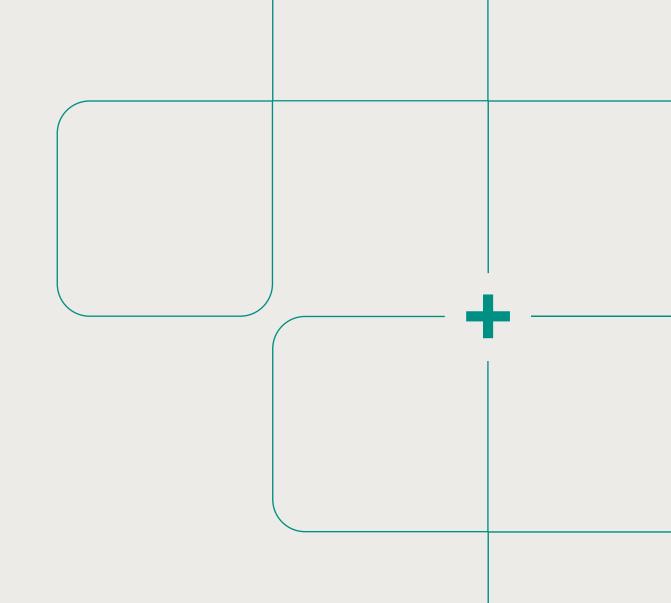
# Radiology & Cardiology Advanced Imaging

Provider Presentation for Highmark







## **Agenda**



#### **Solutions Overview**

Radiology & Cardiology Advanced Imaging

#### **Submitting Requests**

Prior Authorization Outcomes, Special Considerations & Post-Decision Options

#### **EviCore Provider Portal**

Overview, Features, and Benefits

**Provider Resources** 

**Questions & Next Steps** 

#### **Appendix**

- Step-by-Step Case Submission
- Self-Service Peer-to-Peer Scheduling Tool



# Solution Overview





## **Highmark Health 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.



**Advanced Imaging** 

#### Radiology

- CT, CTA
- MRI, MRA
- PET, PET/CT
- Nuclear Medicine

#### **Cardiology**

- Stress Testing
  - Myocardial Perfusion Imaging (SPECT & PET)
  - Stress Echocardiography
- Cardiac CT & MRI
- Echocardiography; Transthoracic, Transesophageal
- Diagnostic Heart Catheterization

To find a list of CPT codes that require prior authorization through EviCore, please visit: <a href="https://www.evicore.com/resources/healthplan/highmark">https://www.evicore.com/resources/healthplan/highmark</a>





# Submitting Requests





# **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 <a href="https://www.EviCore.com">www.EviCore.com</a>



Phone: 888-564-5492

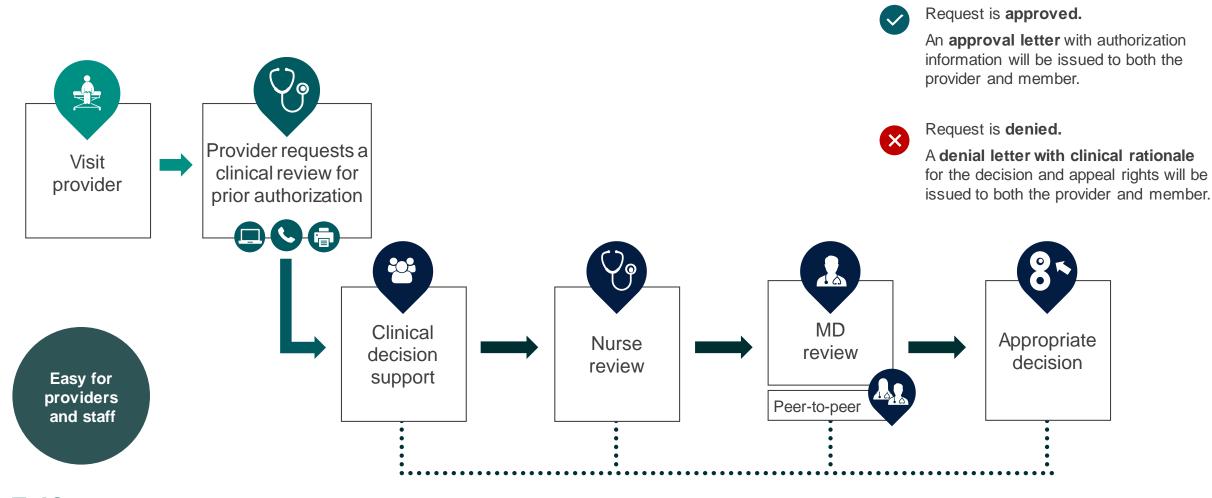
Monday – Friday

7 AM – 7 PM (local time)

Fax: 800-540-2406



# **Utilization Management |** Prior Authorization





# **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) Provider

- 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.



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



#### **Prior Authorization Outcomes**

#### **Determination Outcomes:**

- Approved Requests: Authorizations are valid for up to 180 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





## **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 888-564-5492.
- 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 **888-564-5492** 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

- Providers can request a reconsideration review.
- Reconsiderations must be requested within 180 calendar days after the determination date.
- Reconsiderations can be requested in writing or verbally via a Clinical Consultation with an EviCore physician.



- EviCore will process first-level appeals for **Commercial members** only.
- The timeframe by which appeal requests must be submitted to EviCore varies by line of business. Please refer to the denial letter for instructions.





# 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 <u>do not</u> include a reconsideration option.

#### **Appeals**

 EviCore <u>will not</u> process first-level appeals for Medicare members.





## **Special Circumstances**

#### Retrospective (Retro) Authorization Requests

- Must be submitted within 730 calendar days from the date of service.
- Reviewed for clinical urgency and medical necessity.
- Retro requests are processed within 30 calendar days after receiving all necessary information.
- When authorized, the start date will be the submitted date of service.

#### **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.





# **EviCore Provider Portal**





# EviCore Provider Portal | Access and Compatibility

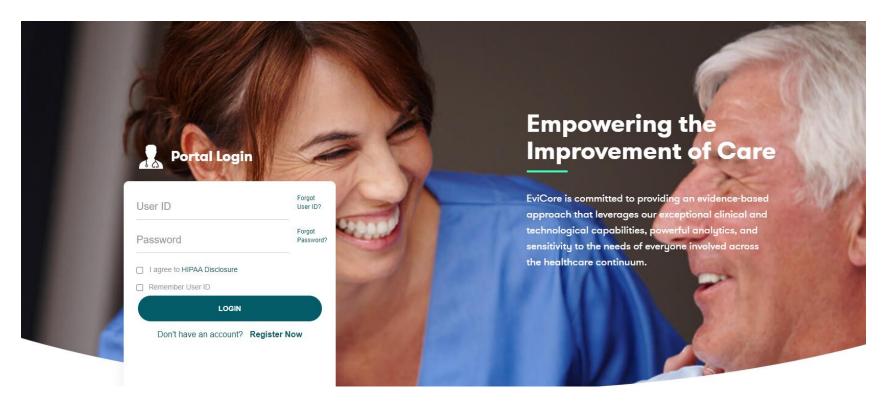
Most providers are already saving time submitting clinical review requests online vs. telephone.

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.

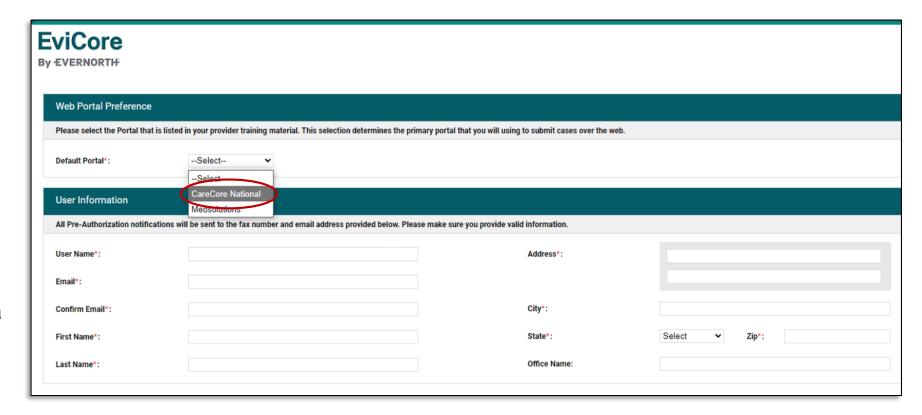




EviCore's website is compatible with **all web browsers**. If you experience issues, you may need to **disable pop-up blockers** to access the site.

# 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.





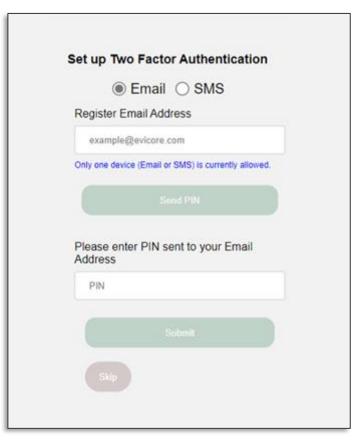
# **Setting Up Multi-Factor Authentication (MFA)**

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.

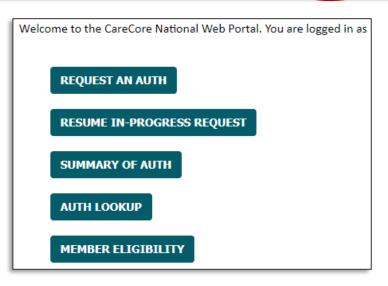




# Welcome Screen | Adding Providers to Registration

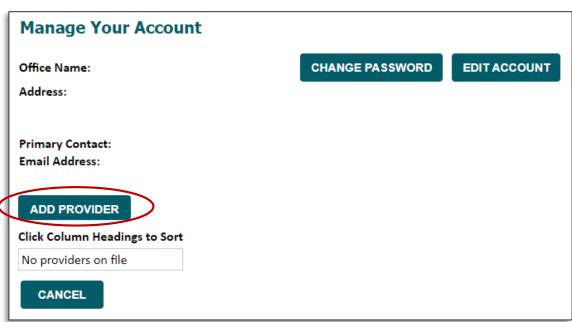


- Providers can be added to your account prior to case submission.
- Click the Manage Your Account tab to add providers to the web registration.





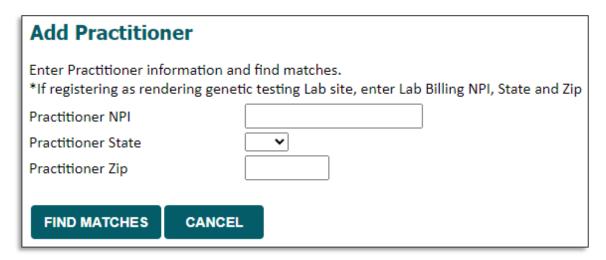
Certification Eligibility Clinical **Certification Requests Authorization MSM Practitioner** Manage MedSolutions Help / Resources Home Lookup Lookup Certification In Progress Perf. Summary Portal **Your Account** Portal **Contact Us** Summary



Click the Add Provider button.



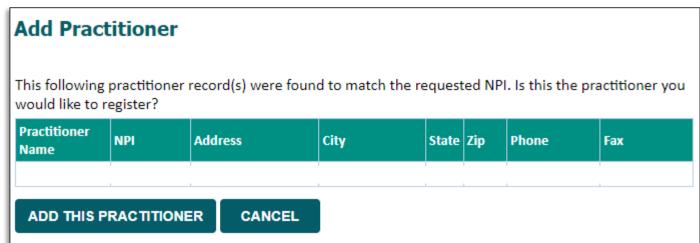




- Enter the Provider's NPI, state, and zip code to search for the provider record.
- Once entered, click Find Matches.
- Multiple providers can be added to your account.







Select the matching record based upon your search criteria.



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

#### **Add Practitioner**

Thank you for registering on the CareCore National website. If you wish to add an additional practitioner, click the "Add Another Practitioner" button. If you are finished, click the "Continue" button to complete the registration process.

ADD ANOTHER PRACTITIONER

CONTINUE

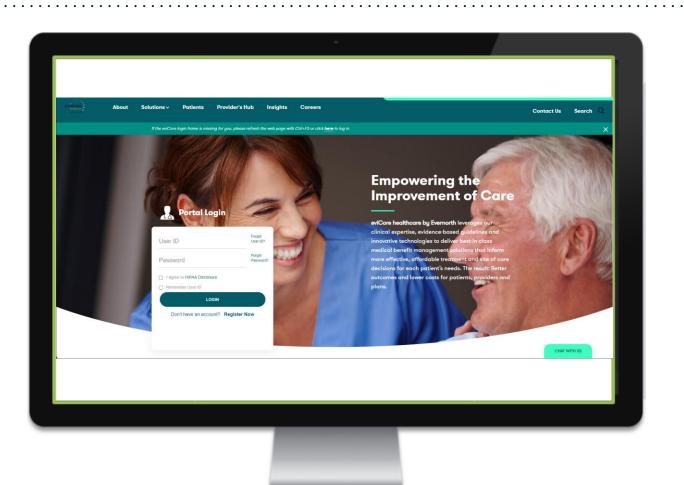
- Once you have selected a practitioner, your registration will be completed and ready for building a case.
- You can click on Add Another Practitioner to add another provider to your account or click Continue.



# Provider Portal Demo | Radiology & Cardiology

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)





# **Bundling** | Radiology and Oncology

The coming are accounting in a double-stand or accountable and another institute account with an energy official and the The coincing!
The service you are requesting is a duplicate of an approved bundled authorization request with an open effective date. The original request ////////////////////////////////////
What would you like to do:
OUse existing authorization (expire this case)
O Proceed with new request

- EviCore will automatically create bundles for radiology authorizations for diagnostic imaging studies at the point of first contact, when a request is for radiology procedures (i.e., 70553, 71260, 74160, 74177) that include an applicable cancer ICD code.
- The cases are approved based on a grouping of oncology variables/inputs, which are based on the member's condition.
- Authorizations will be updated to cover the applicable CPT code, with multiple units (as applicable) and a 365-day authorization span.
- This helps reduce provider burden by eliminating the need to request imaging authorizations throughout the surveillance of a patient's chemotherapy. Instead of having to request each diagnostic imaging study individually (for each DOS), one authorization will cover 12 months of the appropriate imaging.
- Under the bundling program, you may see the above pop-up when initiating a request, at which time you will make the most appropriate selection for the member.

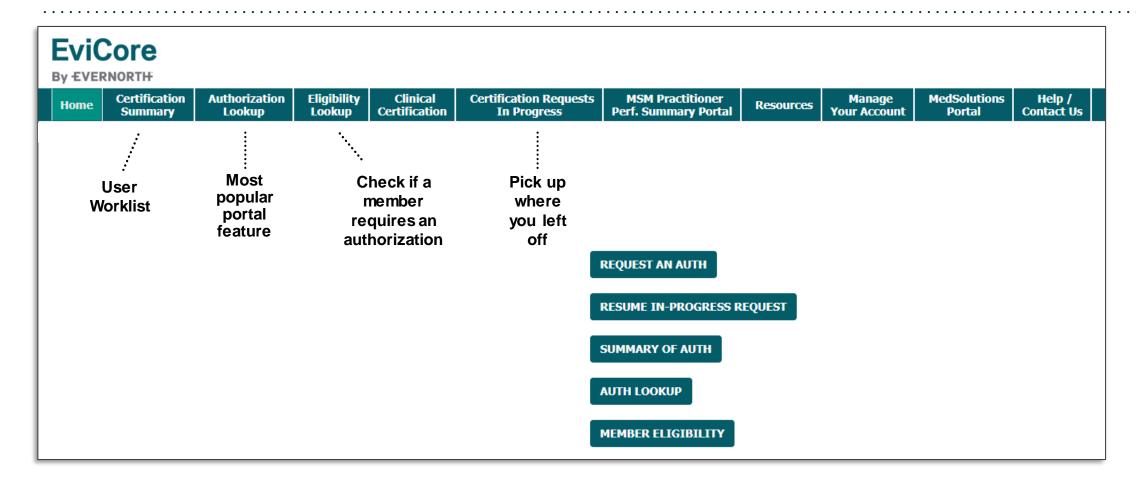


# **EviCore Portal Features**





# **Provider Portal** | Feature Access





## **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.

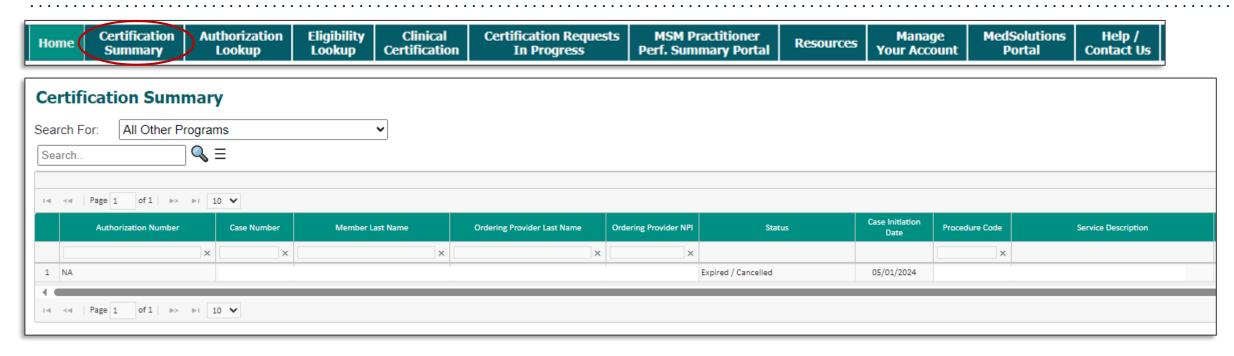
#### **Certification Summary**

Track recently submitted cases.





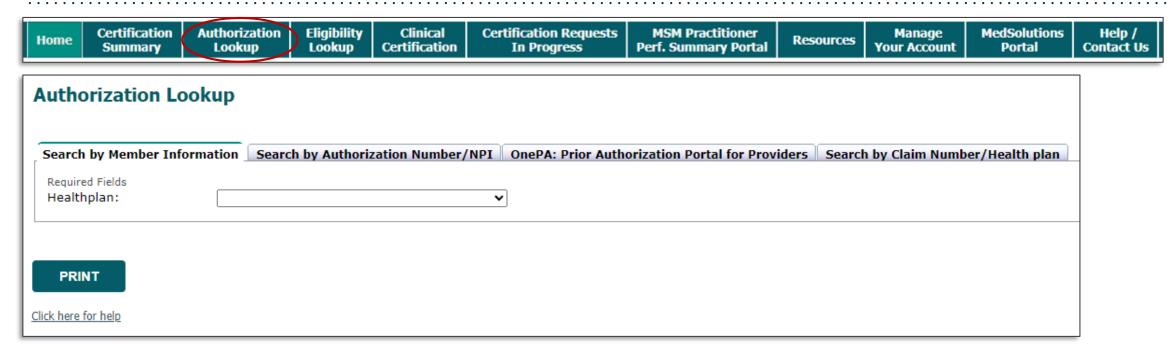
# **Certification Summary** | User Worklist



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



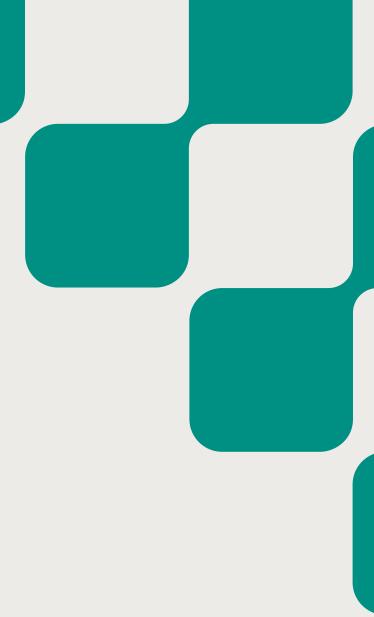
# Authorization Lookup | Popular Tool



- 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.



# 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: <u>ClientServices@EviCore.com</u>

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

#### **Web-Based Services and Portal Support**

Live chat

Email: <u>Portal.Support@EviCore.com</u>

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 **888-564-5492.** 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-planspecific 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/highmark

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**.



# **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 <a href="http://EviCore.webex.com/">http://EviCore.webex.com/</a>
- 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 **Intro to EviCore Online Resources** session 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





#### **EviCore's Provider Newsletter**

Stay up to date with our free provider newsletter!

#### To subscribe:

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





# Thank You





# Appendix





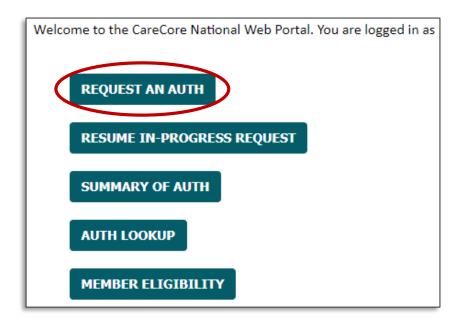
# Initiating a Case





# **Initiating a Case**





- Click the Clinical Certification tab to get started.
- begin a new case request.



# **Select Program**

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

#### **Request an Authorization**

To begin, please select a program below:

- Durable Medical Equipment(DME)
- Gastroenterology
- Lab Management Program
- Medical Oncology Pathways
- Musculoskeletal Management
- O Pharmacy Drugs (Express Scripts Coverage)
- O Radiation Therapy Management Program (RTMP)
- Radiology and Cardiology
- O Sleep Management
- Specialty Drugs

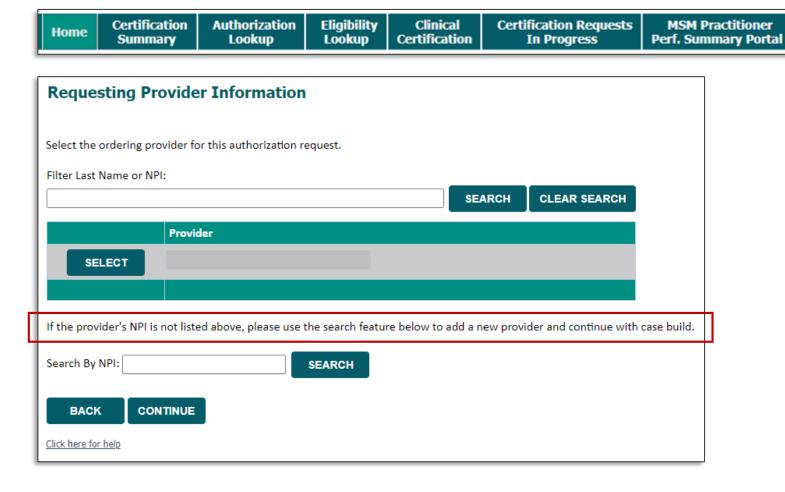
CONTINUE

Click here for help

Select the **Program** for your certification.



## Clinical Certification Request | Search and Select Provider



Provider/Group for whom you want to build a case. This is the list of providers you added to your account.

MedSolutions

Portal

Help /

Contact Us

Manage

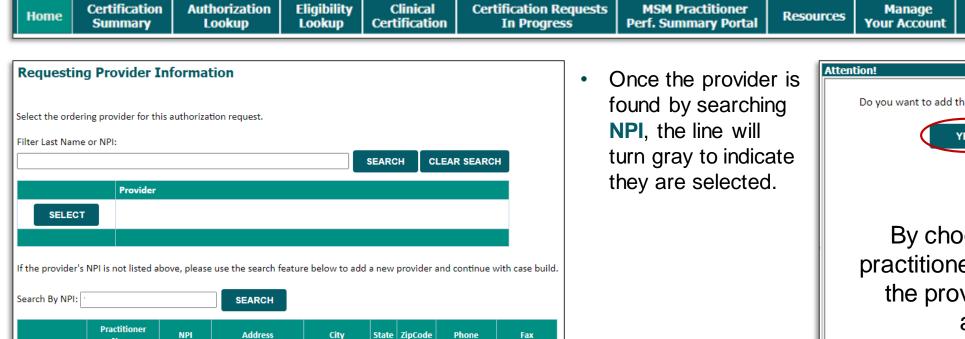
Your Account

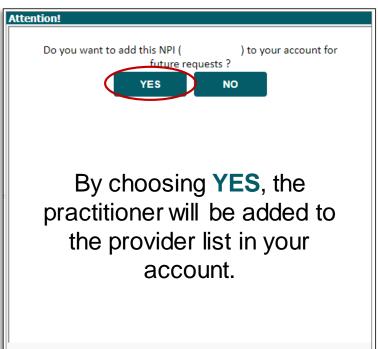
Resources

 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





MedSolutions

Portal

Help /

Contact Us



SELECT

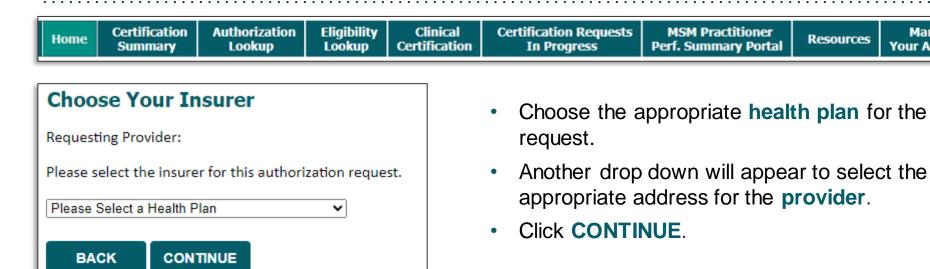
**BACK** 

Click here for help

Name

CONTINUE

#### Clinical Certification Request | Select Health Plan





Click here for help

MedSolutions

Portal

Help /

**Contact Us** 

Manage

**Your Account** 

# Clinical Certification Request | Enter Contact Information

**Certification Requests** 

In Progress

Add Your Co	ntact Info						
Provider's Name:*	[2]						
Who to Contact:*	[2]						
Fax:*	[2]						
Phone:*	[2]						
Ext.:	[2]						
Cell Phone:							
Email:							
	Receive notification of case status changes. Please enter email address in box above.						
Please review the fax and phone numbers presented for accuracy. Change as necessary and click "Confirm Fax and Continue" to confirm they are correct. Changes apply only to this specific request. If you wish the change to be permanent, please contact the Health Plan.							
BACK CONFIRM FAX AND CONTINUE							
Click here for help							

**Authorization** 

Lookup

Eligibility

Lookup

Clinical

Certification

 Enter/Edit the provider's name and appropriate information for the point of contact.

Resources

MedSolutions

Portal

Help /

Contact Us

Manage

Your Account

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

MSM Practitioner

Perf. Summary Portal

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.

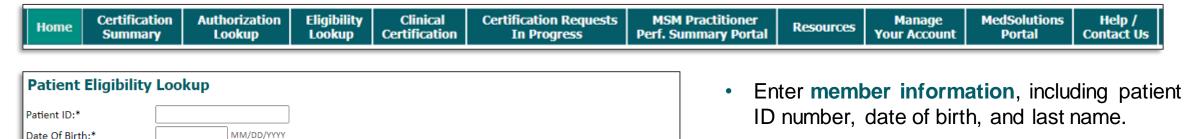


Certification

Summary

**Home** 

## Clinical Certification Request | Enter Member Information



Click ELIGIBILITY LOOKUP.

Search Results								
	Patient ID	Member Code	Name	DOB	Gender	Address		
SELECT		01			F			
BACK								
Click here for help								

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

When entering patient details, please review and confirm the spelling of the patient's name. Verify accuracy of the patient's ID and date of birth.



Patient Last Name Only:\*

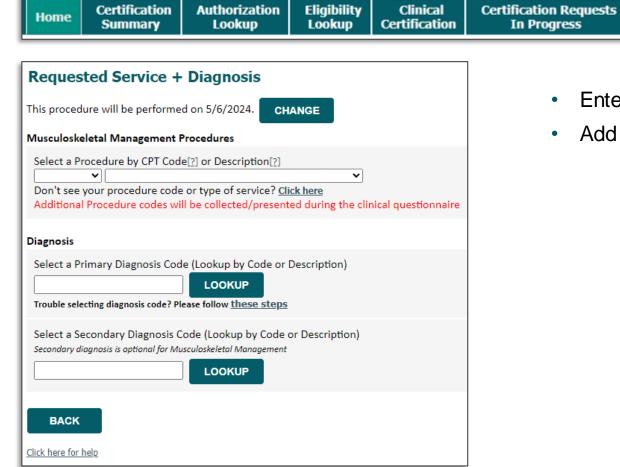
**ELIGIBILITY LOOKUP** 

BACK

Click here for help

# Clinical Certification Request | Procedure and Diagnosis Codes

In Progress



Enter the primary CPT code.

MSM Practitioner

Perf. Summary Portal

Add diagnosis code(s).



MedSolutions

Portal

Help /

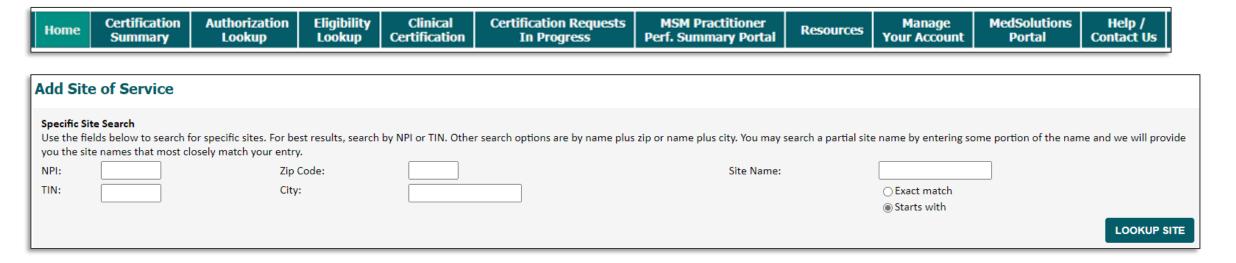
Contact Us

Manage

**Your Account** 

Resources

# Clinical Certification Request | Site Selection



- 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

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

#### **Proceed to Clinical Information**

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

Once you have clicked "CONFIRM AND 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 online request, be sure to complete the clinical review before exiting the system. Even if you will be submitting additional information at a later time, please continue through the final summary page. Failure to formally submit your full request will cause the record to expire with no additional correspondence from eviCore.

I acknowledge that the clinical information I am about to submit for this authorization request is accurate and specific to this member, and that all information will be provided for this request.

**BACK** 

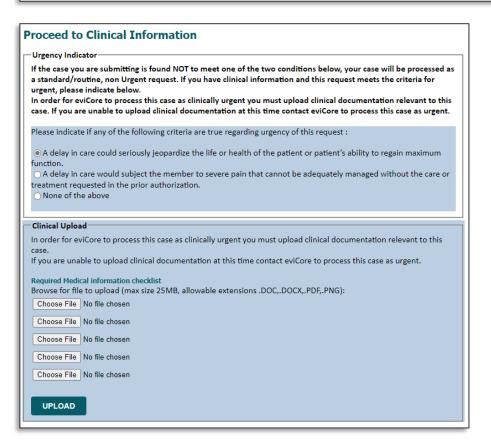
**CONFIRM AND CONTINUE** 

- Verify that all information is entered and correct.
- Check the acknowledgement statement.
- You will not have the opportunity to make changes after this point.



# Clinical Certification Request | Standard or Urgent Request?

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





- If the case is standard, select Yes.
- If your request is urgent, select No.
- When a request is submitted as urgent, you will be required to upload relevant clinical information.
- Upload up to **FIVE** documents. (.doc, .docx, or .pdf format; max 5MB size)
- Your case will only be considered urgent if there is a successful upload.



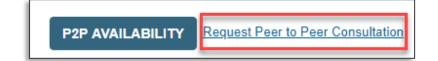
# Online Peer-to-Peer Scheduling Tool



- Log into your account at <u>www.EviCore.com</u>
- 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.



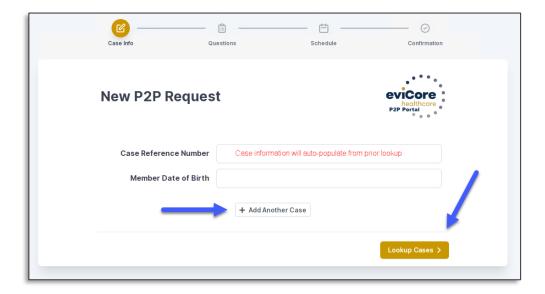


Pay attention to any messaging that displays. In some instances, a Peer-to-Peer conversation is allowed, but the case decision cannot be changed. When this happens, you can still request a Consultative Only Peer-to-Peer. You may also click on the All Post Decision Options button to learn what other action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



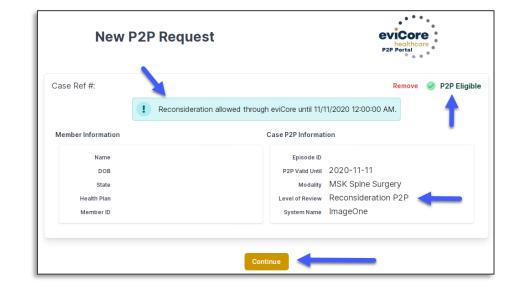
 Once the Request Peer-to-Peer Consultation link is selected, you will be transferred to our scheduling software via a new browser window.



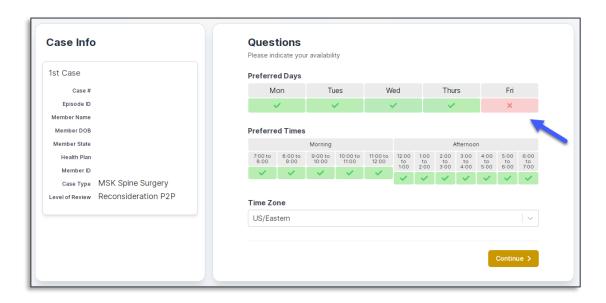


- Upon first login, you will be asked to confirm your default time zone.
- You will be presented with the case number and member date of birth (DOB) for the case you just looked up.
- You can add another case for the same Peer-to-Peer appointment request by selecting Add Another Case.
- To proceed, select 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.

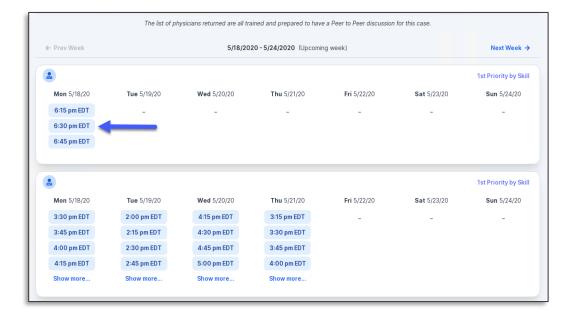






You will be prompted to identify your preferred days and times for a Peer-to-Peer conversation. All opportunities will automatically present. Click on any green check mark to deselect the option and then click **Continue**.

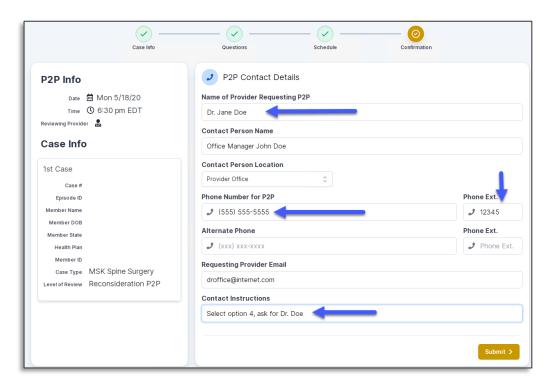
You will be prompted with a list of EviCore
physicians/reviewers and appointment options per
your availability. Select any of the listed
appointment times to continue.





#### **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.

