

IMAGING AND JOINT SURGERY

Moda Site of Care program

October 1, 2025

EviCore
By EVERNORTH





What is Changing?

.....
On October 1, 2025, this program will be expanded to include OEBB customers. With this expansion, members will be subject to the site-of-care medical necessity review for radiology and musculoskeletal services. This program is already in effect for PEBB & Oregon Individual plan members (January 1, 2025).

For members included in the site-of-care program, there will be a separate medical necessity review for:

The requested procedure

AND

The requested site-of-care

Note: Both the site-of-care and the procedure must be approved; otherwise, any claims associated with the request will be denied.

Important Information about Site of Care

- + The Moda Site-of-Care program applies to High Tech Imaging and Spine and Joint Surgery requests for OEBB members and involves a medical necessity review for the site of service.
- + EviCore reviews requests to ensure customers are directed to an appropriate alternative site of service, such as an Ambulatory Surgical Center or other freestanding facility (when available), rather than an outpatient hospital setting, except in situations where the use of an outpatient hospital setting is required due to the patient's clinical condition.
- + Failure to receive medical necessity determination for the site-of-care (for the applicable membership) will result in the denial of claims payment.
- + If a provider requests approval for an outpatient hospital setting and does not provide a medical exception with Moda's coverage policy criteria, we will deny authorization for the site of service.

What this means for providers

.....
Will the precertification/prior authorization submission process change?

- + There is no change to the process for initiating precertification requests for customers with benefit plans that include a site-of-care medical necessity review. There is also no change when ordering providers select an Ambulatory Surgical Center (ASC) / Freestanding facility or another office-based location.
- + What is different as of October 1, 2025: if a provider requests approval for an outpatient hospital setting and does not provide clinical rationale consistent with coverage policy criteria, we will deny authorization for the site of service. Medical records may also be required to support the clinical rationale.



Site Questions presented and messaging

- + Choose the Setting in which the service will be performed
 - + Selecting office will prompt another question related to the billing provider information
 - + Selecting Ambulatory Surgery (ASC)/ Freestanding location will guarantee an approval for the Site of Care review
- + Selecting a hospital setting will prompt additional questions and/or re-direction later in the pathway
 - + If a provider requests approval for an outpatient hospital setting and a medical exception consistent with Moda's coverage policy criteria is not applicable, the case will deny for the site of service.

Attention!

Patient ID: 341568708 Time: 8/1/2024 4:56 PM
Patient Name: [REDACTED] Date of Service: 8/1/2024

In what setting will this procedure be performed?

☐ A portion of an off-campus hospital provider-based department which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization

☒ Office

☐ Inpatient hospital

☐ A portion of a hospital's main campus which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization

☐ Emergency room - hospital

☐ Ambulatory Surgery

SUBMIT

Attention!

Will the procedure be billed under the same TIN as the ordering provider?

Site Selection

- + Search for the **site of service** where the procedure will be performed (for best results, search with NPI (and/or TIN) and zip code)
- + **Select** the specific site where the procedure will be performed

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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

Tuesday, June 25, 2024 10:10 AM

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:

Site Name:

TIN:

City:

☒ Exact match

☐ Starts with

LOOKUP SITE

| | Name | Address |
|--------|------|---------|
| SELECT | | |

BACK

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Site of Care (SOC) Selection

- + Select an Ambulatory Surgical Center (ASC) / Freestanding facility to receive an approval for the Site of Care (SOC) portion of the review



Submit Clinical Request

According to the member's benefit plan, performing the service in an ambulatory surgical center may result in the member having less out of pocket expense. The facility you have requested services for is at an outpatient hospital. Procedures performed at an Ambulatory Surgical Center do not require prior authorization. Would you like to utilize an Ambulatory Surgical Center?

To retain your selected site, check "None of the above" below the table.

| | OAOID | Name | Address | Fax Number | Phone Number | Tier | TAX ID | NPI | Site Spec1 |
|-------------------|--------|---------------|---------|------------|--------------|------|--------|-----|------------|
| <div>SELECT</div> | IGFOYY | NEW CENTER | | 2 2 | 2 10 2 | 2 | 7 1 | 0 | SITE-AMBSU |

1 |

☐ None of

Submit Clinical Request

The selected facility does not require a site review for the requested procedure(s). This request will be approved. You can save the reference ID as validation of your request.

Please click submit to complete this request submission.

Submit

Reason for Selection

- + If an Ambulatory Surgical Center (ASC) / Freestanding facility is not selected, there may be justification
- + Please select a medical exception where applicable to the patient, or if an ASC / Freestanding facility is not within range

Submit Clinical Request

ⓘ According to the member's benefit plan, performing the service in an ambulatory surgical center may result in the member having less out of pocket expense. The facility you have requested services for is at an outpatient hospital. Would you like to utilize an Ambulatory Surgical Center?

To retain your selected site, check "None of the above" below the table.

| | OAOID | Name | Address | Fax Number | Phone Number | Tier | TAX ID | NPI | Site Spec1 |
|--------|--------|----------------------------|------------------------------------|------------|--------------|------|-----------|------------|------------|
| SELECT | JGFOYY | NEW VISION CATARACT CENTER | 605 WEST AVENUE NORWALK, CT, 06850 | 2032991572 | 2038531110 | 2 | 061557487 | 1386794980 | SITE-AMBSU |

☒ None of the above

Submit Clinical Request

ⓘ The site you have selected is an outpatient hospital which may not be considered medically necessary. Do any of the following apply to this request?

Ambulatory Surgical Center (ASC) Accessibility*

Ambulatory Surgical Center (ASC) Accessibility*

Cardiovascular disease*

Pulmonary disease*

Miscellaneous organ disease*

Bleeding or clotting disorders*

Pre-op considerations*

Cognitive status or developmental stage warrant use of hospital outpatient department

Uncontrolled diabetes with*

ADDITIONAL COMMENTS
REASON FOR SELECTION INCORRECT
ONCE SUBMITTED, THIS REQUEST CAN NO LONGER BE EDITED, YOU CAN CONTACT US AT 1-866-889-8054 TO MAKE THE CORRECTION.

Print

Cancel

Site Selection Outcomes

- + Depending on what is selected:
- + You will be prompted to click submit to continue with the review of the procedure

OR

- + You will be notified that the requested procedure does not require site review and will be approved.

Submit Clinical Request

This service is not eligible for coverage if rendered at an outpatient hospital.

Please select Submit button to continue to review of requested procedure(s).

☐ Exit the review

****PLEASE NOTE, IF YOU EXIT THE REVIEW, YOU WILL HAVE AN OPPORTUNITY TO ADD ADDITIONAL COMMENTS BEFORE THE CASE IS SENT TO CLINICAL REVIEW. ADDITIONALLY, IF YOU ANSWERED A CLINICAL QUESTION INCORRECTLY WHICH CAN NO LONGER BE EDITED, YOU CAN CONTACT US AT 1-866-889-8054 TO MAKE THE CORRECTION.**

Submit Clinical Request

The selected facility does not require a site review for the requested procedure(s). This request will be approved. You can save the reference ID as validation of your request.

Please click submit to complete this request submission.

Site Selection Outcomes

- + If an outpatient hospital was selected to perform a service that was approved (deemed medically necessary), you may get a denial for the case even though services were deemed medically necessary.
- + By contacting EviCore and selecting an Ambulatory Surgical Center (ASC) / Freestanding facility, the Site of Care (SOC) can be approved.



Though the services have been deemed *medically necessary*, the request is denied, as the facility is not a preferred site.

| Procedure | Description | Quantity Approved | Modifier (if applicable) |
|-----------|-------------|----------------------|-----------------------------|
| | | | |

Service provider: SiteName
Date(s) of service: DateOfService

Coverage Decision For: {SiteName} - This facility has been denied.

Provider Resources

Client and Provider Services

For eligibility issues (member or provider not found in system) or transactional authorization related issues requiring research.

- + Email: clientservices@EviCore.com
- + 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.
- + **Lisa Mekkelsen (Oregon)**
- + Email: lisa.mekkelsen@EviCore.com
- + Phone: **843-949-0022**.

Call Center

Call **888-835-1712**, representatives are available from 7 a.m. to 7 p.m. ET

Contact EviCore's Dedicated Teams



Provider Resource Website

EviCore's Provider Engagement team maintains provider resource pages that contain client- and solution-specific educational materials 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 [Provider Resources](#)
 - + Contact our Client and Provider Services team via email at ClientServices@EviCore.com or by phone at **1-800-646-0418 (option 4)**

Additional insight on Site of Care:

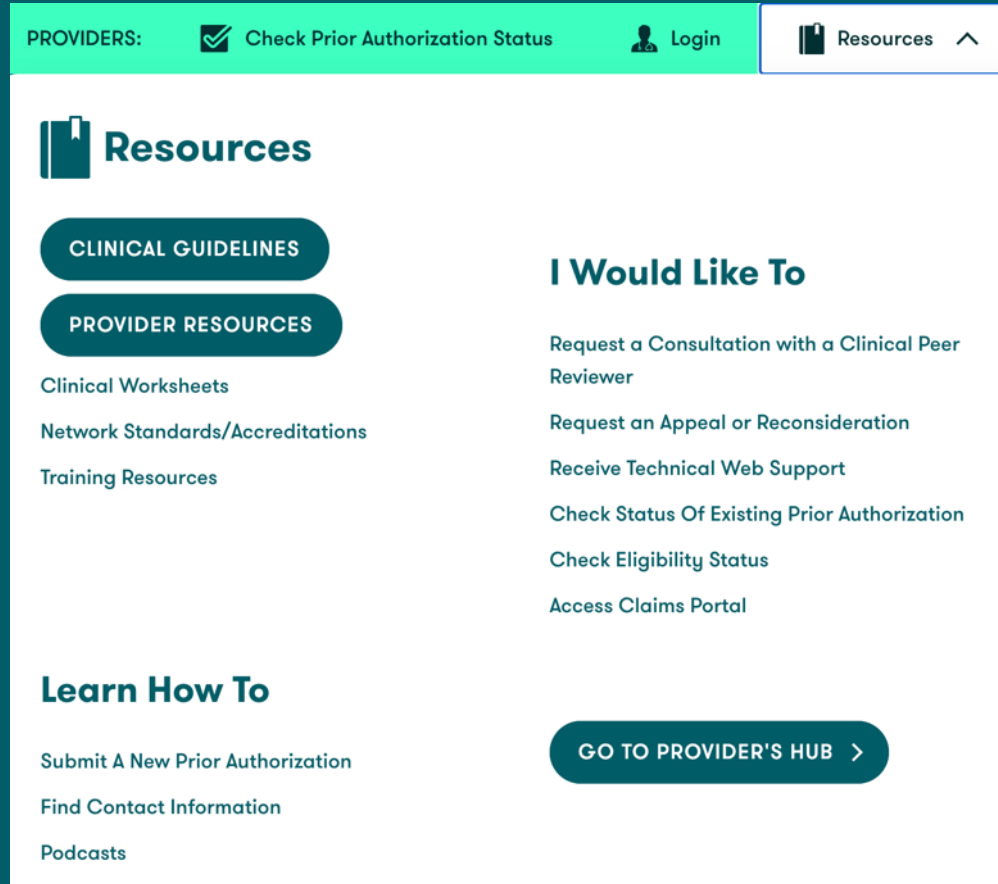
- + [Ask EviCore: Site of Care | EviCore by Evernorth](#)



EviCore Provider's Hub

Providers and staff can access important tools and resources at EviCore.com

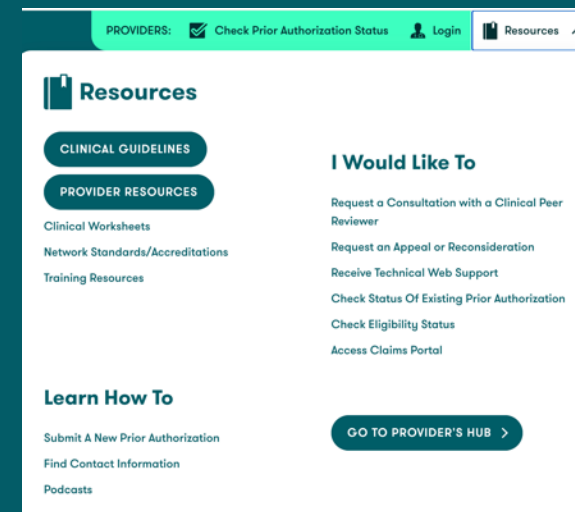
1. Open the **Resources** menu in the top right of the browser
2. Select **Training Resources** to find resources such as check lists, solution FAQs, etc., or **GO TO PROVIDERS HUB** to access the provider portal and more



Clinical Guidelines

How do I access EviCore's clinical guidelines?

1. Open the **Resources** menu in the top right of the browser
2. Select **Clinical Guidelines**
3. Select the solution/program associated with the requested guidelines
4. Search by health plan name to view clinical guidelines
5. If you would like to view all guidelines, type in "EviCore" as your health plan



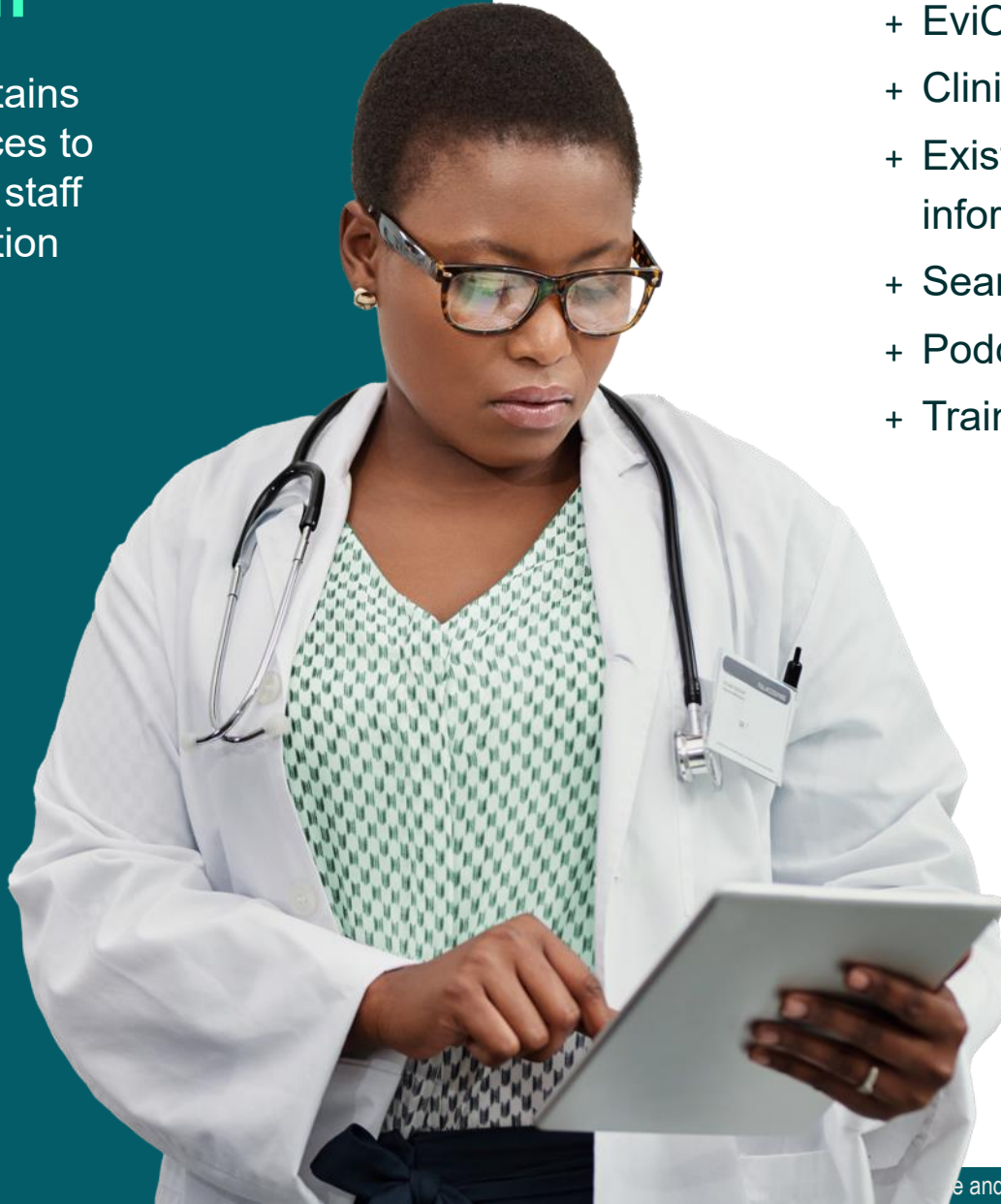
EviCore coverage policies include background and supporting information and citations for sources used to develop the policy. Some clinical policies may have a supplemental literature summary available which will provide additional commentary regarding clinical benefits and harms to the patient population being served. Additional literature summaries may be accessed by selecting 'Supplemental Information' and then entering "EviCore by Evernorth" in the search by health plan function.

Search by Health Plan ... 

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 **Provider Resource Review Forum** to learn how to navigate the website and understand all the resources available on the Provider's Hub.



Learn how to access:

- + EviCore's evidence-based clinical guidelines
- + Clinical worksheets
- + Existing prior authorization request status information
- + Search for contact information
- + Podcasts & insights
- + Training resources

Register for a Provider Resource Review Forum:

Provider's Hub > Scroll down to EviCore
Provider Orientation Session Registrations
> Upcoming

Contacts and Helpful Links

Web-Based Services

portal.support@EviCore.com
800-646-0418, option 2

Client Provider Operations

clientservices@EviCore.com

Provider Engagement:

Lisa Mekkelsen,
Regional Provider Engagement Manager

Lisa.Mekkelsen@evicore.com
843-949-0022

Worksheets

EviCore.com/provider/online-forms

Clinical Guidelines

EviCore.com/provider/clinical-guidelines

Request a Clinical Consultation

EviCore.com





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Thank You