---	-----------------------------------	--

Proceed to Clinical Information

i Please select all of the following that apply:

- The patient is participating in a clinical trial that includes cancer treatment drugs
- The treatment will be administered inpatient
- This request is for a Stem Cell Transplant conditioning regimen
- The requested drug is being used to treat a condition other than cancer
- CAR-T Therapy
- None of the above

SUBMIT

Clinical Pathway

Clinical Certification

Initial AJCC (Pathologic stage) Stage at DIAGNOSIS:

0

I

IIA

IIB

IIC

IIIA

IIIB

IIIC

IV

Unknown

Select treatment type:

Chemotherapy after surgery (Adjuvant)

Therapy for a patient who is locally unresectable or medically inoperable

Neoadjuvant chemotherapy for clinical T4b disease prior to colectomy

High Risk Pathologic Features

- <12 nodes examined
- Poorly differentiated histology
- Lymphatic/vascular or perineural invasion
- Bowel Obstruction
- Localized perforation
- Close, indeterminate or positive margins

Most recent entry for this patient: None

KRAS/NRAS Result:

Wild Type (no mutation)

Mutation Positive

Testing Not Completed/Unknown Status

Does the patient have high risk factors for recurrence? (see description above)

Yes No

The user will be asked a series of questions necessary to generate the recommended treatment list for the patient being treated. A typical traversal will have between 5 and 12 questions based on the complexity of the cancer. The system will dynamically filter to only the minimum number of questions needed to complete the review. Almost all answers are in drop down or click selection to allow for quick entry.

Clinical Pathway – Review History

The screenshot displays the EviCore healthcare web application interface. At the top, the EviCore healthcare logo is on the left, and a navigation menu is on the right with items: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted in yellow), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, Help / Contact Us, and MedSolutions Portal. A 'Log Off' button is in the top right corner. The main content area is titled 'Proceed to Clinical Information' and shows 'Most recent entry for this patient: None'. Below this are radio buttons for 'Menopausal Status', 'Premenopausal', and 'Postmenopausal (natural, ovaries removed, or drug-induced)'. A 'SUBMIT' button is present. A 'Review History' section is highlighted with a red arrow, showing a list of questions: 'Indicate the Cancer Type:' with 'Breast' selected, and 'Please select the Place of Service for this request:' with 'Office' selected. There is also a 'Finish Later' option and a 'Did you know?' tip box that says 'You can save a certification request to finish later.'

- **Review History** can be used to go back and change the answer to a previous question if necessary.
- Answers to previous questions are displayed for reference.
- Going back and changing an answer will prompt subsequent questions to be re-answered.

Select Treatment Regimen

The screenshot shows the EviCore Clinical Certification interface. At the top, there is a navigation bar with links: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted), Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account, Help / Contact Us, and MedSolutions Portal. A 'Log Off' button is in the top right corner.

On the left side, there is a progress indicator showing '80% Complete' with a bar chart. Below it are sections for 'Provider and NPI', 'Patient', and 'Service', each with an 'EDCT' button.

The main content area is titled 'Clinical Certification'. It contains the following text:

The treatment options below reflect the recommendations of the National Comprehensive Cancer Network (NCCN) based on the clinical information submitted.

- NCCN Categories of Preference identifies regimens that are superior in terms of efficacy, safety, and evidence and when appropriate, affordability. The health plan is using it as a foundation to identify Preferred regimens to drive quality and affordability.

Selection of a preferred treatment option (check mark on the right) will result in an immediate authorization.
Selection of certain non-preferred treatment options (no check mark) will require peer to peer.

Previously Approved Treatments (listed in chronological order): None

Select Treatment Option:

Regimen	Preferred	Help ?
<input type="checkbox"/> Dose-dense AC followed by EVERY 2 WEEKS Paclitaxel (Dose-dense Doxorubicin HCL + Cyclophosphamide followed by Paclitaxel)	<input checked="" type="checkbox"/>	
<input type="checkbox"/> AC EVERY 3 WEEKS followed by WEEKLY Paclitaxel (Doxorubicin HCL + Cyclophosphamide followed by weekly Paclitaxel)	<input type="checkbox"/>	
<input type="checkbox"/> TAC (Docetaxel + Doxorubicin HCL + Cyclophosphamide)	<input type="checkbox"/>	
<input type="checkbox"/> AC EVERY 3 WEEKS followed by Docetaxel (Doxorubicin HCL + Cyclophosphamide followed by Docetaxel)	<input type="checkbox"/>	
<input type="checkbox"/> Dose-dense AC followed by WEEKLY Paclitaxel (Dose-dense Doxorubicin HCL + Cyclophosphamide followed by Paclitaxel)	<input type="checkbox"/>	
<input type="checkbox"/> AC EVERY 3 WEEKS (Doxorubicin HCL + Cyclophosphamide)	<input type="checkbox"/>	
<input type="checkbox"/> EC (Epirubicin + Cyclophosphamide)	<input type="checkbox"/>	
<input type="checkbox"/> CMF (Cyclophosphamide + Methotrexate + 5-Fluorouracil)	<input type="checkbox"/>	
<input type="checkbox"/> Dose-dense AC (Dose-dense Doxorubicin HCL + Cyclophosphamide)	<input type="checkbox"/>	
<input type="checkbox"/> TC (Docetaxel + Cyclophosphamide)	<input type="checkbox"/>	
<input type="checkbox"/> Build a Custom Treatment Plan (May Require Additional Clinical Review)	<input type="checkbox"/>	

A large green arrow points to the 'Build a Custom Treatment Plan' option.

- A list of all NCCN treatment options will be presented based on the answers to the clinical questions.
- Select an NCCN Recommendation from the list.
 - These options will vary based on the clinical & diagnosis submitted.
 - There is also an option to **Build a Custom Treatment Plan**.

Provider Experience – Case Submission

eviCore healthcare
innovative solutions

Home Certification Summary Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Perf. Su

Previously Approved Treatments (listed in chronological order): None

Select Treatment Option:

Regimen
<input type="radio"/> Acalabrutinib + obinutuzumab
<input type="radio"/> Alemtuzumab + Rituximab
<input type="radio"/> HDMP + Rituximab (high-dose Methylprednisolone + Rituximab)
<input type="radio"/> Ibrutinib
<input type="radio"/> Obinutuzumab
<input type="radio"/> Venetoclax + obinutuzumab
<input type="radio"/> Build a Custom Treatment Plan (May Require Additional Clinical Review)

SUBMIT

Treatment Selection:
Based on the answers submitted, all NCCN recommended treatments are displayed.
Recommended treatment = immediate approval!
There is also an option for “custom” requests that will be sent for medical director review at EviCore for further evaluation.

← Custom option if required

- The system is designed to managed injectable chemotherapy only or injectable + oral chemotherapy.
- This will be decided as part of the program design conversation.

Custom Regimen Selection

If a **custom regimen** is selected, a popup will alert you that a peer to peer conversation with a medical director is required, and given the option to select a different treatment option or continue with the custom request.

Proceed to Clinical Information

Because a custom treatment plan was selected, a peer consultation with an eviCore Medical director will be required. If you would like to change your request to a Pathway regimen please go to the review history below and click on "treatment selection" to return to the previous screen. **If a Pathway regimen is selected you will be granted an immediate authorization.***

*Other policies may apply in select situations.

If you would like to proceed with this selection, please click "SUBMIT"

SUBMIT

Review History

- Indicate the Cancer Type:
 - Kidney Cancer
- Please select the Place of Service for this request:
 - Office

Finish Later

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

Provider Experience – Case Submission

eviCore healthcare

Home Certification Summary Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Pra Perf. Summ

Drug List:

Search	Add all	2 items selected
5FU (5-Fluorouracil)	+	5-Fluorouracil (Adrucil, 5FU)
Abemaciclib - oral (Verzenio)	+	Capecitabine - oral (Xeloda)
Abiraterone Acetate - Zytiga - oral (Zytiga)	+	
Abiraterone Acetate -Yonsa - oral (Yonsa)	+	
Abraxane (Paclitaxel (albumin-bound))	+	
Acalabrutinib - oral (Calquence)	+	
Actemra (Tocilizumab)	+	
Actimmune (Interferon, gamma-1b)	+	
Adcetris (Brentuximab V)	+	
Ado-Trastuzumab Emtan	+	
Adriamycin (Doxorubicin)	+	
Adrucil (5-Fluorouracil)	+	
Afatinib - oral (Gilotrif)	+	

Clinical Certification

The treatment regimen is not recommended by NCCN. If you think a mistake has been made during the case, regimens will not be immediately approved and require Clinical Review. Supporting clinical information should be provided.

Documentation to support your proposed treatment should be submitted in the following manner:

- Free text in box below
- Attach documentation to case
- Fax documentation to 866-889-8061. Include patient name and the case reference number.

If you need additional time, click "Save and Exit" and return by clicking "RESUME".

Submit all relevant information about this case within 2 business days.

Enter supporting Clinical Information in the field below:

You may attach up to 5 PDF or Word documents no larger than 1 MB each.

Attach a PDF or Word document: click "Browse" to select the document from your desktop or other network location.

Browse...

Custom Treatment plans can be submitted for any case where the provider does not want to use a recommended regimen. Drugs are selected from a dropdown list and the user has the opportunity to attach or enter supporting information for the request via upload or free text.

Case Submission

Clinical Certification

Your case has been Approved.

Provider Name:	[REDACTED]	Contact:	dave
Provider Address:	[REDACTED] VE [REDACTED] L	Phone Number:	[REDACTED]
		Fax Number:	[REDACTED]
Patient Name:	[REDACTED]	Patient Id:	[REDACTED]
Insurance Carrier:	PLAN-X		
Site Name:	[REDACTED]	Site ID:	[REDACTED]
Site Address:	[REDACTED]		
Diagnosis/ICD-9 Code:	153.9	Description:	MALIGNANT NEO COLON NOS
Date of Service:	2/2/2015		
HCPCS Code(s):	J9263	Drug(s):	OXALIPLATIN (ELOXATIN)
Authorization Number:	[REDACTED]		
Review Date:	03/05/2019		
Start Date:	03/10/2019		
Expiration Date:	11/10/2019		
Status:	Your case has been Approved.		

Print Go to Patient History **Request Supportives**

- Selection of a recommended regimen will result in immediate approval of all drugs in the requested regimen with an authorization time span sufficient to complete the entire treatment.
- No further action is needed unless the treatment needs to be changed due to disease progression or other clinical factors.

Shortcut will populate for adding **supportive drugs**, if needed.

Case Submission - Supportives

- If **Request Supportives** is selected, a new case is started and the user is prompted to complete a supportive drug request.
- The start date, drug classification, and ICD10 are prepopulated to match the Chemotherapy case.
- Click **Continue** to proceed to the clinical portion of the request.
- User will be asked to indicate the drug needed and may be asked for additional clinical information to support that request. If multiple classes of supportive drugs are needed, a separate request must be entered for each class (ex: anti-emetic and G-CSF).

Clinical Certification

Confirm your service selection.

Procedure Date: 5/5/2016
Medical Oncology Pathways: SPORT
Description: SUPPORTIVE THERAPIES
Diagnosis Code: C18.9
Diagnosis: Malignant neoplasm of colon

[Change Procedure or Diagnosis](#)

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

Clinical Certification

Confirm Cancer type

Colon/Rectal Cancer

Clinical Certification

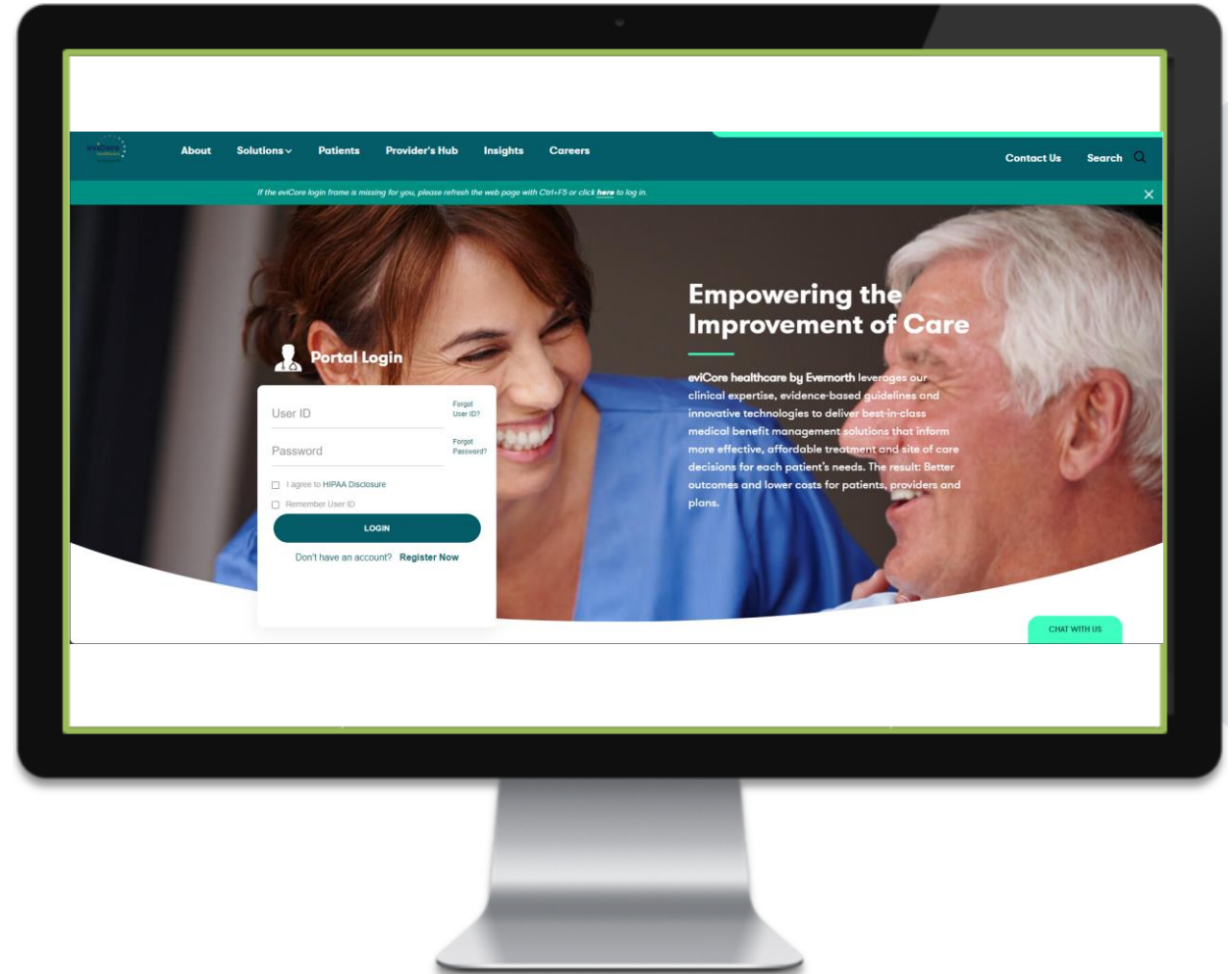
Indicate the requested supportive agent:

- Darbepoetin alfa (Aranesp) ONCE EVERY 2 WEEKS
- Darbepoetin alfa (Aranesp) ONCE EVERY 3 WEEKS
- Darbepoetin alfa (Aranesp) WEEKLY FIXED DOSE
- Darbepoetin alfa (Aranesp) WEEKLY WEIGHT BASED DOSE
- Denosumab (Prolia)
- Denosumab (Xgeva) MONTHLY
- Denosumab (Xgeva) MONTHLY and DAY 8, 15
- Epoetin alfa (Epogen, Procrit) 3 TIMES PER WEEK
- Epoetin alfa (Epogen, Procrit) ONCE EVERY 2 WEEKS
- Epoetin alfa (Epogen, Procrit) ONCE EVERY 3 WEEKS
- Epoetin alfa (Epogen, Procrit) WEEKLY
- Filgrastim (Neupogen) 300 mcg single use syringe/vial
- Filgrastim (Neupogen) 480 mcg single use syringe/vial
- Granisetron (Sustol)
- Octreotide (Sandostatin LAR Depot)
- Octreotide (Sandostatin)
- Pegfilgrastim (Neulasta)
- Telotristat ethyl - oral (Xermelo)
- Build a Custom Treatment Plan (May Require Additional Clinical Review)

Provider Portal Demo | Medical Oncology

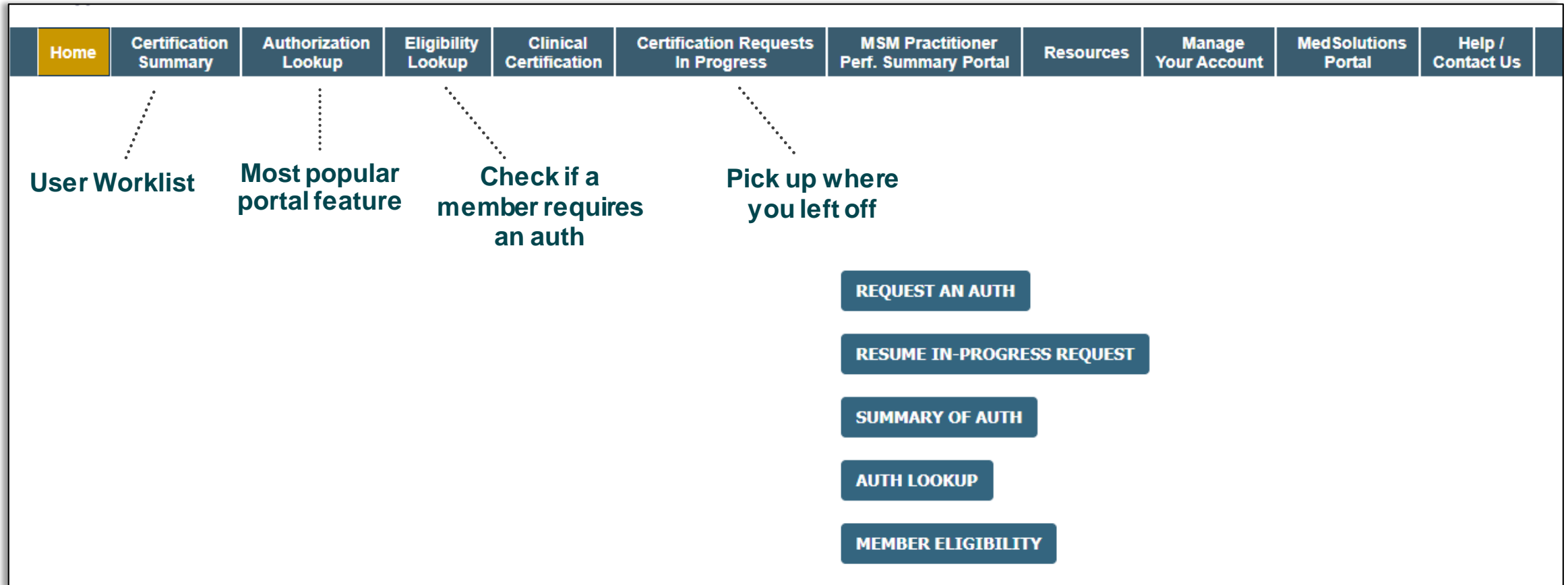
The EviCore online portal is the quickest, most efficient way to request prior authorization and check authorization status.

Click [HERE](#) to view a video demo (2 min)



CareCore National Portal Features

Provider Portal | Feature Access



Certification Summary | User Worklist

Thursday, January 25, 2024 8:20 AM

Certification Summary

Search For:

🔍 ☰

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Authorization Number	Case Number	Member Last Name	Ordering Provider Last Name	Ordering Provider NPI	Status	Case Initiation Date	Procedure Code	Service Description
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>			<input type="text" value=""/>	

Page 1 of 0 | 10

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

Authorization Lookup | Popular Tool

The screenshot shows the top navigation bar of the EviCore portal with the following items: Home, Certification Summary, Authorization Lookup (highlighted with a red circle), Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Perf. Summary Portal, Resources, Manage Your Account, MedSolutions Portal, and Help / Contact Us. Below the navigation bar, the date and time 'Thursday, January 25, 2024 8:27 AM' are displayed. The main heading is 'Authorization Lookup'. There are four radio button options for search criteria: 'Search by Member Information' (selected), 'Search by Authorization Number/ NPI', 'OnePA: Prior Authorization Portal for Providers', and 'Search by Claim Number/Health plan'. Under 'Required Fields', there is a 'Healthplan:' label and a dropdown menu. A 'PRINT' button is located below the form fields. At the bottom left, there is a link that says 'Click here for help'.

- 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.

Provider Resources

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.

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 not specific to health plans, such as guidelines and our required clinical information checklist.

To access these helpful resources, visit EviCore's [Provider's Hub](#).

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.**



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](https://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
- 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



EviCore's Provider Newsletter

Stay up to date with our free provider newsletter!

To subscribe:

- Visit [EviCore.com](https://www.evicore.com).
- Scroll down to the section titled **Stay Updated With Our Provider Newsletter**.
- Enter a valid email address.



Thank You

Appendix


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.

Authorization Lookup

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





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.

Authorization Lookup

Authorization Number:	NA
Case Number:	Request Peer to Peer Consultation
Status:	Denied
P2P Eligibility Result:	Post-decision options for this case have been exhausted or are not delegated to eviCore. You may continue to schedule a Peer to Peer discussion for this case but it will be considered consultative only and the original decision cannot be modified.
P2P Status:	

ALL POST DECISION OPTIONS

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

How to Schedule a Peer-to-Peer Request

Case Info Questions Schedule Confirmation

New P2P Request

eviCore healthcare P2P Portal

Case Reference Number

Member Date of Birth

+ Add Another Case

Lookup Cases >

- 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.

New P2P Request

eviCore healthcare P2P Portal

Case Ref #: Remove ✔ P2P Eligible

! Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.

Member Information	Case P2P Information
Name	Episode ID
DOB	P2P Valid Until 2020-11-11
State	Modality MSK Spine Surgery
Health Plan	Level of Review Reconsideration P2P
Member ID	System Name ImageOne

Continue

How to Schedule a Peer-to-Peer Request

Case Info

1st Case

Case #

Episode ID

Member Name

Member DOB

Member State

Health Plan

Member ID

Case Type MSK Spine Surgery

Level of Review Reconsideration P2P

Questions

Please indicate your availability

Preferred Days

Mon	Tues	Wed	Thurs	Fri
✓	✓	✓	✓	✗

Preferred Times

Morning					Afternoon						
7:00 to 8:00	8:00 to 9:00	9:00 to 10:00	10:00 to 11:00	11:00 to 12:00	12:00 to 1:00	1:00 to 2:00	2:00 to 3:00	3:00 to 4:00	4:00 to 5:00	5:00 to 6:00	6:00 to 7:00
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Time Zone

US/Eastern

[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**.

- 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.

The list of physicians returned are all trained and prepared to have a Peer to Peer discussion for this case.

← Prev Week 5/18/2020 - 5/24/2020 (Upcoming week) Next Week →

1st Priority by Skill

Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
6:15 pm EDT	-	-	-	-	-	-
6:30 pm EDT	-	-	-	-	-	-
6:45 pm EDT	-	-	-	-	-	-

1st Priority by Skill

Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
3:30 pm EDT	2:00 pm EDT	4:15 pm EDT	3:15 pm EDT	-	-	-
3:45 pm EDT	2:15 pm EDT	4:30 pm EDT	3:30 pm EDT	-	-	-
4:00 pm EDT	2:30 pm EDT	4:45 pm EDT	3:45 pm EDT	-	-	-
4:15 pm EDT	2:45 pm EDT	5:00 pm EDT	4:00 pm EDT	-	-	-
Show more...	Show more...	Show more...	Show more...	-	-	-

How to Schedule a Peer-to-Peer Request

Confirm Contact Details

- Contact person name and email address will auto-populate per your user credentials.

The screenshot shows a web interface for scheduling a Peer-to-Peer (P2P) appointment. At the top, there are four steps: Case Info (checked), Questions (checked), Schedule (checked), and Confirmation (active). The main content area is divided into three sections:

- P2P Info:** Date: Mon 5/18/20, Time: 6:30 pm EDT, Reviewing Provider: [User Icon]
- Case Info:** 1st Case details including Case #, Episode ID, Member Name, Member DOB, Member State, Health Plan, Member ID, Case Type (MSK Spine Surgery), and Level of Review (Reconsideration P2P).
- P2P Contact Details:** Fields for:
 - Name of Provider Requesting P2P: Dr. Jane Doe
 - Contact Person Name: Office Manager John Doe
 - Contact Person Location: Provider Office
 - Phone Number for P2P: (555) 555-5555
 - Phone Ext.: 12345
 - Alternate Phone: (xxx) xxx-xxxx
 - Phone Ext.: Phone Ext.
 - Requesting Provider Email: droffice@internet.com
 - Contact Instructions: Select option 4, ask for Dr. Doe

A yellow 'Submit' button is located at the bottom right of the P2P Contact Details section.

- 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.

The screenshot shows a summary page for a scheduled appointment. It features a calendar icon, the text "Scheduling", and "Scheduled". Below this, there is a blue bar with a calendar icon, a clock icon, and the text "Mon 5/18/20 - 6:30 pm EDT". A red oval highlights the word "SCHEDULED" in a blue box.

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.

