Medical Specialty Drug
Frequently Asked Questions

Who is Evicore by Evernorth ?

Evicore by Evernorth (EviCore) is an independent specialty medical benefits management company that provides utilization management services for 1199.

Which members will Evicore by Evernorth manage for the Medical Specialty Drug program?

EviCore will manage prior authorization for 1199 members who are eligible for the following programs:

Medical Specialty Drug Management

What is Evicore by Evernorth 's Medical Specialty Drug program?

The main component of the Medical Specialty Drug Program is prior authorization for high cost injectable drugs that providers may buy and bill under the medical benefit and used in a variety of NON-cancer diagnoses. Drugs used for cancer diagnosis are requested through the Medical Oncology program. The program also includes coding accuracy and medical necessity review.

Our solution is designed around each client's individual needs. This is accomplished by utilizing our unique clinical expertise with a staff of 300+ medical directors covering 51 different specialties and 800 licensed nurses with advanced training in various specialties. Additionally, we employ industry-leading clinical guidelines, including pediatric-specific imaging guidelines that incorporate all applicable criteria from medical specialty societies.

Which Medical Specialty Drug services require prior authorization?

Go to https://www.EviCore.com/resources Find the 1199SEIU Health Plan > Select solution resources> Select the correct solution> Select CPT Codes.

Which Medical Specialty Drug Covered Services are in this program? Non-Oncology Medical Drugs *Included but not limited to:

+ Immuno-modulators
+ Ophthalmic Disorders
+ Osteoporosis
+ Immune Deficiency
+ Gene Therapy* *(Embarc Program only)*
+ Osteoarthritis
+ Spasticity Disorder
+ Hemophilia* *(new Prior Auth Requirement)*

Who needs to request prior authorization through EviCore?

All physicians who request/order Specialty Drug services are required to obtain a prior authorization for services prior to the service being rendered in an office or outpatient setting.

How do I request a prior authorization through Evicore by Evernorth ?

Providers and/or staff can request prior authorization in one of the following ways:

Web Portal

The EviCore portal is the quickest, most efficient way to request prior authorization and is available 24/7. Providers can request authorization by visiting www.EviCore.com

Call Center

EviCore's call center is open from 7 a.m. to 7 p.m. local time. Providers and/or staff can request prior authorization and make revisions to existing cases by calling 888.910.1199.

Fax

Providers and/or staff can fax prior authorization requests by completing the clinical worksheets found on EviCore's website at www.EviCore.com/provider/online-forms

Continuity of Care

If an authorization for treatment starting before March 1, 2025, was issued through the Care Continuum Medical Drug Benefit Management Program (MDBM), will a new EviCore authorization be needed?

- + 1199 will honor all Medical Drug Authorizations approved as of EviCore's management, effective March 1, 2025.
- + Authorizations issued under the MDBM Program will be valid through the original expiration date.

- + Authorizations previously submitted through the MDBM Program should not be resubmitted through EviCore.
- + After March 1, 2025, there can be no modifications to authorizations issued prior to March 1, 2025

- + If needed, please call 888.910.1199 to determine if an authorization for the services underway is already on file.

Do Medical Specialty Drug services performed in an inpatient setting at a hospital or emergency room setting require prior authorization?

Although Medical Specialty Drugs administered in an emergency room, while in an observation unit, or during an inpatient stay generally do not require prior authorization, therapies, such as gene therapy that require inpatient stay do require prior authorization.

How do I check an existing prior authorization request for a member? Our web portal provides 24/7 access to check the status of existing authorizations. To check the status of your authorization request, please visit www.EviCore.com and sign in with your login credentials.

What information is required when requesting prior authorization?

When requesting prior authorization, please ensure the proprietary information is readily available:
Member

- First and Last Name
- Date of Birth
- Member ID

Ordering Provider
- First and Last Name
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Number

Rendering (Performing) Provider
- Facility Name
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Street Address

Clinical(s)
- Requested Procedure Code (CPT Code)
- Signs and symptoms
- Imaging/X-ray reports
- Results of relevant test(s)
- Working diagnosis
- Patient history, including previous therapy
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Note: EviCore suggests utilizing the clinical worksheets when requesting authorization for Medical Specialty Drug services.

How long is the authorization valid?

Authorizations are valid for 30-365 calendar days. If the service is not performed within 30-365 calendar days from the issuance of the authorization, please contact Evicore by Evernorth

What is the most effective way to get authorization for urgent requests?

Urgent requests are defined as a condition that is a risk to the patient's health, ability to regain maximum function and/or the patient is experiencing severe pain that require a medically urgent procedure. Urgent requests may be initiated on our web portal at EviCore.com or by contacting our contact center at 888.910.1199. Urgent requests will be processed within 24 hours from the receipt of complete clinical information.

Note: Please select urgent for those cases that truly are urgent and not simply for a "quicker" review. Also note that if a request is selected as urgent but does not meet guidelines to be considered urgent, the case may be reassigned as a routine case.

How do I check the eligibility and benefits of a member?

Member eligibility and benefits should be verified on the plan's provider portal at www. NaviNet.com or by calling 1-888-819-1199 before requesting prior authorization through EviCore.

Where can I access Evicore by Evernorth 's clinical worksheets and guidelines?

EviCore's clinical worksheets and guidelines are available online 24/7 and can be found by visiting one of the following links:

Clinical Guidelines
www.EviCore.com/provider/clinical-guidelines

After I submit my request when and how will I receive the determination?

After all clinical info is received, for normal (non- urgent) requests a decision is made within 2-3 business days. For urgent requests, a decision is made within 24 hours for Commercial Members. The provider will be notified by fax.

What are my options if I receive and adverse determination?

The referring and rendering provider will receive a denial letter that contains the reason for denial as well as reconsideration and appeal rights process.

Appeals

EviCore will process first-level pre-service appeals for outpatient and inpatient services only. Appeal requests can be submitted in writing via a Clinical Consultation with an EviCore physician. A written notice of the appeal decision will be mailed to the customer and faxed to the ordering provider.

Note: The referring provider may request a Clinical Consultation within two (2) business days with an EviCore Medical Director to review the decision.

Does EviCore review cases retrospectively if no authorization was obtained?

Retrospective requests must be initiated by phone within 180 Calendar Days following the date of service. Please have all clinical information relevant to your request available when you contact Evicore by Evernorth .

How do I make a revision to an authorization that has been performed? How do I make a revision to authorization that has not been performed?

The requesting provider or member should contact EviCore with any change to the authorization, whether the procedure has already been performed or not. It is very important to update Evicore by Evernorth of any changes to the authorization in order for claims to be correctly processed for the facility that receives the member.

What information about the prior authorization will be visible on the Evicore by Evernorth website?

The authorization status function on the website will provide the following information:
- Prior Authorization Number/Case Number
- Status of Request
- Site Name and Location
- Prior Authorization Date
- Expiration Date

Where do I submit my claims?

All claims will continue to be filed directly to 1199.
When submitting claims, please include the correct NDC numbers, and where applicable, submit the correct HCPCS code that represent the manufacturer of the drug as authorized.

Where do I submit questions or concerns regarding this program?

For program related questions or concerns, please email: clientservices@EviCore.com

Common Items to Send to Client Services:

- Questions regarding Accuracy Assessment, Accreditation, and/or Credentialing
- Requests for an authorization to be resent to the health plan
- Consumer Engagement Inquiries
- Complaints and Grievances
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues

Who do I contact for online support/questions?

Web portal inquiries can be emailed to portal.support@EviCore.com or call 800-646-0418 (Option 2).

What are the benefits of using Evicore by Evernorth 's Web Portal?

Our web portal provides 24/7 access to submit or check on the status of your request. The portal also offers additional benefits for your convenience:

- **Speed** – Requests submitted online require half the time (or less) than those taken telephonically. They can often be processed immediately.
- **Efficiency** – Medical documentation can be attached to the case upon initial submission, reducing follow-up calls and consultation.
- **Real-Time Access** – Web users are able to see real-time status of a request.
- **Member History** – Web users are able to see both existing and previous requests for a member

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Where can I find additional educational materials?

For more information and reference documents, please visit our resource page at
https://www.EviCore.com/resources/healthplan/1199seiu