# Radiology and Cardiology Advanced Imaging

**Health Partners Plans** 





## Agenda



#### **Solutions Overview**

Radiology & Cardiology Advanced Imaging

#### **Submitting Requests**

Prior Authorization Outcomes, Special Considerations & Post-Decision Options

#### **EviCore Provider Portal**

Overview, Features & Benefits

**Provider Resources** 

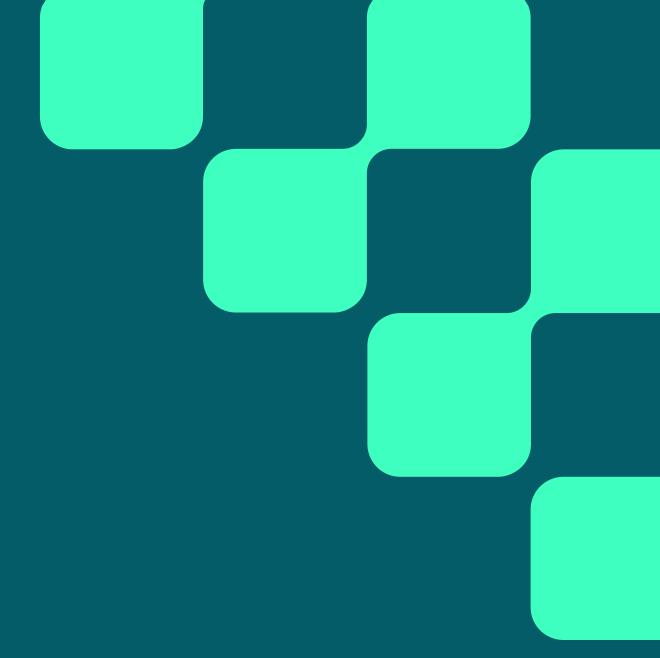
**Questions & Next Steps** 

#### **Appendix**

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



## Solution Overview





#### **Health Partners Plans Prior Authorization Services**

#### **Applicable Membership**

- Medicaid
- CHIP

## 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** 

#### **Services within Scope:**

- CT, CTA
- MRI, MRA
- PET, PET/CT
- 3D Imaging
- Advanced Imaging (CT & MRI)
- Nuclear Cardiac Imaging (NCM/MPI)

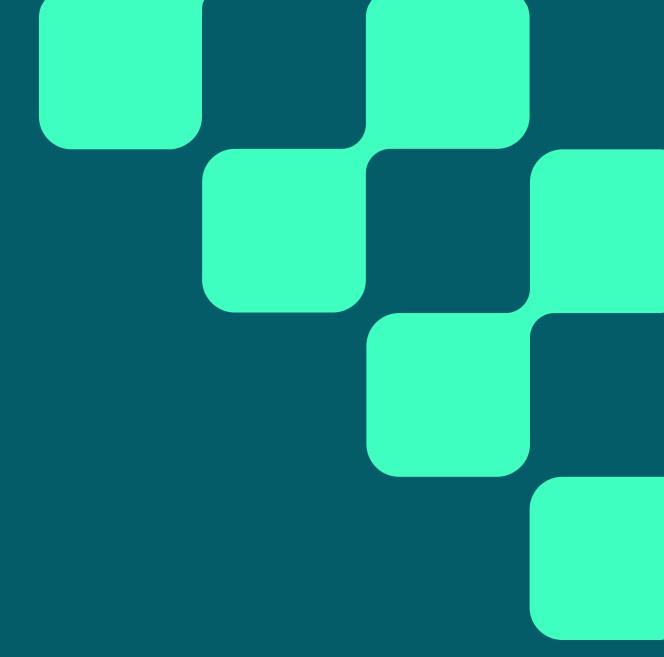
To find a list of CPT codes that require prior authorization through EviCore, please visit:

https://www.evicore.com/resources/healthplan/health-partners-plans





# Submitting Requests





## **How to Request Prior Authorization**

The EviCore Provider Portal is the easiest, most efficient way to request clinical reviews and check status.

- 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>



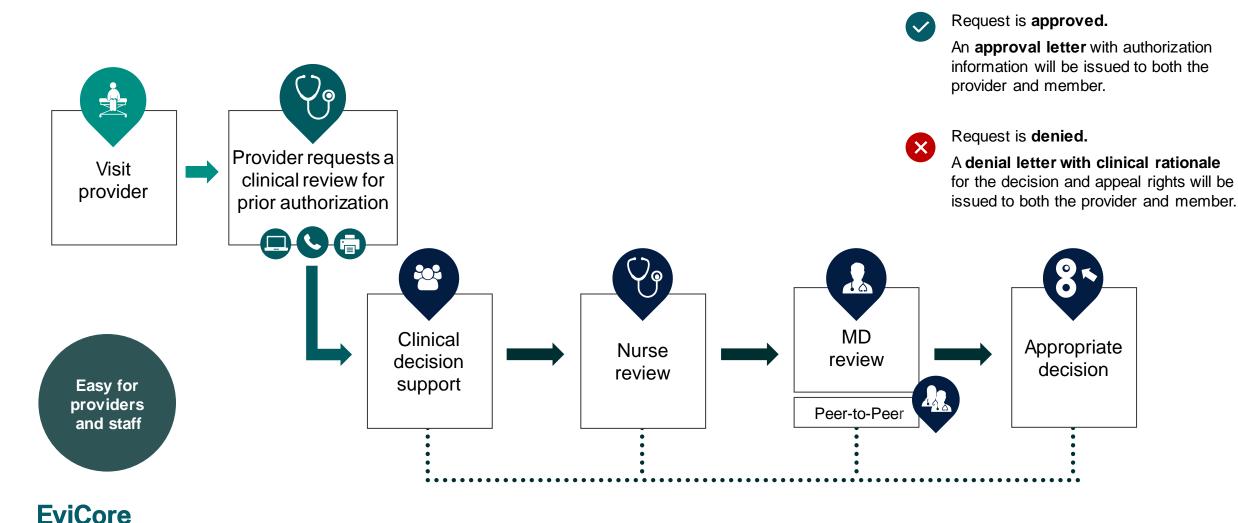
Phone: 888-444-6178
Monday – Friday
7 AM – 7 PM (local time)

Fax: 800-540-2406



## **Utilization Management** | Prior Authorization

By EVERNORTH



## **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 60 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, then 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: <u>www.EviCore.com</u>



## **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 **888-444-6178**.
- 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 | Medicaid & CHIP 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 **888-444-6178** 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 <u>EviCore.com</u> to see available options.



#### Reconsiderations

- Reconsiderations can be requested in writing or verbally via Clinical Consultation with an EviCore physician.
- Please refer to the determination letter for instructions.

#### **Appeals**

- EviCore will not process first-level appeals.
- Please refer to the determination letter for appeal options.



#### **Special Circumstances**

#### **Retrospective (Retro) Authorization Requests**

- Must be submitted within 180 calendar days from the date of services.
- Reviewed for clinical urgency and medical necessity.
- When authorized, the start date will be the submitted date of service.

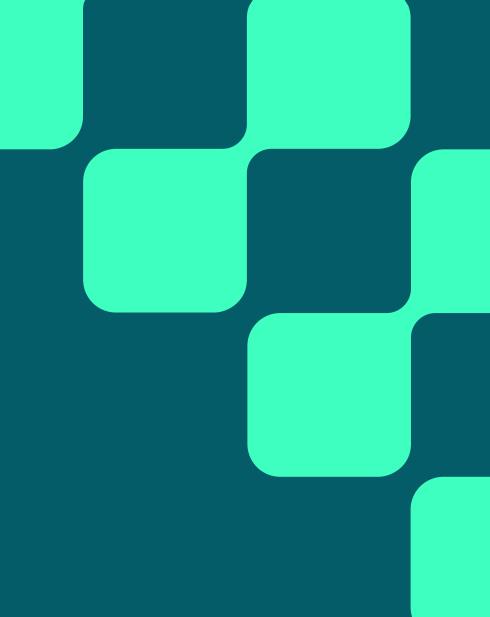
#### **Urgent Prior Authorization Requests**

- 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.





## Provider Portal Overview



## EviCore Provider Portal | Access and Compatibility

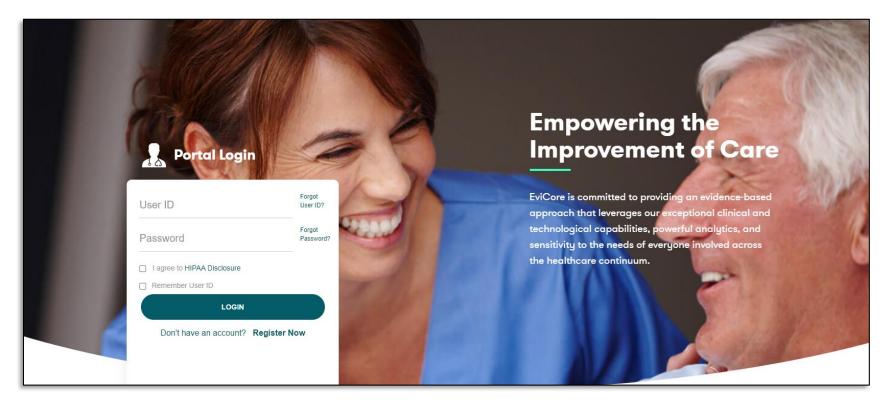
Most providers are already saving time submitting clinical review requests online vs. telephone.

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.

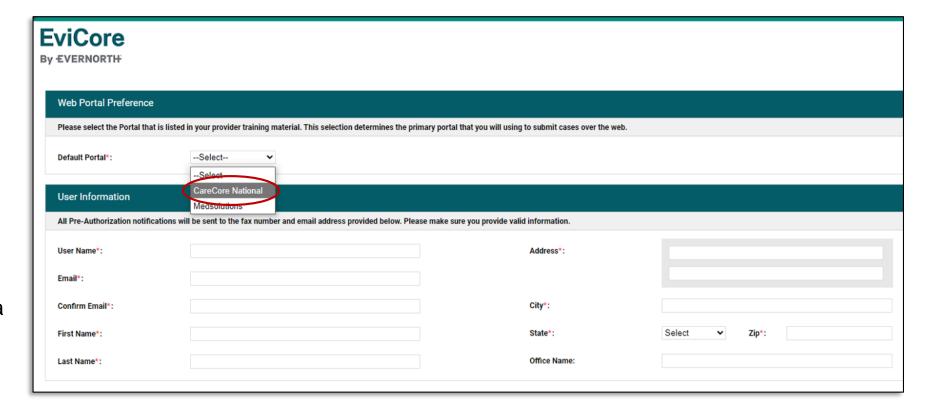


EviCore's website is compatible with **all web browsers**. If you experience issues, you may need to **disable pop-up blockers** to access the site.



### 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)**

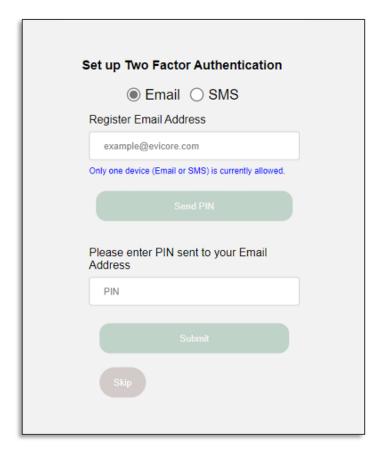
To safeguard your patients' private health information (PHI), we have implemented a multi-factor authentication (MFA) process.

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.

Select **Send PIN**, and 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.

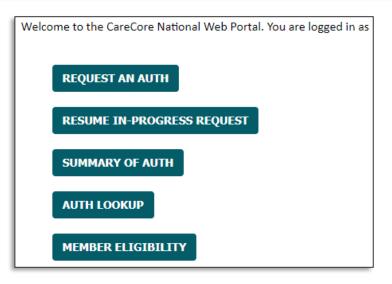




## Welcome Screen | Adding Providers to Registration



- 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 **Authorization Certification Requests** Home Lookup Lookup Certification In Progress Summary **Manage Your Account CHANGE PASSWORD EDIT ACCOUNT** Office Name: Address: **Primary Contact:** Email Address: **ADD PROVIDER** Click Column Headings to Sort No providers on file CANCEL

Click the Add Provider button.



**MSM Practitioner** 

Perf. Summary Portal

MedSolutions

Portal

Help /

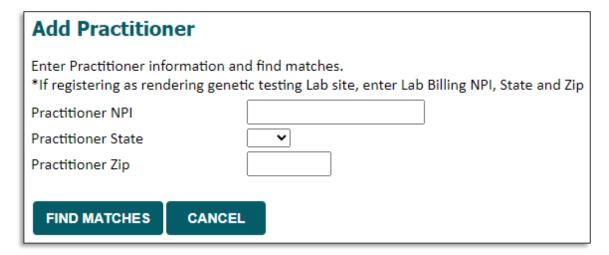
**Contact Us** 

Manage

**Your Account** 

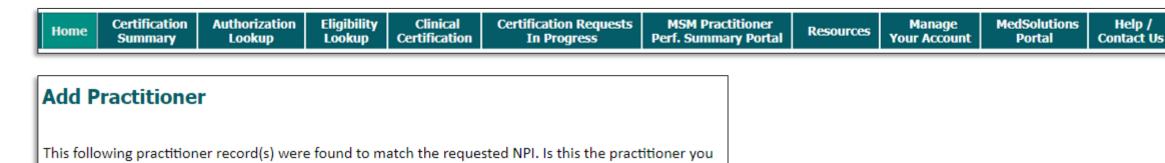
Resources





- 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.





Phone

Fax

ADD THIS PRACTITIONER CANCEL

NPI

Address

City

would like to register?

**Practitioner** 

Name

Select the matching record based upon your search criteria.

State Zip



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

#### **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

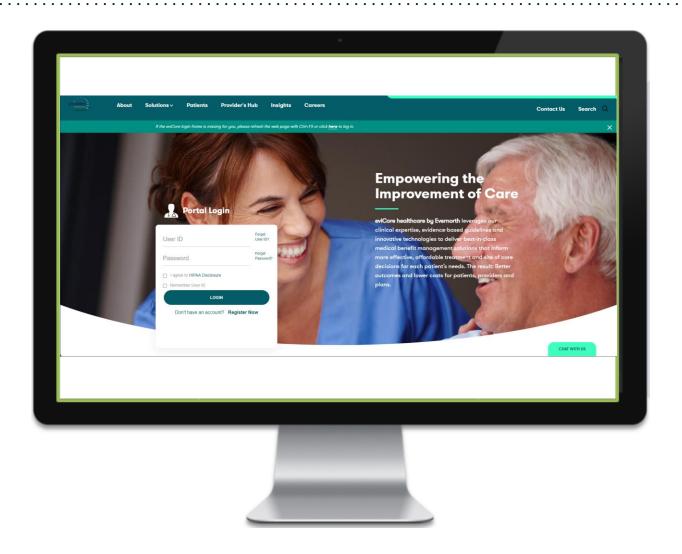
- Once you have selected a practitioner, your registration will be completed and ready for building a case.
- You can click on Add Another Practitioner to add another provider to your account or click Continue.



## 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)





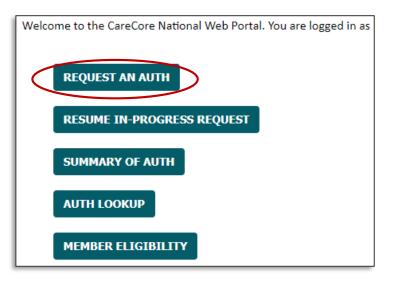




## **Initiating a Case**



 To initiate a prior authorization request via the EviCore portal, select Request an Auth or Clinical Certification.





### Select a Program

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

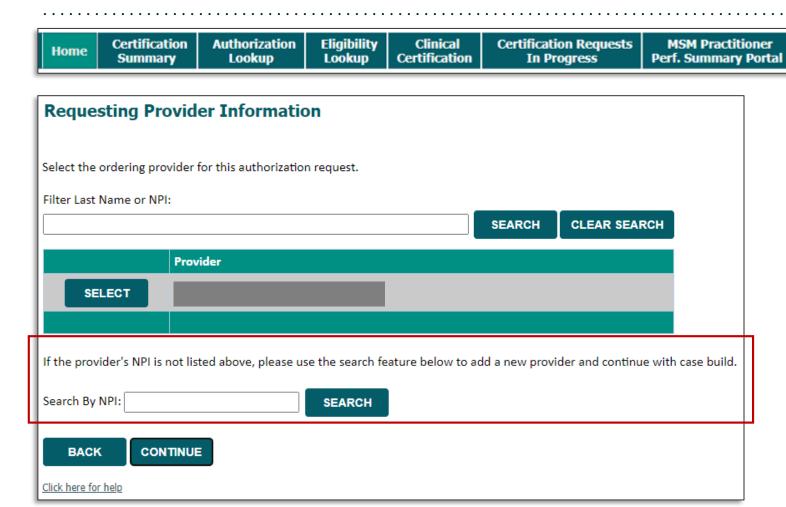
#### **Request an Authorization** To begin, please select a program below: Durable Medical Equipment(DME) Gastroenterology Lab Management Program Medical Drug Management Medical Oncology Pathways Musculoskeletal Management Pharmacy Drugs (Express Scripts Coverage) Radiation Therapy Management Program (RTMP) Radiology and Cardiology Sleep Management CONTINUE

Select Radiology and Cardiology from the program list and continue.



Click here for help

#### **Select Provider**



 Select the provider who is referring the patient for treatment.

Manage

**Your Account** 

Resources

MedSolutions

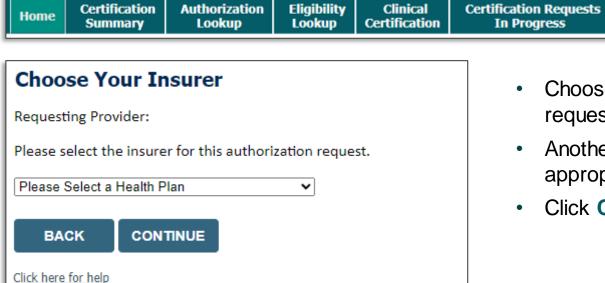
**Portal** 

Help /

**Contact Us** 



#### **Select Health Plan**



 Choose the appropriate health plan for the request.

Resources

MSM Practitioner

Perf. Summary Portal

MedSolutions

Portal

Help /

**Contact Us** 

Manage

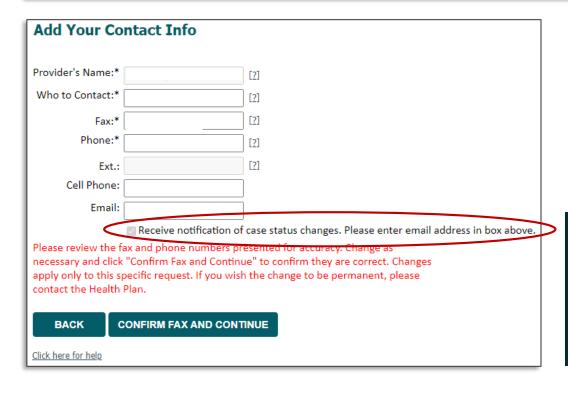
**Your Account** 

- Another drop down will appear to select the appropriate address for the provider.
- Click CONTINUE.



#### **Enter Contact Information**

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

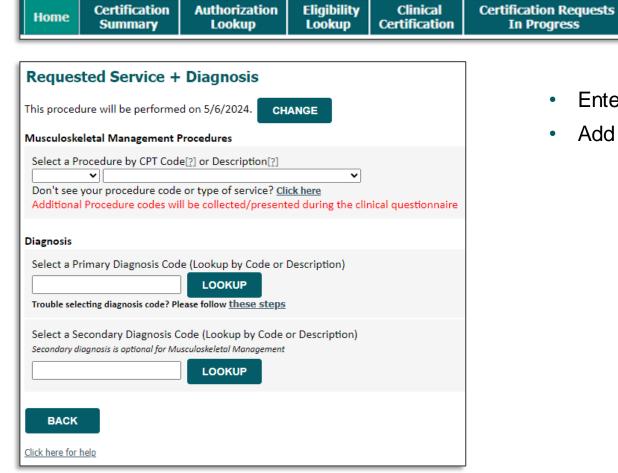


- Enter/Edit the provider's name and appropriate information for the point of contact.
- Practitioner name, fax, and phone will pre-populate; edit as necessary.

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.

## Clinical Certification Request | Procedure and Diagnosis Codes

In Progress



Enter the primary CPT code.

**MSM Practitioner** 

Perf. Summary Portal

MedSolutions

Portal

Help /

Contact Us

Manage

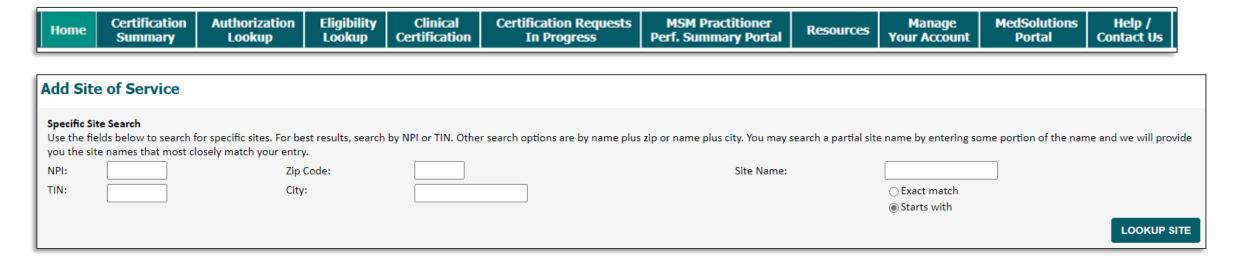
**Your Account** 

Resources

Add diagnosis code(s).



## 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

Clinical **Certification Requests** Certification Authorization Eligibility 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** 

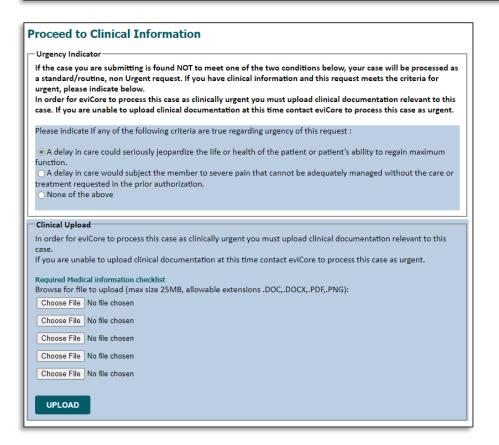
**CONFIRM AND CONTINUE** 

- Verify that all information is entered and correct.
- Check the acknowledgement statement.
- Once you enter the clinical collection phase of the process, the answers to the clinical questions will not save unless the case is completed.
- 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 **Your Account** Summary Lookup Lookup Certification 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.



## Improved Provider Experience

#### Real-Time Decision or Clinical Documentation Upload



You'll be asked to complete a short series of clinical questions which may result in an immediate approval. If an immediate approval does not occur, you'll be prompted to upload clinical information.

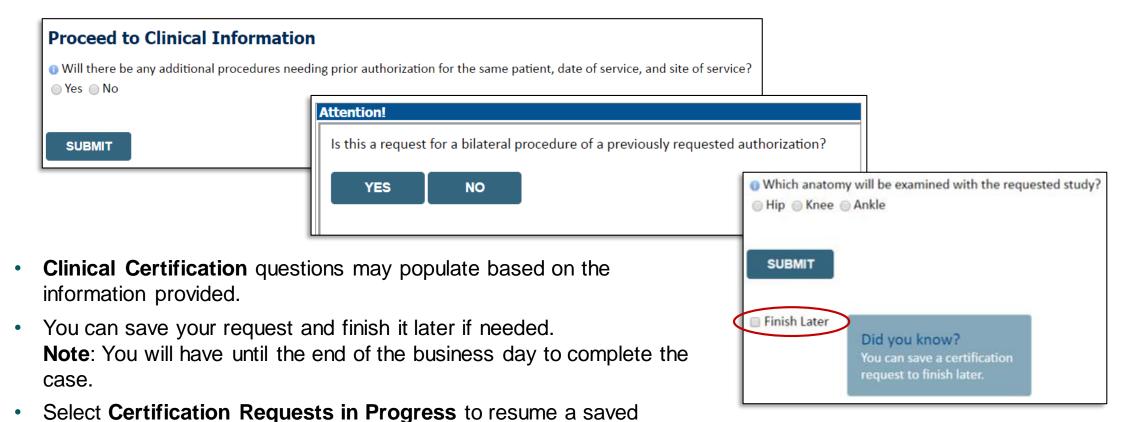






# Clinical Certification Request | Proceed to Clinical Information

#### **Example Questions**





request (this function is **not** available for single-sign- on (SSO) users).

# Clinical Certification Request | Request for Clinical Upload

Clinical

Home Lookup Lookup Certification In Progress Summarv Clinical Upload In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent. Required Medical information checklist Browse for file to upload (max size 25MB, allowable extensions .DOC.,DOCX,.PDF,.PNG): Choose File No file chosen **EviCore** Choose File No file chosen By EVERNORTH Choose File No file chosen Required Medical Information Check List Choose File No file chosen Radiology Choose File No file chosen Rule out/diagnosis **UPLOAD** ent such as medications, physical therapy, surgery; chemotherapy, Please include dates and duration of treati inent medical history and family history For imaging exam requests for cancer, indicate if the exam is requested for initial staging or restaging following treatment or

**Eligibility** 

**Authorization** 

If **additional information** is required, you will have the option to upload more clinical information. Review the list of required medical information EviCore requires in order for the prior authorization to meet medical necessity.

Resources

Manage

**Your Account** 

#### Tips:

**MSM Practitioner** 

Perf. Summary Portal

**Certification Requests** 

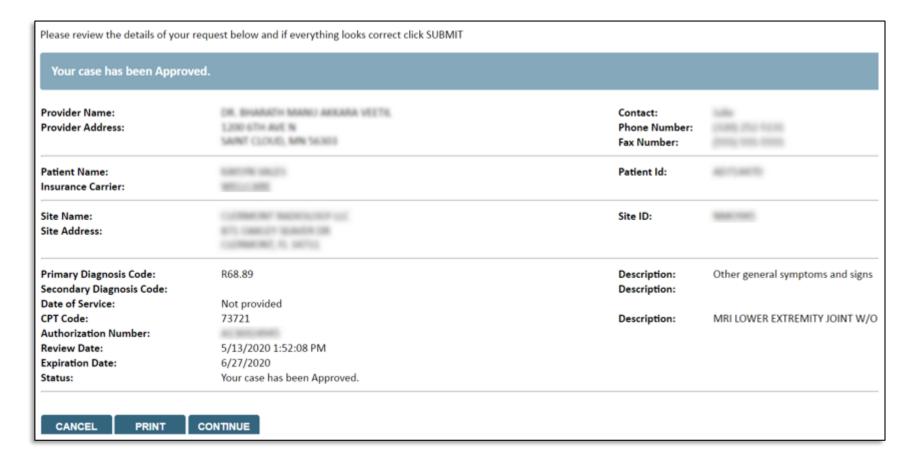
- Providing clinical information via the web is the fastest and most efficient method
- Enter additional notes in the space provided only when necessary
- Additional information uploaded to the case will be sent for clinical review
- Print out a summary of the request that includes the case number and indicates "Your case has been sent to clinical review."

Direct link to document: Required Medical Information Check List.pdf (evicore.com)



Certification

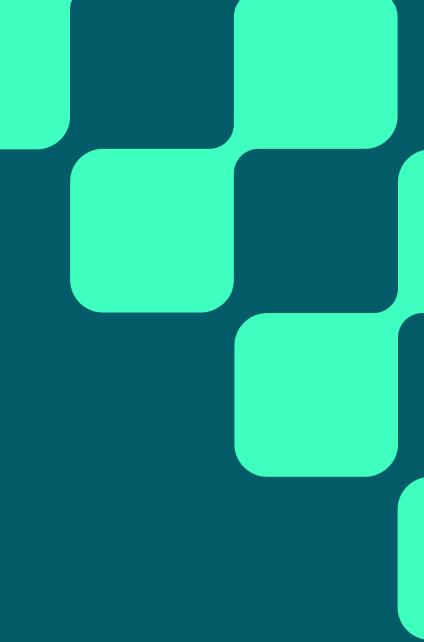
# Clinical Certification Request | Criteria Met



If your request is authorized during the initial submission, you can **PRINT** the summary for your records.



# EviCore Portal Features





# 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.

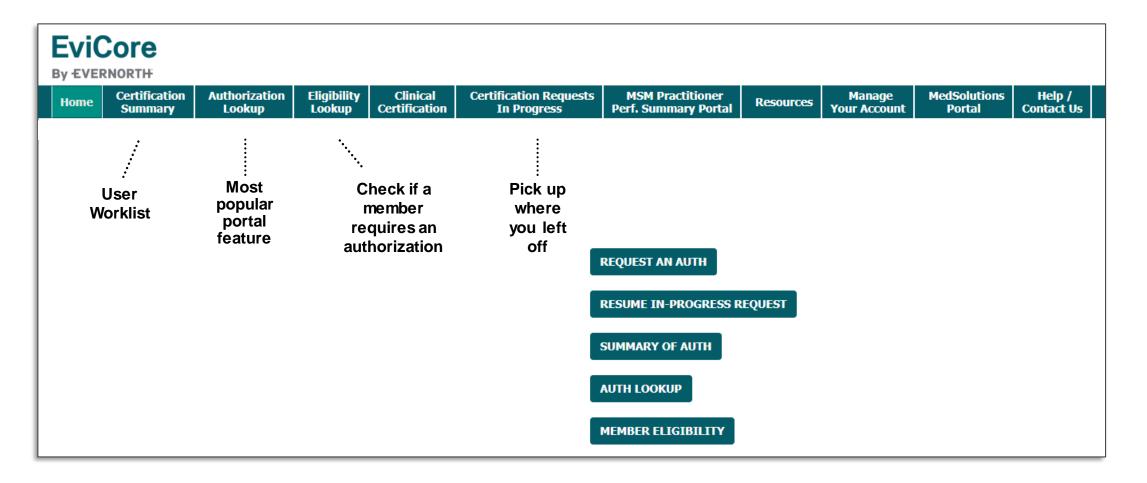
#### **Certification Summary**

Track recently submitted cases.



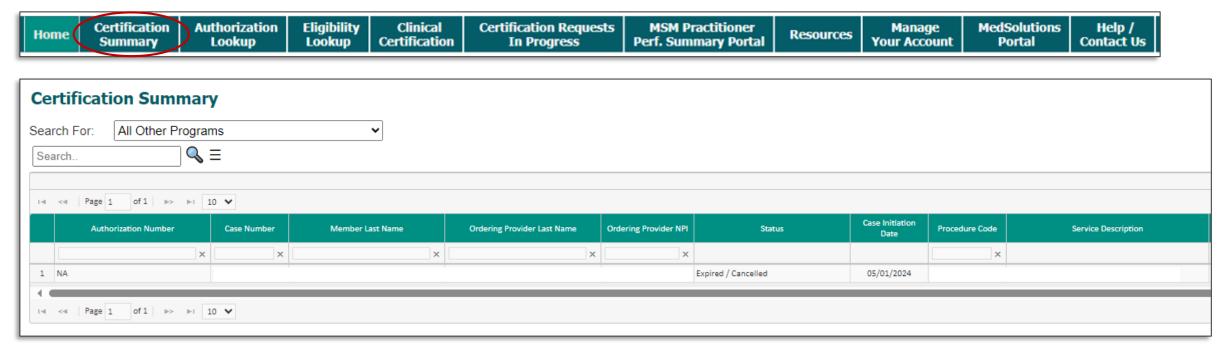


# **Provider Portal** | Feature Access





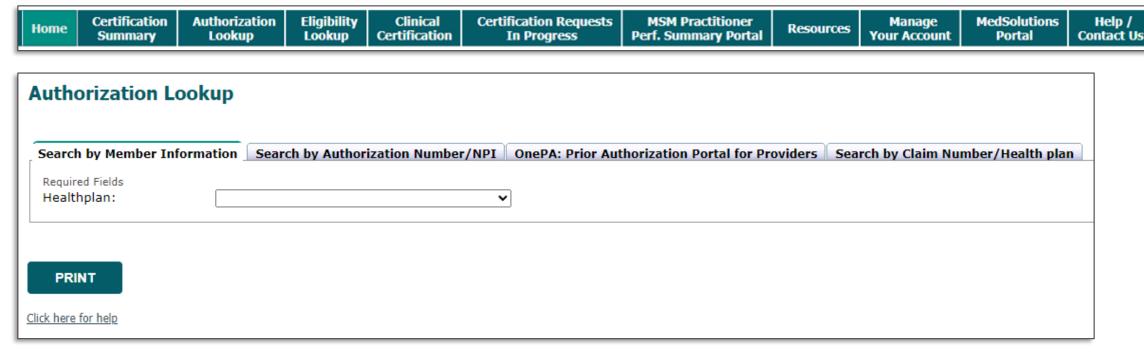
# **Certification Summary | User Worklist**



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



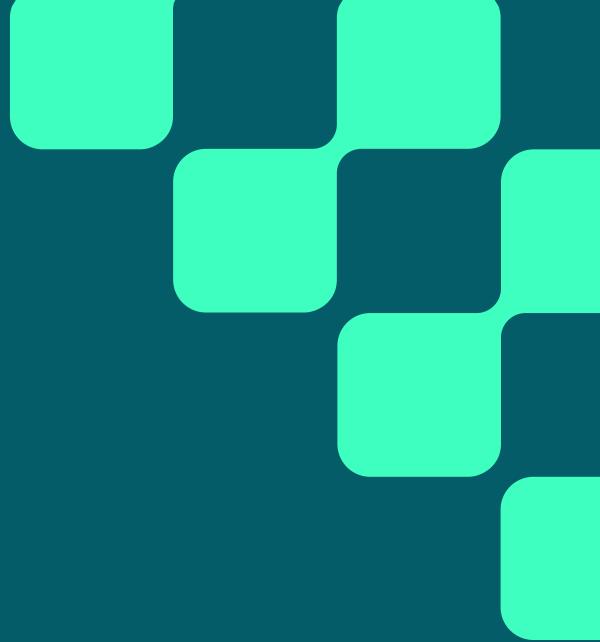
# **Authorization Lookup**



- 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: Portal.Support@EviCore.com

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 **888-444-6178**. Representatives are available from 7 a.m. to 7 p.m. local time.



**Provider Resource Website** 

#### **Provider Resource Pages**

EviCore's Provider Engagement team maintains provider resource pages that contain educational material to assist providers and their staff on a daily basis. The provider resource pages include, but are not limited to, the following educational material:

- Provider training material
- CPT code list
- Quick Reference Guide (QRG)
- Frequently Asked Questions (FAQ)

#### To access these helpful resources, please visit:

https://www.evicore.com/resources/healthplan/health-partners-plans

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

#### To register, go to EviCore.com, then:

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!

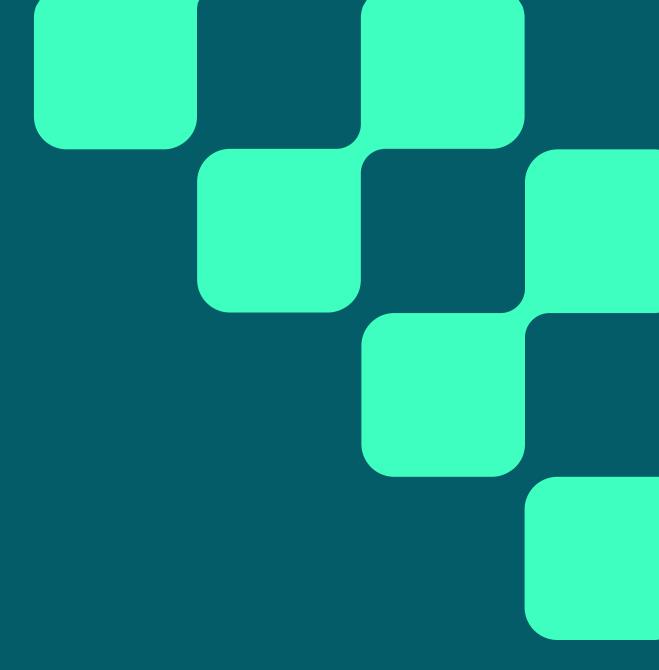
#### To subscribe:

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



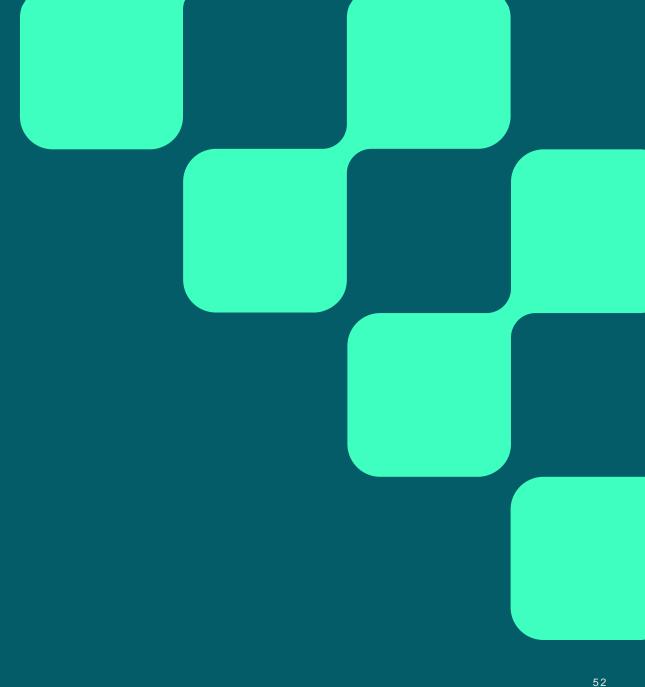


# Thank You





# Appendix



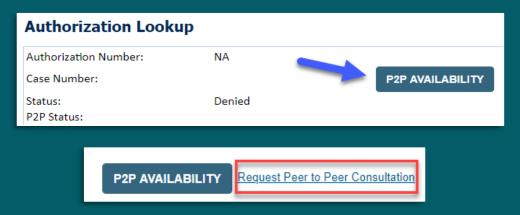


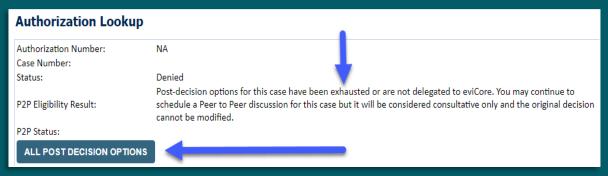
# Peer-to-Peer (P2P) Scheduling Tool



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.

- Log-in to your account at EviCore.com.
- 2. Perform **Clinical Review 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 consultation
- 4. Note carefully any messaging that displays.\*

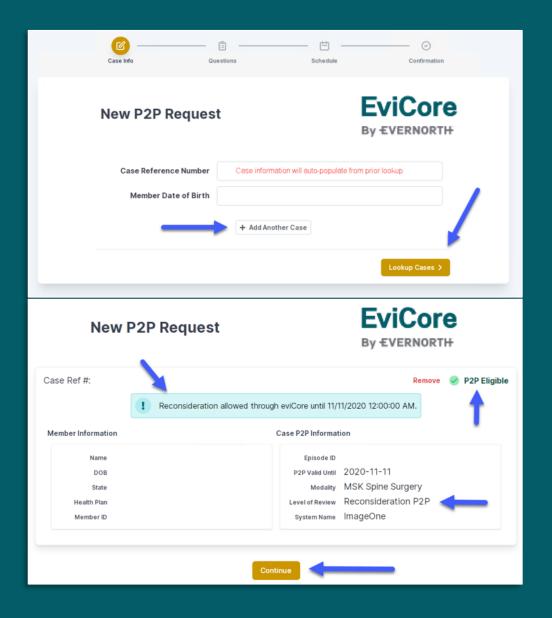




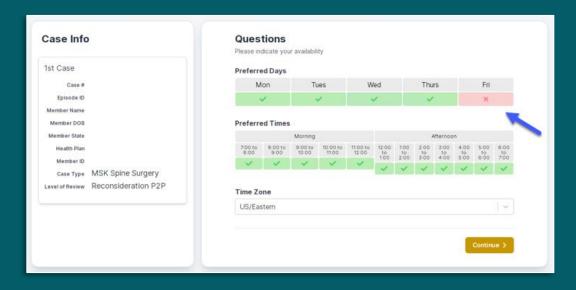
\*In some instances, a Peer-to-Peer consultation is allowed, but the case decision can not be changed. In such cases, you can still request a **Consultative-Only Peer-to-Peer**. You can also click on the **ALL POST-DECISION OPTIONS** button to learn what other action can be taken.

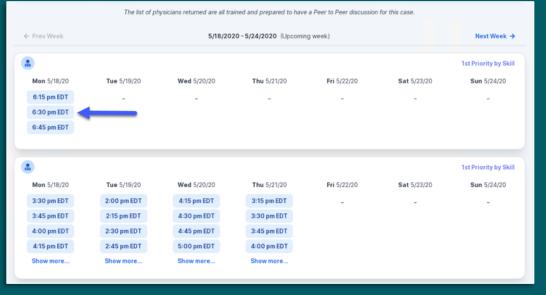
Once the **Request Peer-to-Peer Consultation** link is selected, you will be transferred to our scheduling software via a new browser window.

- 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.

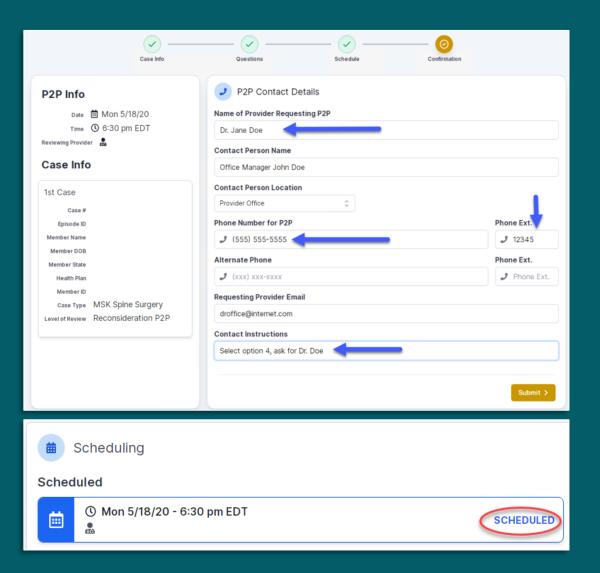


- 1. You will be prompted with a list of EviCore Physicians/Reviewers and appointment options.
- 2. Select any of the listed appointment times to continue.
- 3. You will be prompted to identify your preferred days and times for a Peer-to-Peer consultation (all opportunities will be automatically presented).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





- 1. 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.



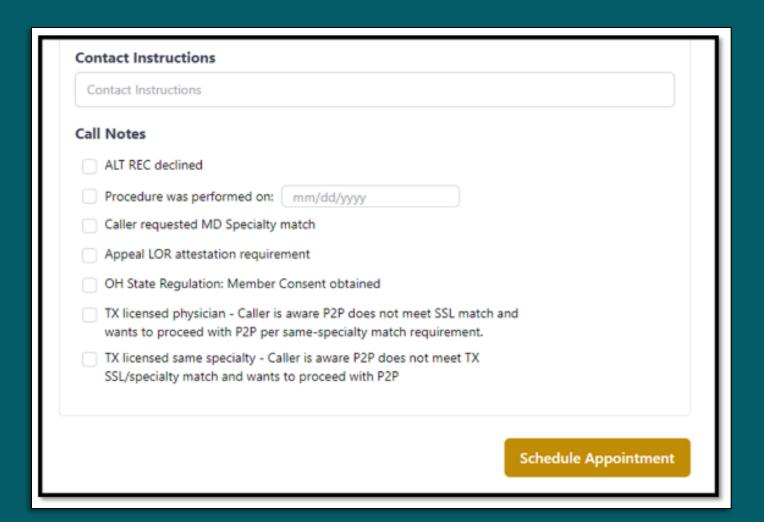
## **P2P Contact Details**

- 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.



# **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.



# 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.

