



EviCore Claim Processing for Molecular Testing

Claim processing by EviCore does <u>not always</u> require the provider to request a prior authorization. In addition to managing prior authorizations for molecular testing, EviCore completes post-claim reviews for certain molecular testing services for medical necessity and appropriateness on Wellmark's behalf and EviCore claim policies apply. Please review the <u>Lab Management Code list</u> to determine how EviCore manages each code.

Molecular Testing Resources

EviCore code list & guidelinesEviCore's use of the word guidelines equates to
Wellmark's use of medical policies.

Laboratory Management | EviCore healthcare

Molecular Testing Utilization Management program page on Wellmark.com

Molecular Testing Utilization Management Program | Wellmark

Contact Claims Research/Support for questions related to claim policies (i.e. claim review processes, claim denials, request for records, etc.)

Phone	866-221-8787
Email	Clientservices@EviCore.com (Include "Wellmark BCBS claims inquiry" in the subject line)
Clinical consultation when claim policies apply	Clinical consultations with EviCore can occur at any time but will not change the claim denial decision. Wellmark claim appeal will be needed (if warranted). Wellmark will not require a provider inquiry before an appeal for EviCore related denials.

Post-claim Record Request

Providers may receive medical record requests from EviCore via mail, phone or fax. Please submit the requested clinical information via fax or the EviCore Portal as soon as possible, but no later than the 30-calendar-day deadline shared in the request.

Note: Out-of-state providers will receive the post-claim record request from the local BCBS plan. Please send clinical records to your local BCBS plan following instructions on the request and these will be routed to EviCore.

If the provider receives request for additional clinical information on a submitted claim, please respond by either:

Faxing records to	844-545-9213
Uploading records via EviCore Provider Portal	 Find the Episode ID and referring provider NPI number on the request letter (See image 1 on page 2). Log into EviCore Provider Portal In the EviCore Provider Hub, navigate to Authorization Lookup to find the case – search by authorization number/NPI (See image 2 on page 2). Upload additional clinical (See image 3 on page 2).

If the provider does NOT receive request for additional clinical information on a submitted claim, but would like to provide additional clinical information:

- **1.** Review the EviCore Guidelines (Medical Policy) found at <u>Laboratory Management | EviCore healthcare</u> to understand the EviCore claim policy applied.
- 2. Submit a claim appeal to Wellmark (if warranted). Again, Wellmark will not require a provider inquiry before an appeal for EviCore related denials.

Wellmark Blue Cross and Blue Shield of Iowa, Wellmark Health Plan of Iowa, Inc. and Wellmark Blue Cross and Blue Shield of South Dakota are independent licensees of the Blue Cross and Blue Shield Association. Wellmark contracts with EviCore healthcare (EviCore), an independent company to review requests for certain services for medical necessity and appropriateness on behalf of Wellmark.





Image 1

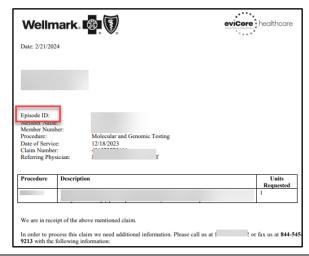
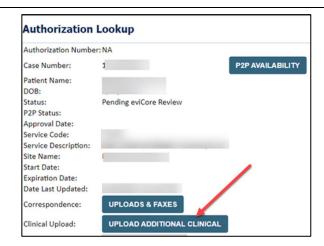


Image 2



The Episode ID on the request letter is the same as the Auth/Case Number in the EviCore Portal.

Image 3



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