

## RADIOLOGY AND CARDIOLOGY

*Migration from the MedSolutions portal to the eviCore (CareCorenational) portal for prior authorizations*

Provider Orientation Session for:  
Blue Cross and Blue Shield (BCBSRI)

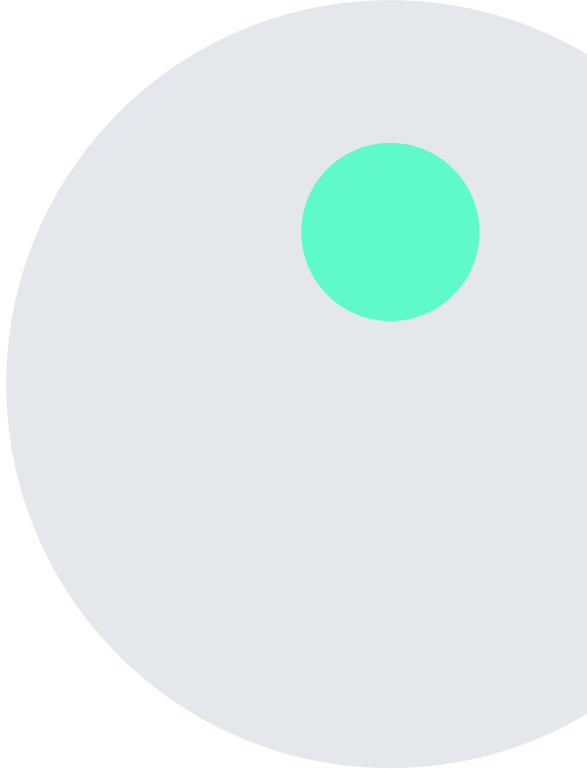
# From MedSolutions to CareCorenational

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Effective February 1, 2024, Blue Cross/Blue Shield of Rhode Island (BCBSRI) prior authorization requests for radiology and cardiology procedures will be initiated through eviCore healthcare (CareCorenational portal) for dates of service February 1, 2024 and beyond, as outlined below.

Services performed without authorization may be denied for payment, and you may not seek reimbursement from members.

BCBSRI Prior Authorization Case Initiation Methods	
Web Portal:	<a href="https://bcbsri.com">bcbsri.com</a>
Phone:	888-233-8158
Fax:	800-540-2406



# +Applicable Memberships

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Prior Authorization is required for BCBSRI members who are enrolled in the following lines of business/programs:

- **Medicare Advance/Medicare Advantage**
- **Commercial**

+

# +Radiology Prior Authorization Services

+eviCore healthcare will begin accepting prior authorization requests for **Radiology** services on 2/1/2024 for dates of service 2/1/2024

### Prior Authorization applies to the following services:

- Cat Scan
- Magnetic Imaging
- Pet Scan
- NCM

### Prior Authorization does NOT apply to services that are preformed during:

- Emergency Room Services
- 23 Hour Observations
- Inpatient Stays

### Provider Resource Page:

Providers and/or staff can utilize the page to access a list of covered CPT codes, FAQs, and additional educational materials by visiting:

[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)

# +Cardiology Prior Authorization Services

+eviCore healthcare will begin accepting prior authorization requests for **Cardiology** on February 1, 2024 for for dates of service 2/1/2024

### Prior Authorization applies to the following services:

- Cardiac MR
- Cardiac CT
- Cardiac Pet Scan
- Nuclear Stress
- Echo
- Stress Echo
- Diagnostic Heart Catheter

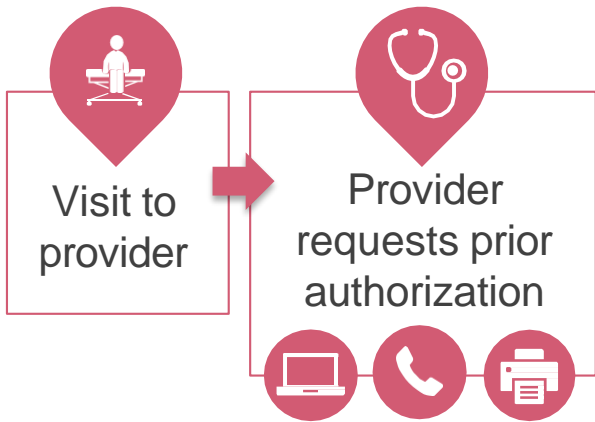
### Prior Authorization does NOT apply to services that are preformed during:

- Emergency Room Services
- 23 Hour Observations
- Inpatient Stays

### Provider Resource Page:

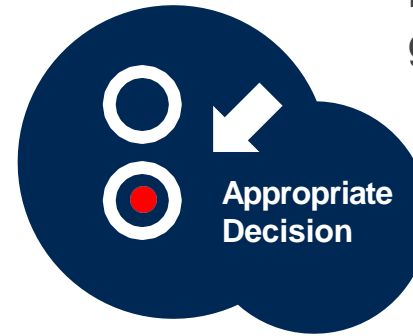
Providers and/or staff can utilize the page to access a list of covered CPT codes, FAQs, and additional educational materials by visiting:

[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)



Based on evidence-based guidelines, request is **Approved**.

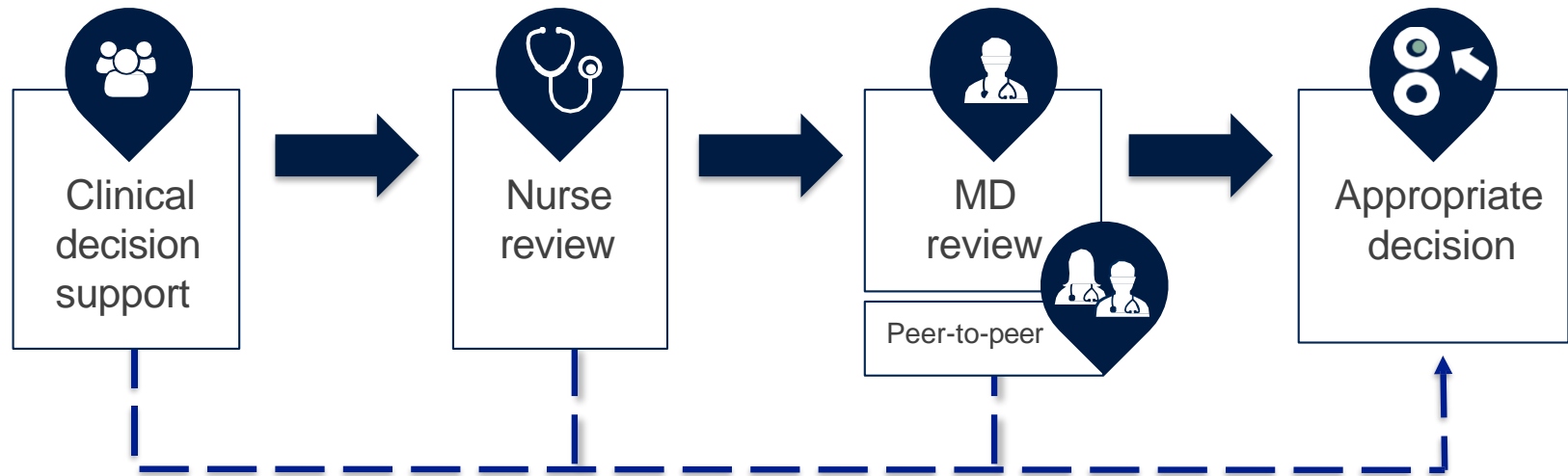
An **Approval Letter** will be issued with authorization information to the provider (written), site (written) and member (written and verbal).



Based on evidence-based guidelines, request is **Denied**.

A denial letter with clinical rationale for the decision and appeal rights will be issued to the provider (written and verbal) and member (written and verbal), site (written)

Easy for Providers and staff



# +Non-Clinical Information Needed

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

## +Member Information

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

## +Ordering Physician Information

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

- Phone and Fax Numbers

## +Rendering Facility Information

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



# +Prior Authorization Outcomes

## Approvals and Denials

### +Approved Requests

- All requests are processed in within 14 calendar days for Medicare and 2 business days for commercial after receipt of all necessary clinical information. Urgent requests have a 72 hour turn around time.
- Authorizations are typically valid for 180 days from the date of the final determination.

### +Denied Requests

- Communication of the denial determination and rationale.
- Letter contains reconsideration options based on the members health plan and line of business.
- Instructions on how to request a Clinical

### +Authorization Letter

- The letter will be faxed or emailed to the ordering physician and performing facility.
- The member will receive notification verbally and in writing.
- Approval information can be printed on demand from the eviCore portal.

### +Denial Letter

- The letter will be faxed or emailed to the ordering site: the physician will receive written and verbal notification.
- The member will receive both written and verbal notification.
- The letter will contain the denial rationale and reconsideration options and instructions.

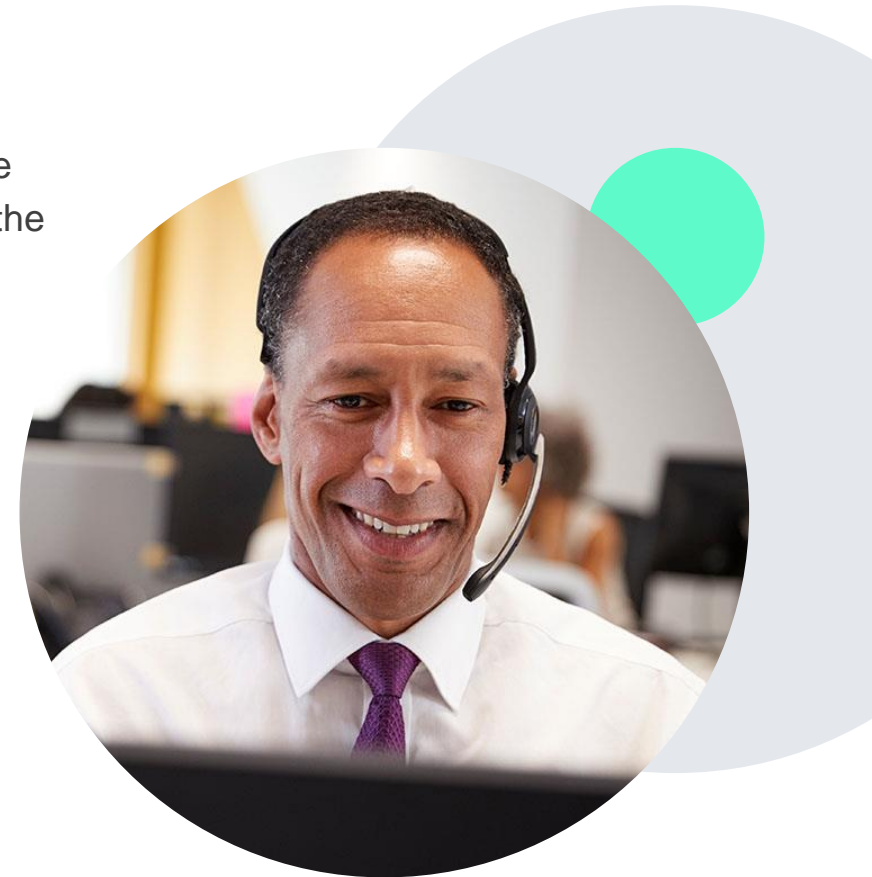




# Post- Service Options: Commercial Members

## My case has been denied. What's next?

- + eviCore will process first level appeals for Commercial Members. All clinical information and the prior authorization request will be reviewed by a physician other than the physician who made the initial determination
- A written notice of the appeal decision will be mailed to the member and faxed/emailed to the ordering provider
- Peer to Peer clinical considerations are allowed at any time.
- eviCore is delegated 1<sup>st</sup> level appeals



# Pre-Decision Options: Medicare Members

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

## Submission of Additional Clinical

- eviCore will notify Providers telephonically and in writing before a denial decision is issued on Medicare cases
- You may submit additional clinical to eviCore for consideration per the instructions received
- Additional clinical must be submitted to eviCore in advance of the due date referenced

## Pre-Decision Clinical Consultation

- Providers may choose to request a Pre-Decision Clinical Consultation instead of submitting additional clinical information
- + The Pre-Decision Clinical Consultation must occur before the due date referenced
- + If additional information was submitted, we will proceed with our determination and are not obligated to hold the case for a Pre-Decision Clinical Consultation, even if the due date has not yet lapsed



# Post-Decision Options: Medicare Members

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## My case has been denied. What next?

### Clinical Consultation

- + Providers may request a Clinical Consultation with an eviCore physician to 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 have a Reconsideration option

### Appeals

- + Submit to BCBSRI Grievance and Appeals Unit
- + By Mail: 500 Exchange St. Providence, RI 020903
- + BY e-mail: GAU Complaints [Appeals@bcbsri.org](mailto:Appeals@bcbsri.org)
- + By fax: 401-459-5668



**EviCore**

By EVERNORTH

# Special Circumstances

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## +Retrospective (Retro) Authorization Requests

- Retrospective authorization requests are reviewed for clinical urgency and medical necessity. eviCore has 30 calendar days for commercial and 14 calendar days for Medicare to provide a final determination for retrospective authorization requests. Retrospective requests that are submitted beyond the timeframe will be administratively denied.

## +Urgent Prior Authorization Requests

- Urgent requests can now be submitted on eviCore's website using [bcbsri.com](https://bcbsri.com), following the request procedure will bring you to the eviCore portal. When asked "Is this request standard/routine?" simply answer no and the case will be sent to the urgent work list. Or you can call 888-233-8158 and advise the case is urgent.
- Providers and/or staff can also contact our office by phone and state that the prior authorization request is Urgent. Urgent request will be reviewed within 72 hours upon receiving the prior authorization request.



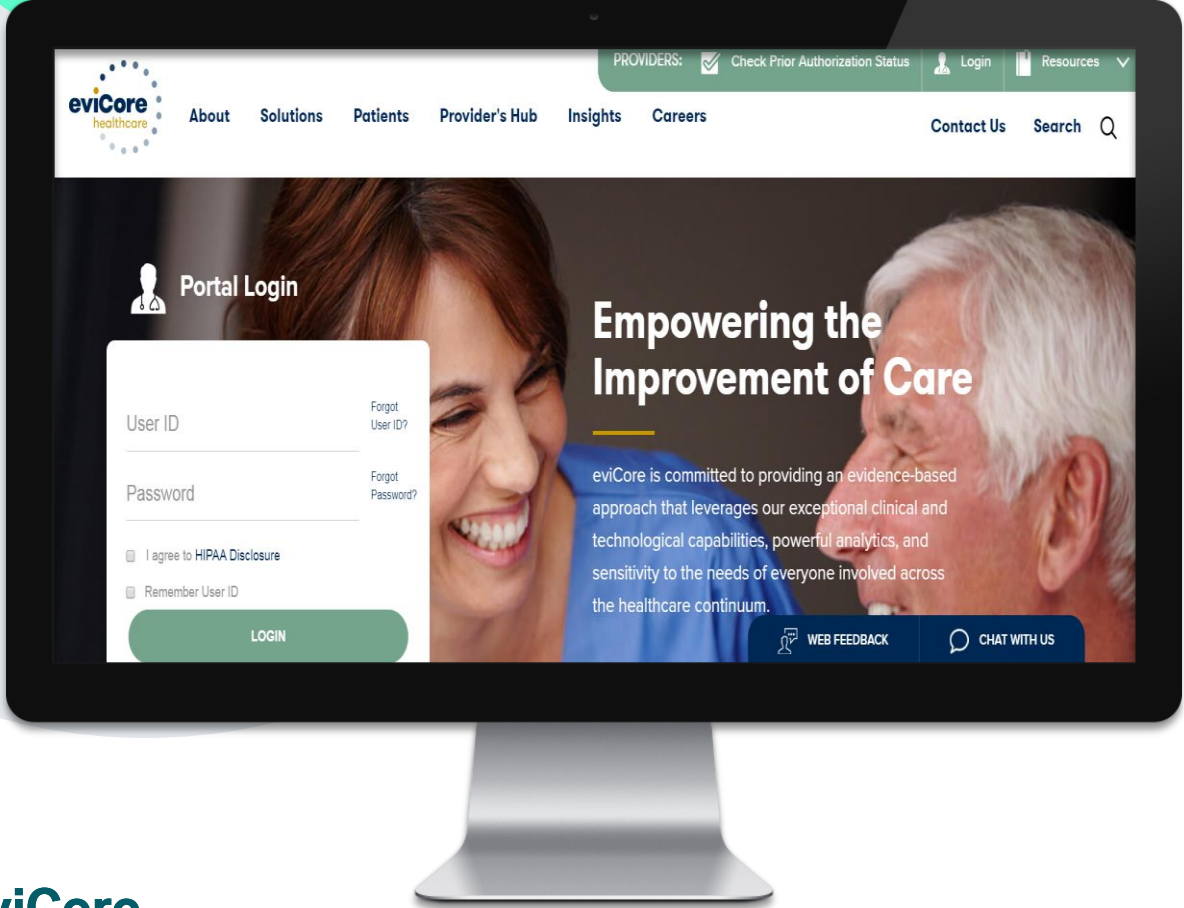
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# Provider Portal Overview

Submitting Online Prior Authorization Requests

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# +eviCore Provider Portal



The eviCore online portal is the quickest, most efficient way to obtain resource information and to check prior authorization. It is available 24/7. You must register for a User ID and Password. To request a prior authorization you access your account at [bcbsri.com](http://bcbsri.com) which will link you to the eviCore portal to start the request.

Or by phone:

**Phone Number:**  
**888-233-8158**  
7:00 a.m. to 7:00p.m.  
Monday –Friday

By fax: 800-540-2406

[Claims & Billing](#)

[Preauthorization](#)

[Patient Eligibility](#)

[Cost Estimator](#)

[Tools & Resources](#)

[Referrals](#)

[Quality](#)

[HIPAA](#)

[Update Web Account](#)

[Secure Messaging](#)

[Contact Us](#)

[FAQs](#)

# Preauthorization Requests Need Help?

Is this a Prospect member? Not sure? Enter member information here to check.

Member ID   
Member DOB   
[SUBMIT](#)

To create a new request, select a request type below.

## Guides

Click on the corresponding guide to learn more on specific authorizations.

- [Home Health Authorizations through MHK Provider Portal](#)
- [Inpatient Authorizations through MHK Provider Portal](#)
- [Service Authorizations through MHK Provider Portal](#)
- [Behavioral Health Inpatient Authorizations](#)
- [Behavioral Health Outpatient Authorizations](#)

## BCBSRI Requests

### MHK

- [Inpatient authorizations \(elective, emergency and maternity\)](#)
- [Long-Term Acute Care & Acute Rehabilitation](#)
- [Genetic Testing](#)
- [Durable Medical Equipment](#)
- [Procedures](#)
- [Medical drugs \(for Medicare Advantage and HOST membership\)](#)
- [Behavioral Health Inpatient and Outpatient services](#)
- [Infertility services for Commercial, self-insured groups, FEP, and Medicare](#)
- [Spinal surgeries for Commercial members](#)

### eviCore

- [Cardiology](#)
- [High-tech Radiology](#)
- [Spinal surgeries for Medicare Advantage members](#)

### Prime(Cover my Meds)

- [Medications](#)
- [Medical drugs for Medicare and Commercial members](#)

### WinFertility IVF Services

- [Infertility services for Commercial, fully-insured members](#)

### NEHP Cross Border Request

# +Welcome Screen

The screenshot shows the CareCore National Web Portal. At the top left is the logo for eviCore healthcare, with the tagline 'innovative solutions'. Below the logo is a navigation bar with ten items: Home (highlighted in yellow), Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Perf. Summary Portal, Resources, Manage Your Account, and Help / Contact Us. Below the navigation bar, the date and time 'Tuesday, January 21, 2020 9:41 AM' are displayed. The main content area features a welcome message: 'Welcome to the CareCore National Web Portal. You are logged in as AMYINTG.' Below this message are five blue buttons with white text: 'REQUEST AN AUTH', 'RESUME IN-PROGRESS REQUEST', 'SUMMARY OF AUTH', 'AUTH LOOKUP', and 'MEMBER ELIGIBILITY'. At the bottom left, there is a copyright notice: '© CareCore National, LLC. 2020 All rights reserved.' followed by links for 'Privacy Policy', 'Terms of Use', and 'Contact Us'.

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



# +NPI- Global Look-up Feature

eviCore healthcare

Home Authorization Lookup MedSolutions Portal CareCore National Portal Unified Worklist Help / Contact Us

Wednesday, December 20, 2023 12:06 PM [Log Off \(PCHODANKAR\)](#)

### Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH CLEAR SEARCH

	Provider
SELECT	1588621692 - ABATE, NICOLA
SELECT	1740262013 - ABAYA, BERNARDINO
SELECT	1750314217 - ABBARA, MAHER
SELECT	1659374890 - HOLZ, ALAN
SELECT	1639198880 - PEREIRA-RICO, ALVARO
SELECT	1013044304 - SPECIAL PEOPLE IN NORTHEAST, INC.

If the requested NPI is not listed above, search for it below.  
Please note, you will also be given the option to add this NPI to your account for future requests.

Search By NPI:

SEARCH

BACK CONTINUE

[Click here for help](#)

Feedback

- Provider can search for existing NPI in highlighted green box. If Provider wants to search for any NPI which is not added in their Managed List, they can use red highlighted box. As shown to the left

# +Initiating A Case

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The screenshot shows a navigation bar with the following items: Home, Certification Summary, Authorization Lookup, Eligibility Lookup, Clinical Certification (highlighted in yellow), Certification Requests In Progress, MSM Practitioner Perf. Summary Portal, Resources, and Manage Your Account. A red arrow points to the 'Clinical Certification' item. Below the navigation bar, the page title is 'Request an Authorization'. The text below the title reads: 'To begin, please select a program below:'. A list of radio button options is provided: Durable Medical Equipment(DME), Gastroenterology, Lab Management Program, Medical Oncology Pathways, Musculoskeletal Management, Radiation Therapy Management Program (RTMP), Radiology and Cardiology (circled in light blue), Sleep Management, and Specialty Drugs. A 'CONTINUE' button is located at the bottom left of the form area.

- + Choose **Clinical Certification** to begin a new request
- + Select the appropriate program
- + Select “Requesting Provider Information”

# +Select Health Plan

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**Choose Your Insurer**

Requesting Provider: DR. MICHEL, M.D. (60627948)

Please select the insurer for this authorization request.

Please Select a Health Plan ▼

**BACK** **CONTINUE**

[Click here for help](#)

**Urgent Request?** You will be required to upload relevant clinical info at the end of this process. [Learn More](#).

**Don't see the insurer you're looking for?** Please call the number on the back of the member's card to determine if an authorization through eviCore is required.

- + Choose BCBSRI for the request
- + Once the plan is chosen, select the provider address in the next drop-down box
- + Select **CONTINUE** and on the next screen **Add your contact info**
- + Provider name, fax and phone will pre-populate, you can change as necessary

# Add Your Contact Information

---

Provider's Name:\*  [?]

Who to Contact:\*  [?]

Fax:\*  [?]

Phone:\*  [?]

Ext.:  [?]

Cell Phone:

Email:

Receive notification of case status changes

+

BACK

CONTINUE

[Click here for help](#)

If the email address is provided, you will receive e-notifications

**EviCore**

By EVERNORTH

## Member & Request Information

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### Eligibility

#### Patient Eligibility Lookup

Patient ID:\*

Date Of Birth:\*

MM/DD/YYYY

Patient Last Name Only:\*

[?]

**ELIGIBILITY LOOKUP**

**BACK**

# +Eligibility Lookup

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
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Monday, June 13, 2022 9:10 AM

## Patient Eligibility Lookup

Patient ID:\*

Date Of Birth:\*  MM/DD/YYYY

Patient Last Name Only:\*  [?]

Do not include prefix. Enter numeric digits only.

**LOOKUP AGAIN**

### Search Results


	Patient ID	Member Code	Name	DOB	Gender	Address
<b>SELECT</b>						

**BACK**

[Click here for help](#)

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 40% Complete

**Provider and NPI**

**EviCore**

By EVERNORTH

# +Clinical Details

## Requested Service + Diagnosis

This procedure has not been performed.

**CHANGE**

### Radiology Procedures

Select a Primary Procedure by CPT Code[?] or Description[?]

73721 MRI LOWER EXTREMITY JOINT W/O

Don't see your procedure code or type of service? [Click here](#)

### Diagnosis

Select a Primary Diagnosis Code (Lookup by Code or Description)

**LOOKUP**

Trouble selecting diagnosis code? Please follow [these steps](#)

Select a Secondary Diagnosis Code (Lookup by Code or Description)

*Secondary diagnosis is optional for Radiology*

**LOOKUP**

+ Enter CPT and Diagnosis code

**EviCore**

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# Site Selection



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal
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Thursday, January 30, 2020 2:21 PM

[Log Off \(JENNIFERMASO\)](#)

## Add Site of Service

**Specific Site Search**  
Use the fields below to search for specific sites. For best results, search by NPI or TIN. Other search options are by name plus zip or name plus city. You may search a partial site name by entering some portion of the name and we will provide you the site names that most closely match your entry.

NPI:  Zip Code:

TIN:  City:

Site Name:

Exact match  
 Starts with

**LOOKUP SITE**

There are no sites associated with referer.

**BACK**

[Click here for help](#)

**Search and select the specific site where the treatment will be performed.**





# +Clinical Certification

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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 make any changes needed
- You will not have the opportunity to make changes after this point

# +Standard or Urgent Request?

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

### Proceed to Clinical Information

Is this case Routine/Standard?

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Summary F
------	-----------------------	----------------------	--------------------	------------------------	------------------------------------	----------------------------

Thursday, May 14, 2020 3:04 PM

### Proceed to Clinical Information

**Urgency Indicator**  
If the case you are submitting is found NOT to meet one of the two conditions below, your case will be processed as a standards/routine, non Urgent request. If you have clinical information and this request meets the criteria for urgent, please indicate below.  
In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case. If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Please indicate if any of the following criteria are true regarding urgency of this request :

- A delay in care could seriously jeopardize the life or health of the patient or patient's ability to regain maximum function.
- A delay in care would subject the member to severe pain that cannot be adequately managed without the care or treatment requested in the prior authorization.
- None of the above

**Clinical Upload**  
In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case.  
If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Browse for file to upload (max size 5MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

No file chosen

No file chosen

No file chosen

No file chosen

No file chosen

# Clinical Upload



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal
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Thursday, January 30, 2020 2:47 PM

## Proceed to Clinical Information

**Clinical Upload**

Please upload any additional clinical information that justifies the medical necessity of this request.

Browse for file to upload (max size 5MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

No file chosen

No file chosen

No file chosen

No file chosen

No file chosen

**Providing clinical information via the web is the quickest, most efficient method.**



# +Clinical Certification Statement

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Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal
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Thursday, January 30, 2020 2:48 PM

## Proceed to Clinical Information

I acknowledge that the clinical information submitted to support this authorization request is accurate and specific to this member, and that all information has been provided. I have no further information to provide at this time.

**SUBMIT CASE**

[Click here for help](#)

**Acknowledge the Clinical Certification statements, and hit “Submit Case.”**

# Approval

## Clinical Certification

Your case has been Approved.

Provider Name:  
Provider Address:

Contact:  
Phone Number:  
Fax Number:

Patient Name:  
Insurance Carrier:

Patient ID:

Site Name:

Site ID:

Site Address:

Primary Diagnosis Code:	M25.562	Description:	Pain in left knee
Secondary Diagnosis Code:		Description:	
Date of Service:	Not provided		
CPT Code:	73721	Description:	MRI LOWER EXTREMITY JOINT W/O

Authorization Number:

Review Date: 2:12:39 PM

Expiration Date:

Status: Your case has been Approved.

Print Continue

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, an **approval** will be issued.

Print the screen and store in the patient's file.

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# Additional Provider Portal Features

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# Duplication Feature

**Success**

Thank you for submitting a request for clinical certification. Would you like to:

- [Return to the main menu](#)
- [Start a new request](#)
- [Resume an in-progress request](#)

You can also start a new request using some of the same information.

Start a new request using the same:

- Program (Radiation Therapy Management Program)
- Provider (XXXXXXXXXX)
- Program and Provider (Radiation Therapy Management Program and XXXXXXXXXXXX)
- Program and Health Plan (Radiation Therapy Management Program and CIGNA)

**GO**

- Duplicate feature allows you to start a new request using same information
- Eliminates entering duplicate information
- Time saver!

# Patient Eligibility Lookup

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Patient ID:\*

Date Of Birth:\*  MM/DD/YYYY

Patient Last Name Only:\*  [?]

**ELIGIBILITY LOOKUP**

**BACK**

[Click here for help](#)



# Authorization look up

eviCore healthcare

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

Tuesday, November 22, 2016 2:30 PM

## Authorization Lookup

**New Security Features Implemented**

**Search by Member Information**

REQUIRED FIELDS

Healthplan:

Provider NPI:

Patient ID:

Patient Date of Birth:   
MM/DD/YYYY

OPTIONAL FIELDS

Case Number:

or

Authorization Number:

**Search by Authorization Number/ NPI**

REQUIRED FIELDS

Provider NPI:

Auth/Case Number:

- You can also search for an authorization by **Member Information**, and enter the health plan, Provider NPI, patient's ID number, and patient's date of birth.

- Select Search by **Authorization Number/NPI**. Enter the provider's NPI and authorization or case number. Select **Search**.

# +How to schedule a Peer to Peer Request


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- Log into your account at [www.evicore.com](http://www.evicore.com)
- Perform Authorization Lookup to determine the status of your request.

+

- Click on the “P2P Availability” button to determine if **Authorization Lookup** tion:

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



- If your case is eligible for a Peer to Peer conversation, a link will display allowing you to proceed to scheduling without any additional messaging.




# +How to schedule a Peer to Peer Request

- Log into your account at [www.evicore.com](http://www.evicore.com)
- Perform Authorization Lookup to determine the status of your request.

+

- Click on the “P2P Availability” button to determine if **Authorization Lookup** tion:

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



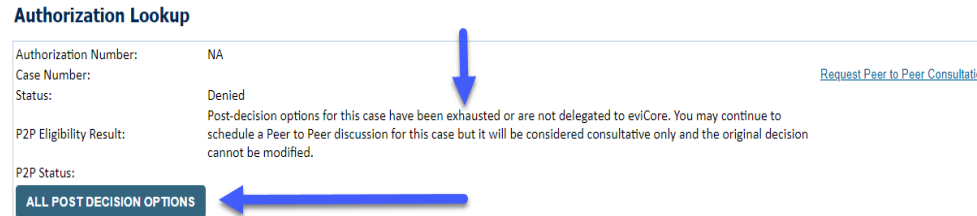
- If your case is eligible for a Peer to Peer conversation, a link will display allowing you to proceed to scheduling without any additional messaging.



# +How to schedule a Peer to Peer Request

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



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



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# +How to Schedule a Peer to Peer Request

Case Info Questions Schedule Confirmation

### New P2P Request

eviCore healthcare P2P Portal

Case Reference Number Case information will auto-populate from prior lookup

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”

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+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 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 3:45 pm EDT 4:00 pm EDT 4:15 pm EDT Show more...	2:00 pm EDT 2:15 pm EDT 2:30 pm EDT 2:45 pm EDT Show more...	4:15 pm EDT 4:30 pm EDT 4:45 pm EDT 5:00 pm EDT Show more...	3:15 pm EDT 4:30 pm EDT 3:45 pm EDT 4:00 pm EDT Show more...	-	-	-

+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.

# +How to Schedule a Peer to Peer

## +Confirm Contact Details

- Contact Person Name and Email Address will auto-populate per

+

- 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 d appointment.

# +Canceling or Rescheduling a Peer to Peer Appointment

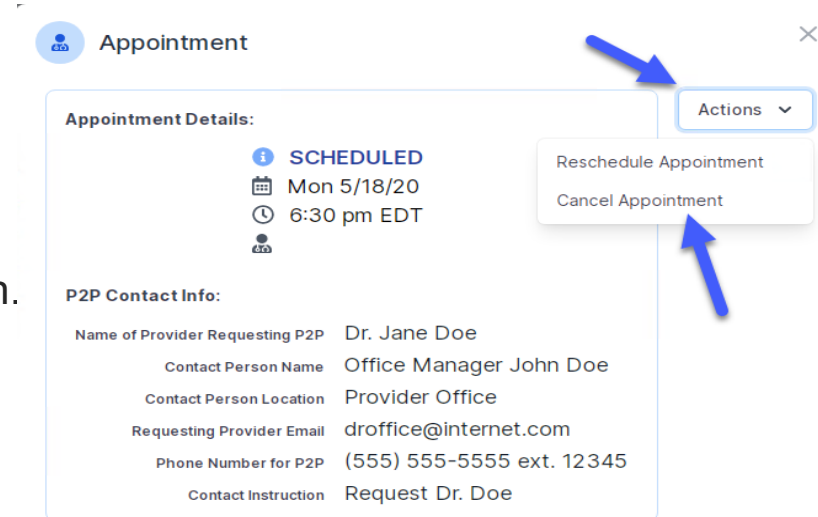
+To cancel or reschedule an appointment

- 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 input a cancellation reason.

- Close browser once done





# +Provider Newsletter

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## Stay Updated With Our Free Provider Newsletter

+eviCore's provider newsletter is sent out to the provider community with important updates and tips. If you are interested in staying current, feel free to subscribe:

- Go to [eviCore.com](https://www.eviCore.com)
- Scroll down and add a valid email to subscribe
- You will begin receiving email provider newsletters with updates



# +Provider Resource Review Forums

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 Prior Authorization Online Portal Tips and Tools** session, to navigate [www.eviCore.com](http://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
- Check-status function of existing prior authorization
- Search for contact information
- Podcasts & Insights
- **How to register for a Provider Resource Review Forum?**

You can find a list of scheduled **Provider Prior Authorization Online Portal Tips and Tools** session on [www.eviCore.com](http://www.eviCore.com) → Provider's Hub → Scroll down to eviCore Provider Orientation Session Registrations → Upcoming



## +For Eligibility and Benefits:

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+For benefits and eligibility questions, please contact the Physician & Provider Service Center at BCBSRI: 401-274-4848 or 1-800-230-9050 for out-of-state callers or visit [bcbsri.com](https://bcbsri.com) on the Provider Portal

# +Provider Resources

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**Portal Support Team - If you should encounter an issue when initiating a request on the website you may contact the eviCore Portal Support Team for assistance.**

**Contact Info: Phone: 800-646-0418 Option 2; Email: [portal.support@evicore.com](mailto:portal.support@evicore.com)**

**Client & Provider Services Team - Client & Provider Services is an escalation team consisting of specially trained agents that are responsible for BCBSRI inquiries. They are an eviCore first line resource available to research and resolve concerns that may occur.**

**Contact Info: Phone: 800-646-0418 Option 4; Email: [clientservices@evicore.com](mailto:clientservices@evicore.com)**

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**Patricia Allen, Regional Provider Engagement Manager- [pallen@evicore.com](mailto:pallen@evicore.com) 800-918- 8924 ex.24176**

**BCBSRI Resource Page – The resource page contains educational materials, such as a list of designated CPT Codes, Frequently Asked Questions, Announcement Letter with training schedule and a copy of this presentation.**

**[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)**

# +Resource Links

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- Worksheets: <https://www.evicore.com/provider/online-forms>
- Clinical Guidelines: <https://www.evicore.com/provider/clinical-guidelines>
- Request a Clinical Consultation: <https://www.evicore.com>

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# Thank you

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