EviCore Portal Migration-Illinois

Aetna Better Health

- Medicaid
- Duals-Medicare primary
 and Medicaid secondary





Agenda



- What is Changing: Migration to CareCore National Portal
- CareCore National Portal Overview
- CareCore National Portal Features
- Provider Resources
- Questions
- Appendix





What is Changing: Platform Migration





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Platform Migration: Effective 6/1/2025

- EviCore currently accepts prior authorization requests for Aetna Better Health members through the MedSolutions portal. Beginning 6/1/2025, these requests should be entered through the CareCore National portal at EviCore.com.
- If a provider has an existing login, the <u>same</u> credentials are used for both portals and a new account does <u>not</u> need to be created.
- Any authorizations requested prior to 6/1/2025 can still be viewed on the MedSolutions portal, but as of 6/1/2025, all new requests must be created on the CareCore National portal, as shown below.





Welcome Screen | MedSolutions

EviCore By EVERNORTH)				
Announcements	Home	Search/Start Case	CareCore National Portal	Post Acute Care	
Announcements					

- If your login takes you to the MedSolutions Portal, you can click the CareCore National Portal button (as seen above) to seamlessly toggle back and forth between the two portals.
- Many health plan programs are migrating from the MedSolutions Portal to the CareCore National portal.





Welcome Screen | CareCore National



- You can access the MedSolutions Portal at any time.
- Click the MedSolutions Portal on the banner to seamlessly toggle back and forth between the two portals.
- Any authorizations requested prior to 6/1/2025 can still be viewed on the MedSolutions portal.



EviCore

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EviCore Provider Portal | Add Providers

Hom	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
								\sim		

Providers will need to be added to your account prior to case submission.

- Click the Manage Your Account tab to add provider information.
- Select Add Provider.

FviCore

By EVERNORTH

- Enter the NPI, state, and zip code to search for the provider.
- Select the matching record based upon your search criteria.
- Once you have selected a practitioner, your registration will be complete.
- You can also click Add Another Practitioner to add another provider to your account.

♥aetna™

• You can access the Manage Your Account at any time to make any necessary updates or changes.

manage rour	Account	
Office Name:		
Address:		
Primary Contact:		
Email Address:		
Click Column Hooding	es to Sort	
Click Column Heading		
No providers on file		
No providers on file		
No providers on file CANCEL		
No providers on file CANCEL Add Practition	er	
No providers on file CANCEL Add Practition Enter Practitioner infor *If registering as rende	er rmation and find matches. ering genetic testing Lab site,	enter Lab Billing NPI, State and Zi
No providers on file CANCEL Add Practitioner Enter Practitioner infor *If registering as rende Practitioner NPI	er rmation and find matches. ering genetic testing Lab site,	enter Lab Billing NPI, State and Zi
No providers on file CANCEL Add Practition Enter Practitioner infor *If registering as rende Practitioner NPI Practitioner State	er rmation and find matches. ering genetic testing Lab site,	enter Lab Billing NPI, State and Zi

Initiating a Case

Summary Lookup Certification In Progress Perf. Summary Portal Your Account Portal Contact U



- Click the **Clinical Certification** tab to get started.
- Choose **Request an Auth** to begin a new case request.





Select Program

HomeCertification SummaryAuthorization LookupEligibility CertificationCertification Requests In ProgressMSM Practitioner Perf. Summary PortalManage Your AccountMedSolutions PortalHel Centification	Home	Certification Authorization Summary Lookup	Eligibility Clinical Lookup Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
--	------	---	--	---------------------------------------	--	-----------	------------------------	------------------------	----------------------

Request an Authorization	
To begin, please select a program below:	Select the Program for your certification. (Radiology and
 Durable Medical Equipment(DME) 	Cardiology or Musculoskeletal for Pain)
 Evicore Medical Oncology Pathways 	
 Gastroenterology 	
Lab Management Program	
 Medical Specialty Drugs 	
 Musculoskeletal Management 	
 Pharmacy Drugs (Express Scripts Coverage) 	
 Radiation Therapy Management Program (RTMP) 	
 Radiology and Cardiology/Vascular Intervention 	
 Sleep Management 	
CONTINUE	
Click here for help	



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	MedSolutions Portal	Help / Contact Us
Reque Select the Filter Last	esting Provider for ordering provider for Name or NPI: Provi	er Information	equest.	SE	ARCH CLEAR SEARCH		 Search Provide to build provide If the F list of p accour NPI. 	n for and se der/Group d a case. ers you ade Provider/G providers a nt, you can	elect the for whom ye This is the li ded to your roup is not dded to you now Searc	ou want st of account on your ir h by
If the prov Search By BACI	vider's NPI is not list NPI: K CONTINUE	ed above, please use	the search featu	re below to add a r	new provider and continue with	case build.				





Clinical Certification Request | Search and Select Provider





Clinical Certification Request | Select Health Plan

Home Certification Auth	horization Eligibilit	y Clinical	Certification Requests	MSM Practitioner	Resources	Manage	MedSolutions	Help /
Summary Lo	ookup Lookup	Certification	In Progress	Perf. Summary Portal		Your Account	Portal	Contact Us
Choose Your Insure Requesting Provider: Please select the insurer for the Please Select a Health Plan BACK CONTINUE Click here for help	er his authorization req	uest.	 Choose the a request. Another drop appropriate a Click CONTIN 	appropriate heal down will appea address for the p NUE.	th plan fo ar to seleo provider.	or the ct the		



Clinical Certification Request | Enter Contact Information





Clinical Certification Request | Enter Member Information

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Perf. S	l Practitioner ummary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
Patient ID:* Patient ID:* Date Of Birt Patient Last When enteri ELIGIBILI BACK Click here for H	Eligibility Loo	kup MM/DD/YYYY	[2] he spelling of the	patient's name. Verif	y accuracy of the patient's ID and da	ate of birth.	• Er ID • Cli	iter mem l number, ick ELIGI	ber inform date of birt BILITY LO	ation, inclu h, and last OKUP.	iding patient name.

	Search Results										
	Patient ID	Member Code	Name	DOB	Gender	Address					
SELECT		01			F						
ВАСК											
<u>Click here for help</u>											

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





Clinical Certification Request | Procedure and Diagnosis Codes

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Re In Progres	equests s	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
Reque This proce	sted Service +	F Diagnosis ed on CH	IANGE		•	Enter Add (r the primary CP	T code.			
Musculos Select a Don't see Addition	keletal Management Procedure by CPT Coc your procedure code al Procedure codes w	Procedures de[?] or Description[?] e or type of service? <u>Cl</u> ill be collected/present	✓ ick here ted during the cli	nical questionnaire				5).			
Diagnosis Select a	Primary Diagnosis Coo	de (Lookup by Code or LOOKUP Please follow <u>these steps</u>	Description)								
Select a Secondary	Secondary Diagnosis (diagnosis is optional for M	Code (Lookup by Code lusculoskeletal Management	or Description)								
BACP Click here fo	r help										





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	MedSolutions Portal	Help / Contact Us	
Add Site	e of Service										
Specific Sir Use the fie you the sit	te Search elds below to search f e names that most cl	or specific sites. For be osely match your entry	est results, search y.	by NPI or TIN. Othe	r search options are by name plus	s zip or name plus city. You may	search a partial sit	e name by entering so	ome portion of the nar	ne and we will prov	/ide
NPI: TIN:		Zip City	Code: ::			Site Name:		○ Exact match			
											ITE

- 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

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

Home Certific Summ	ation Au ary	uthorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
Proceed to Clinical I Urgency Indicator If the case you are submittir a standard/routine, non Urg urgent, please indicate belo In order for eviCore to proce case. If you are unable to up Please indicate if any of the f a delay in care could serie function. A delay in care would sub treatment requested in the p None of the above Clinical Upload In order for eviCore to proce case. If you are unable to upload of Required Medical information of Choose File No file chosen	Iformation is found NOT to m nt request. If you h s this case as clinic or ad clinical docum lowing criteria are sly jeopardize the ct the member to or authorization. this case as clinica nical documentation ecklist size 25MB, allowa	neet one of the two cor have clinical informatio cally urgent you must up tentation at this time co e true regarding urgency life or health of the pat severe pain that cannot ally urgent you must up on at this time contact e able extensions .DOC,.DO	nditions below, your ca n and this request me pload clinical documen of this request : ient or patient's ability t be adequately manage load clinical document wiCore to process this DCX,.PDF,.PNG):	ase will be processed as ets the criteria for ntation relevant to this ess this case as urgent. to regain maximum ed without the care or ation relevant to this case as urgent.	Proceed to Cl Is this case Routine/S YES	inical Information Standard? NO	 If the If you When urgon releating the optimized optimized	e case is s our request en a reque ent, you wi evant clinica oad up to f oad up to f	standard, so t is urgent, st is submit Il be require al information FIVE docum f format; max 5 only be cor is a succes	elect Yes . select No . ted as ed to uploa on. nents. <i>MB size)</i> nsidered sful upload



Provider Portal Demo

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









CareCore National Portal Features





Provider Portal | Feature Access







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Certification Summary | User Worklist

Hom	e Cert Su	rtification Immary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Reque In Progress	sts MSM Pr Perf. Sum	actitioner mary Portal	Resources	Manag Your Acco	e Med unt F	Solutions Portal Co	Help / ontact Us	
Cert	tificatio	on Sumn	nary											
Searc	h For: [All Other Pr	ograms		~									
Searc	ch		⊲ ≡											
14 <	Page 1	of 1 ⊨>	▶10 ❤											
	Author	rization Number	Case Number	Member	Last Name	Ordering Provider Last Name	Ordering Provider NPI	Stat	tus	Case Initiation Date	Procedure Code	Servi	ce Description	
			×	×	×	×	×				×			
1 N	A							APPRC	VED	05/08/2025	70551	MRI of the B	rain W/O Contrast	
	Page 1	of1 ⊨>	⊫i 10 ∨											

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





Authorization Lookup

Но	me	Certificat Summa	tion T y	Authoriz Looku	ation IP	Eligibility Lookup	Clini Certific	ical Co ation	ertification Req In Progress	quests s	MSM Prac Perf. Summa	titioner ary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
Αι	ıtho	rizatio	n Lo	ookup												
_																_
S C	earch	by Memb o d Fields	er Info	ormation	Searc	h by Autho	rization N	lumber/NF	PI OnePA: Pi	rior Aut	thorization Po	rtal for Pro	oviders Sea	rch by Claim Nu	ımber/Health pla	n
F	lealth	plan:							~							
	PRIN	т														
Click	here f	or 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.





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Provider Resources



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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. <u>Provider Engagement Manager Territory List</u>



Call Center/Intake Center

Call **866-668-8295**, 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

(Choose specific health plan from the dropdown menu)

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

EviCore 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: **Intro to Web 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. <u>Please keep the registration e-mail</u> 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 <u>EviCore.com</u> 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 session:

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.
- Click Subscribe.







Thank You





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Appendix





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Online Peer-to-Peer Scheduling Tool





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If your case is eligible for a Peer-to-Peer (P2P) consultation, a link will display, allowing you to proceed to scheduling without any additional messaging.

- 1. Log-in to your account at EviCore.com.
- 2. Perform **Clinical Review Lookup** to determine the status of your request.
- 3. Click on the **P2P AVAILABILITY** button to determine if your case is eligible for a. Peer-to-Peer consultation
- Note carefully any messaging that displays.*



*In some instances, a Peer-to-Peer consultation is allowed, but the case decision can not be changed. In such cases, you can still request a **Consultative-Only Peer-to-Peer**. You can also click on the **ALL POST-DECISION OPTIONS** button to learn what other action can 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.

- 1. Upon first login, you will be asked to confirm your default time zone.
- 2. You will be presented with the case number and member date of birth.
- 3. Add another case for the same Peer-to-Peer appointment request by selecting Add Another Case.
- 4. To proceed, select Lookup Cases.
- 5. You will receive a confirmation screen with member and case information, including the level of review for the case in question.
- 6. Click **Continue** to proceed.

Case Info	Question	s Schedule	Confirmation	
New	P2P Request		EviCore By EVERNORTH	
Ca	se Reference Number Member Date of Birth	Case information will auto-populate	ate from prior lookup	
New F	2P Request		EviCore By EVERNORTH	
Case Ref #: Member Information	Reconsideration allo	wed through eviCore until 11/1 Case P2P Informat	Remove 🥪 P2P Eligible	2
Name DOB State Health Plan Member ID		Episode ID P2P Valid Until Modality Level of Review System Name	2020-11-11 MSK Spine Surgery Reconsideration P2P ImageOne	
		Continue		

- 1. You will be prompted with a list of EviCore Physicians/Reviewers and appointment options.
- 2. Select any of the listed appointment times to continue.
- 3. You will be prompted to identify your preferred days and times for a Peer-to-Peer consultation (all opportunities will be automatically presented).
- Click on any green checkmark to deselect that option, then click Continue.

	Please in	dicate you	r availabil	ity								
1st Case	Preferre	ed Days										
Case #	M	lon	Т	Jes	Wed		Thurs		Fri			
Episode ID	4		× ×		1	· ·			×			
Member Name Member DOB	Preferre	ed Times										
Member State								Afternor		ion		
Health Plan	7:00 to 8:00	6 00 to 9 00	9:00 to 10:00	10 00 to 11 00	11:00 to 12:00	12:00 to	1:00 to	2 00 to	3:00 to	4.00 to	5 00 to	6:00 to
Member ID	× .	×.	~	× .	~	100	200	3.00	4:00	\$100	- 00 - V	1.00
case type MSK Spine Surgery Level of Review Reconsideration P2P	Time Zo	one										
	US/Eas	stern										-
											Continu	ie >

Prev Week		5/18/202	20 - 5/24/2020 (Upcomin	g week)		Next Wee
						1st Priority by
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 5/24/2
6:15 pm EDT	-	-	-	-	-	-
6:30 pm EDT						
6:45 pm EDT	-					
						1st Priority by
Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	1st Priority by Sun 5/24/2
Mon 5/18/20 3:30 pm EDT	Tue 5/19/20 2:00 pm EDT	Wed 5/20/20 4:15 pm EDT	Thu 5/21/20 3:15 pm EDT	Fri 5/22/20	Sat 5/23/20	1st Priority by Sun 5/24/2
Mon 5/18/20 3:30 pm EDT 3:45 pm EDT	Tue 5/19/20 2:00 pm EDT 2:15 pm EDT	Wed 5/20/20 4:15 pm EDT 4:30 pm EDT	Thu 5/21/20 3:15 pm EDT 3:30 pm EDT	Fri 5/22/20	Sat 5/23/20 -	1st Priority by Sun 5/24/2 -
Mon 5/18/20 3:30 pm EDT 3:45 pm EDT 4:00 pm EDT	Tue 5/19/20 2:00 pm EDT 2:15 pm EDT 2:30 pm EDT	Wed 5/20/20 4:15 pm EDT 4:30 pm EDT 4:45 pm EDT	Thu 5/21/20 3:15 pm EDT 3:30 pm EDT 3:45 pm EDT	Fri 5/22/20 -	Sat 5/23/20 -	1st Priority by Sun 5/24/2 -
Mon 5/18/20 3:30 pm EDT 3:45 pm EDT 4:00 pm EDT 4:15 pm EDT	Tue 5/19/20 2:00 pm EDT 2:15 pm EDT 2:30 pm EDT 2:45 pm EDT	Wed 5/20/20 4:15 pm EDT 4:30 pm EDT 4:45 pm EDT 5:00 pm EDT	Thu 5/21/20 3:15 pm EDT 3:30 pm EDT 3:45 pm EDT 4:00 pm EDT	Fri 5/22/20 -	Sat 5/23/20 -	1st Priority by Sun 5/24/2 -

- Update the following fields to ensure the correct person is contacted for the Peer-to-Peer appointment:
 - + Name of Provider Requesting P2P
 - + Phone Number for P2P
 - + Contact Instructions
- 2. Click **Submit** to schedule the appointment.
- 3. You will be presented with a summary page containing the details of your scheduled appointment.
- 4. Confirm contact details.

Case Info	Questions	Schedule	Confirmation	
P2P Info Date Mon 5/18/20 Time O 6:30 pm EDT Reviewing Provider C Case Info 1st Case Date I Date I Date I Aember DB Member DB Member DB Member State Heatth Plan Member DI Case Type MSK Spine Surgery Level of Review Reconsideration P2P	 P2P Contact D Name of Provider Request Dr. Jane Doe Contact Person Name Office Manager John D Contact Person Location Provider Office Phone Number for P2P (555) 555-5555 Alternate Phone (xxx) xxx-xxxx Requesting Provider End droffice@internet.com Contact Instructions Select option 4, ask for 	eetails esting P2P oe on 0 aail	Phone J 1 Phone J 2	Ext. 2345 Ext. Phone Ext.
Scheduling Scheduled (© Mon 5/18/20 - 6 ()	5:30 pm EDT		ссн	EDULED

P2P Contact Details

- Use the radio button option to select who will perform the P2P with the EviCore Medical Director.
- 2. Open fields will manually open to input the provider's first, last name, and their credential.

Appointment Details		
🗰 Fri 5/24/2024		
③ 7:00 am PDT		
🚡 Tamara Fackler		
ho will be performing th	e P2P consultation? Required	
Requesting Provider		
Contact Person		
) Someone else		
Someone else		
Someone else		
Someone else PROVIDER Name of Referring Physi	ician on Case Required	Credential Require
Someone else PROVIDER Name of Referring Physi First Name	ician on Case Required	Credential Require Select
Someone else PROVIDER Name of Referring Physi First Name	ician on Case Required	Credential Require Select
Someone else PROVIDER Name of Referring Physi First Name CONTACT PERSON	ician on Case Required	Credential Require Select
Someone else PROVIDER Name of Referring Physi First Name CONTACT PERSON	Ician on Case Required	Credential Require Select
Someone else PROVIDER Name of Referring Physi First Name CONTACT PERSON Contact First Name Requi	ician on Case Required Last Name	Credential Require Select
Someone else PROVIDER Name of Referring Physi First Name CONTACT PERSON Contact First Name Requi Contact First Name	ician on Case Required Last Name	Credential Require Select

Call Notes

- 1. Use the radio button to select options if applicable.
- 2. If "Procedure was performed on" is selected, then the date is required.

Cont	tact Instructions
Call	Notes
	ALT REC declined
	Procedure was performed on: mm/dd/yyyy
	Caller requested MD Specialty match
	Appeal LOR attestation requirement
	OH State Regulation: Member Consent obtained
	TX licensed physician - Caller is aware P2P does not meet SSL match and wants to proceed with P2P per same-specialty match requirement.
	TX licensed same specialty - Caller is aware P2P does not meet TX SSL/specialty match and wants to proceed with P2P
	Schedule Appointment

Cancel or Reschedule a P2P Appointment

To cancel or reschedule an appointment:

- Access the scheduling software and select My P2P Requests on the left-pane navigation.
- 2. Select the request you would like to modify from the list of available appointments.
- 3. When the request appears, click on the schedule link. An appointment window will open.
- 4. Click on the **Actions** drop-down and choose the appropriate action:
 - + **If choosing to reschedule,** select a new date or time as you did initially.
 - + **If choosing to cancel,** input a cancellation reason.
- 5. Close the browser once finished.

