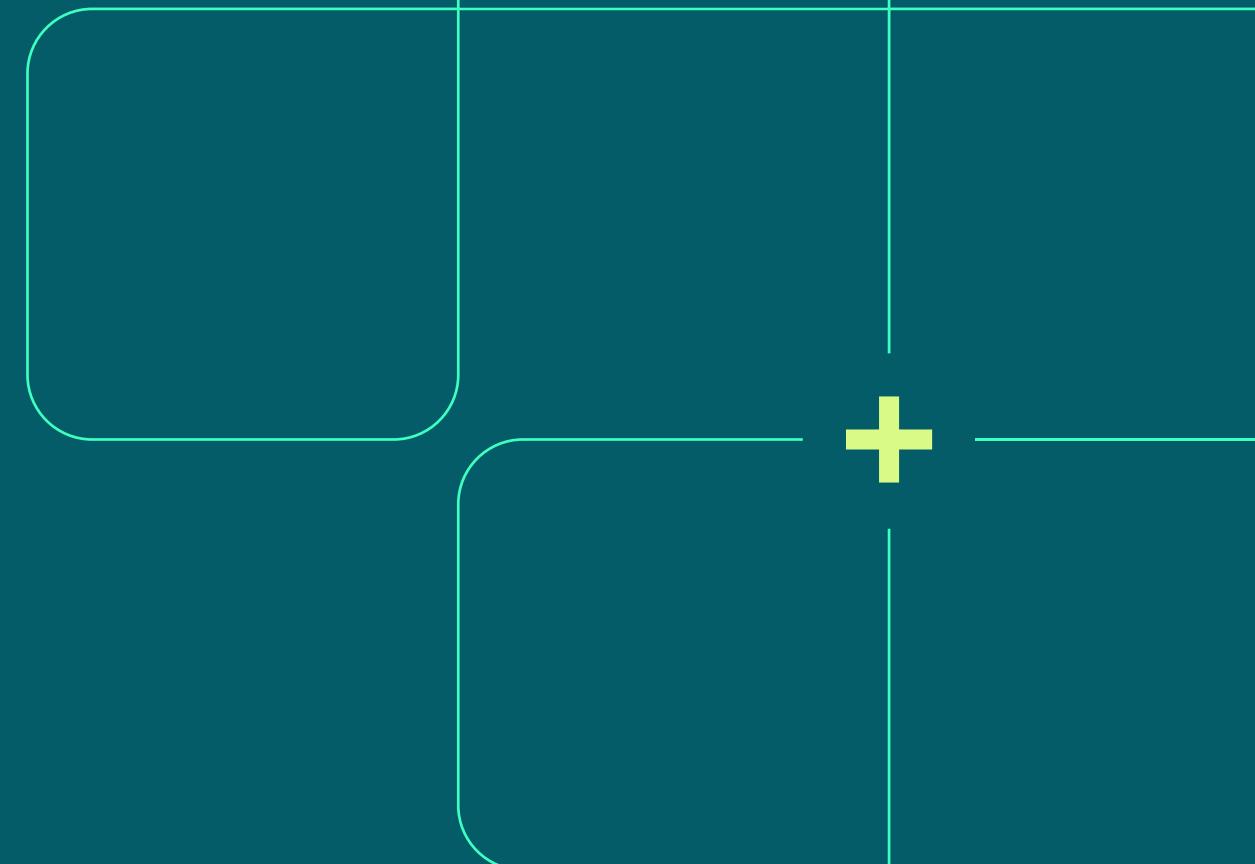


RADIATION ONCOLOGY MANAGEMENT

HealthSpring (Medicare Advantage)

Provider Orientation Presentation



EviCore
By EVERNORTH

HealthSpring

EviCore by Evernorth (EviCore) manages prior authorization requests for Radiation Oncology services for HealthSpring members

Prior authorization applies to the following services:

- + Outpatient
- + Non-emergent treatment

Prior authorization does NOT apply to services performed in:

- + Emergency Room Services
- + 23 Hour Observations
- + Inpatient stays



Providers should verify member eligibility and benefits on the secured provider log-in section at: [Health care Providers | HealthSpring](#)

How to Determine Member Benefits and Eligibility

Resources	Contact
Healthspring Customer Service	877-705-3621
Healthspring Provider Portal	<u>Health care Providers HealthSpring</u>
EviCore Provider Portal	<u>Provider's Hub EviCore by Evernorth</u> > choose the Eligibility Lookup feature in the top banner (login required)
EviCore Intake Team	866.666.4452 (7:00 a.m. to 7:00 p.m. eastern time)



Radiation Oncology Solution

A Holistic Treatment Plan Review that relies on information about the patient's unique presentation and physician's intended treatment plan to authorize all services from the initial simulation through the delivery of the last fraction of radiation.

- + Providers specify a diagnosis rather than request individual CPT codes
- + Diagnosis and treatment plan compared to the evidence-based guidelines developed by our Medical Advisory Board.
- + If request is authorized/covered or partially authorized/covered, then the treatment technique and number of fractions will be provided.
- + For questions about specific CPT codes that are generally included with each episode of care, please reference the EviCore Radiation Therapy Coding Guidelines located online: [Clinical Guidelines | EviCore by Evernorth](#)
- + Correct coding guidelines are based on ASTRO/ACR Radiation Therapy coding resources



If clinical information is needed, please be able to supply the following information:

- + Patient's clinical presentation and consultation notes
- + Diagnosis Code(s)
- + Site of Treatment and/or Cancer type
- + Technique to be used, and start date of treatment (not simulation)
- + Number of phases and number of fractions
- + Radiation prescription and whether IGRT will be needed
- + Recent Imaging if applicable
- + Disease-Specific Clinical Information:
 - ✓ Stage of disease
 - ✓ Histopathology
 - ✓ Comorbidities
 - ✓ Patient risk factors



Hold process | Share Documentation to Support Medical Necessity

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 notification 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.



There are three ways to share the requested information to EviCore for review:

- + EviCore will notify providers telephonically and in writing before a denial decision is issued on Medicare cases
- + Additional clinical information must be submitted to EviCore in advance of the due date referenced
- + Additional clinical information should be submitted to EviCore for consideration per the instructions received, clinical can be **uploaded** directly into the case via the provider portal at www.eviCore.com
- + Alternatively, providers can choose to request a **Pre-Decision Clinical Consultation** instead of submitting additional clinical information. This consultation can be scheduled via the EviCore portal (see the P2P Scheduling Tool in the appendix for further instruction).
- + The Pre-Decision Clinical Consultation must occur prior to the due date referenced
- + If the additional clinical information is faxed/uploaded, that clinical is what is used for the review and determination. The case is not held further for a Pre-Decision Clinical Consultation, even if the due date has not yet lapsed
- + Once the determination is made, notifications will go out to the provider and member, and status will be available on www.eviCore.com

Prior Authorization Outcomes, Special Considerations, and Post Decision Options



Outcomes | Approvals and Denials

- + Approved requests are typically processed in two business days after receipt of all necessary clinical information.
- + Number of approved fractions of the specific technique with/without IGRT will be included in the approval notice.
- + Denied request communications will include:
 - + Rationale and guidelines relied upon
 - + Post decision options
- + Care must be administered at an in-network facility if the patient does not have out-of-network (OON) benefits.
- + Decision communications will be shared via e-notification (default) or faxed to the ordering provider and faxed rendering facility/provider.
- + Decision information can be printed or saved on demand from the EviCore portal.
- + The member will receive the letter in the mail.



Post Decision Options

Reconsiderations

- + Medicare does not allow reconsiderations.

Clinical Consultations

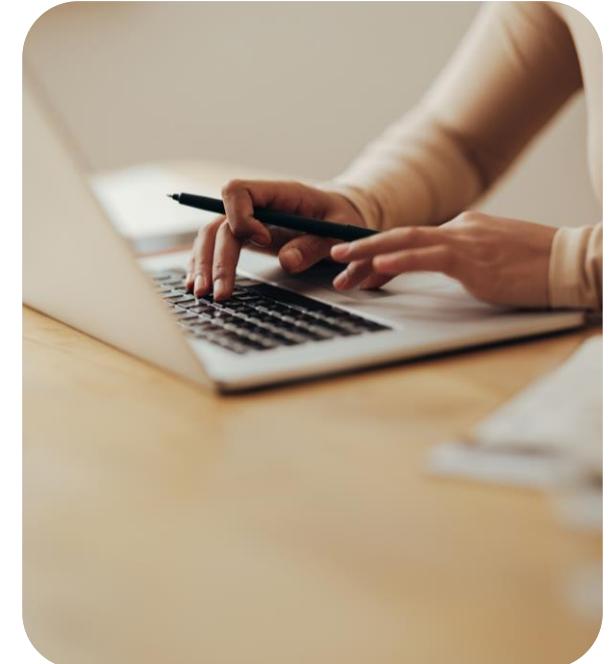
- + If a request requires further clinical review, we welcome requests for a clinical consultation with an EviCore medical director.

Please note: Clinical Consultations that occur on already denied cases will be consultative only. EviCore is not delegated to change initial determinations on Medicare cases.

- + Portal users can schedule a clinical consultation, on behalf of the treating provider, directly on the EviCore portal (see the P2P Scheduling Tool in the appendix for further instruction).
- + Physicians, nurse practitioners, and physician assistants can request a clinical consultation by visiting www.eviCore.com/provider/request-a-clinical-consultation.

Appeals

- + Appeals need to be submitted to HealthSpring within 60 days of the initial determination.
- + Please follow the appeal instructions referenced in the denial letter.



Special Circumstances

Retrospective Authorization Requests

- + Authorization must be provided in advance of the service, unless the service is urgent or there are extenuating circumstances. In those cases, retrospective requests must be submitted within 1 business day from the date of service.
- + Retrospective requests are reviewed for urgency and for medical necessity.

Urgent Prior Authorization Requests

- + Medically urgent outpatient procedures must meet the National Committee for Quality Assurance's definition of medical urgency requests. To be considered urgent, the patient must have conditions that are a risk to his or her life, health, or ability to regain maximum function, or have severe pain that requires a medically urgent procedure.
- + Urgent requests will be reviewed within 24 hours.

Updating an Authorization

- + To avoid claim denials, please contact EviCore to update an existing approved authorization if needed.





Special Circumstances | Authorization Updates

We understand treatment plans can sometimes change.

- If updates are needed for an existing authorization, providers should contact EviCore by phone.
- **The following updates will require contacting EviCore:**
 - Modification to the technique(s)
 - Addition of Image Guided Radiation Therapy (IGRT)
 - Additional treatment fractions or phases
 - Change to the cancer type (or non-cancerous) indicated during the case build process
 - Modification to the authorized timespan
- **Changes in treatment plan** will require another Medical Necessity review on a new authorization. If approved, the original case will be withdrawn.
- Claims payment may be impacted if these updates are not communicated to EviCore. The billed services should align with the requested and approved treatment plan.
- **If the authorization time span will not cover the entirety of the treatment**, EviCore should be notified before the impacted services are billed by the provider.

EviCore's Provider Portal

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

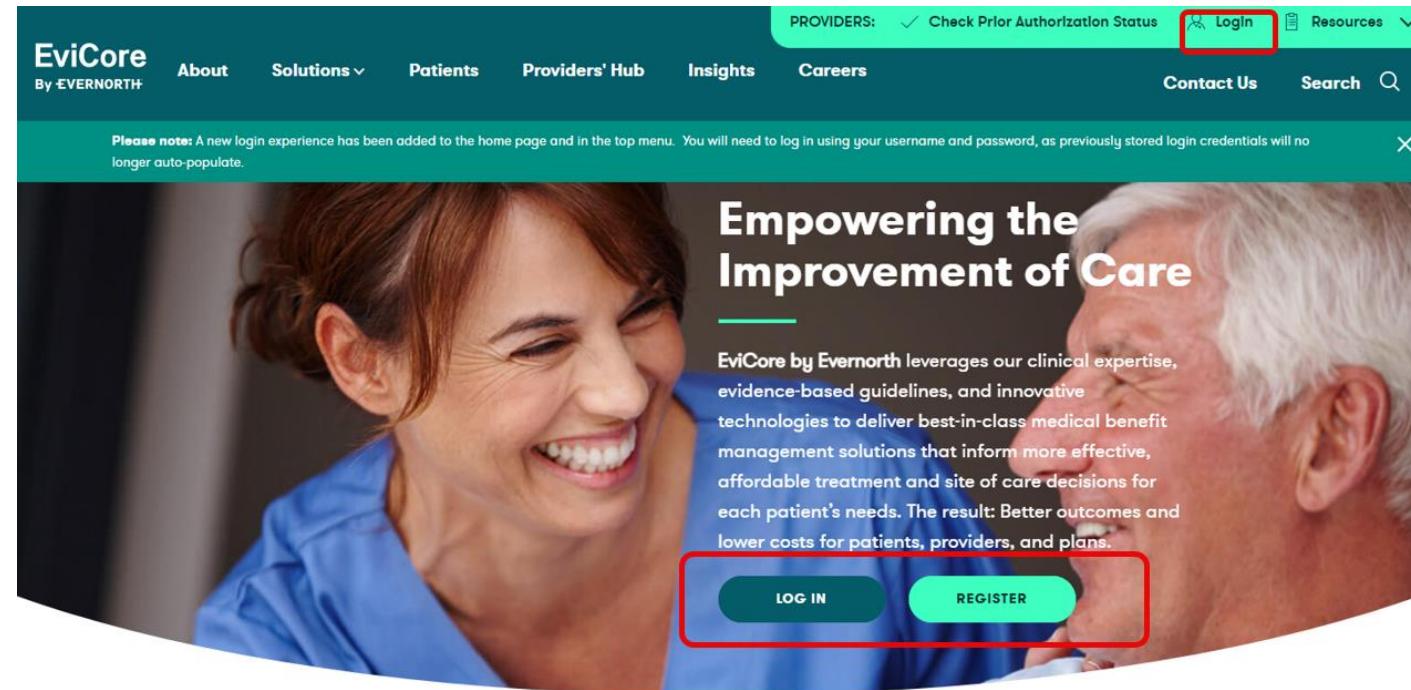
[Homepage | EviCore by Evernorth](#)

- + Already a user?

[Log in](#) with User ID & Password.

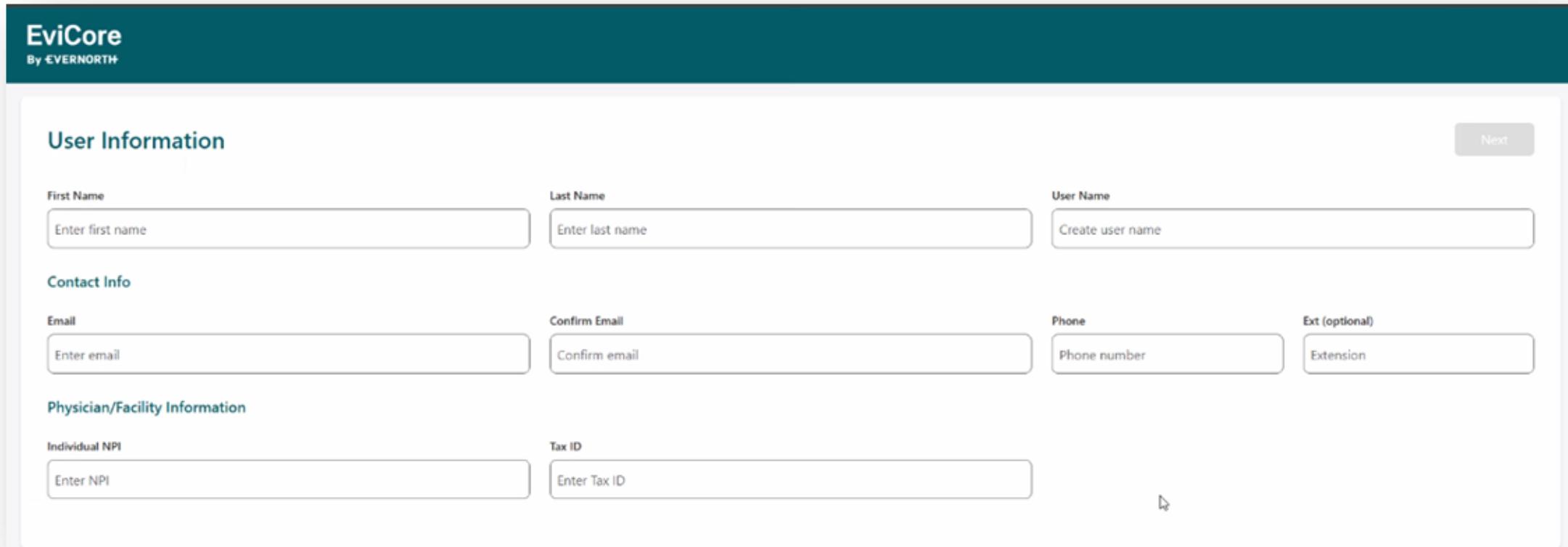
- + Don't have an account?

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/Registering for an EviCore Provider Portal Account



The screenshot shows the 'User Information' step of a registration form. The form is divided into sections: 'User Information' (First Name, Last Name, User Name), 'Contact Info' (Email, Confirm Email, Phone, Extension), and 'Physician/Facility Information' (Individual NPI, Tax ID). Each section contains an input field with a placeholder text. A 'Next' button is located in the top right corner of the form area.

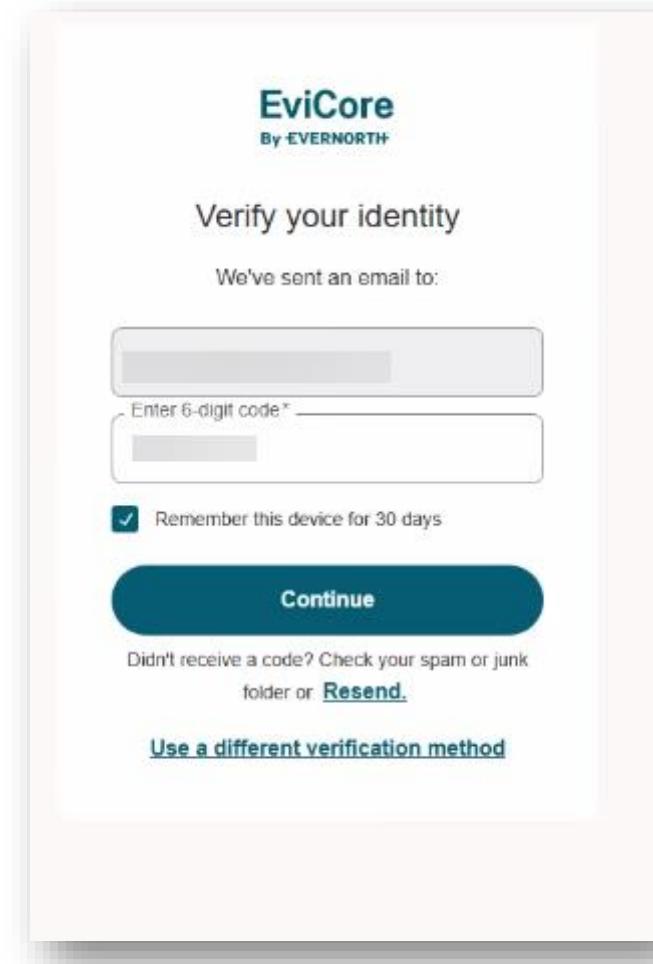
Section	Field	Description	
User Information	First Name	Enter first name	
	Last Name	Enter last name	
	User Name	Create user name	
Contact Info			
Email	Enter email		
Confirm Email	Confirm email		
Phone	Phone number		
Ext (optional)	Extension		
Physician/Facility Information			
Individual NPI	Enter NPI		
Tax ID	Enter Tax ID		

- Complete the User Information section in full and **Submit Registration**.
- You will immediately be sent an email with a link to verify your account and 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.**
- Once you select **Send PIN**, 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.



Building a Case on EviCore's Provider Portal



Request an Authorization

Request an Authorization

Please select a Health Plan and Program below to build your request.

Select a Health Plan

Select a Program

Continue

You will see important announcements here.

Please see our Video Resources for self-service Universal Dashboard training.

Request An Authorization

Worklist

Auth Lookup

User Access

REGISTER NOW

Video Resources

Universal Provider Dashboard

EviCore Unified Provider Experience (UPX) - Dashboard Training

Tutorial: CareCore Portal Registration

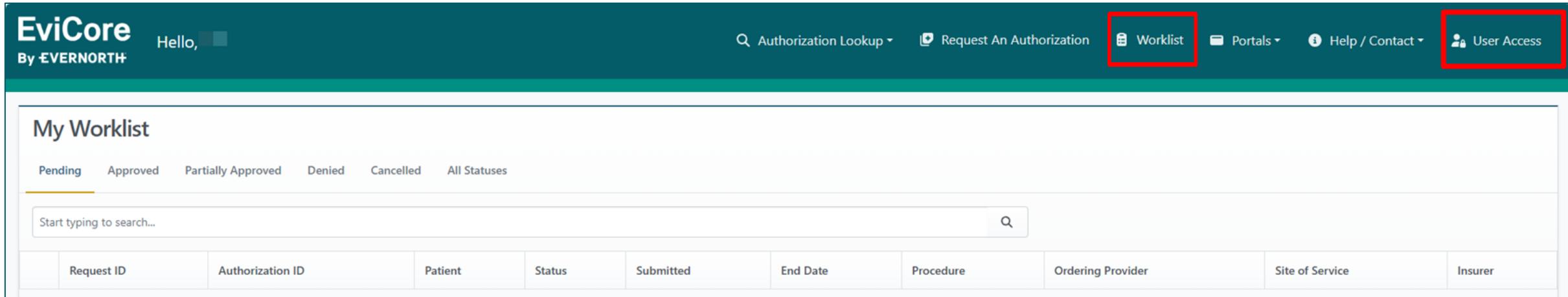
Web Registration Tutorial - CareCore National Portal

SPECIALTY THERAPY PORTAL OVERVIEW

Specialty Therapy Provider Portal Overview

You can request an authorization by clicking on “Request an Authorization.” First select the health plan and then select the program. Click “Continue” and you will be directed to the correct portal to initiate your request.

Provider Shared Worklist



My Worklist

Pending Approved Partially Approved Denied Cancelled All Statuses

Start typing to search...

Request ID	Authorization ID	Patient	Status	Submitted	End Date	Procedure	Ordering Provider	Site of Service	Insurer
------------	------------------	---------	--------	-----------	----------	-----------	-------------------	-----------------	---------

David Gates will have access to your worklist

Give access to your worklist

Use this form to give users access to your worklist

User ID Email Allow access

35 people have access to your worklist. [View List](#)

To allow others to view your worklist while you are out of the office you can add them by selecting “User Access” and add their User ID and Email Address. They must have an EviCore account to be added.

Case Build and Submission

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account
------	-----------------------	----------------------	--------------------	------------------------	------------------------------------	---------------------------------------	-----------	---------------------

Add Your Contact Info

Provider's Name:* [?]

Who to Contact:* [?]

Fax:* [?]

Phone:* [?]

Ext.: [?]

Cell Phone:

Email:

Receive notification of case status changes

Please review the fax and phone numbers presented for accuracy. Change as necessary and click "Confirm Fax and Continue" to confirm they are correct. Changes apply only to this specific request. If you wish the change to be permanent, please contact the Health Plan.

After selecting **Radiation Oncology**, the referring provider, and the health plan, please

- In the **Who to Contact** field, enter the appropriate information for the point of contact individual
- Provider name, fax and phone will pre-populate, edit as necessary

BACK

CONFIRM FAX AND CONTINUE

EviCore

By EVERNORTH

20

Case Build and Submission

Has the patient received their first dose of radiation treatment?

Yes No

On what date did the patient receive their first dose of radiation treatment for this episode (MM/DD/20YY)?

Submit

Requested Service + Diagnosis

This procedure will be performed on [REDACTED] [CHANGE](#)

Radiation Therapy Procedures

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

RCADRE
RCANAL
RCBILLE
RCBLAD
RCBONE
RCBRAI
RCBREA
RCCERV
RCCNSL
RCCNSN
RCENDO
RCESOP
RCGACA
RCGALL
RCHDKL
RCHENE
RCHEPA

procedure code or type of service? [Click here](#)

Try Diagnosis Code (Lookup by Code or Description)

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

Secondary Diagnosis Code (Lookup by Code or Description is optional for Radiation Therapy)

[LOOKUP](#)

Change Procedure or Primary Diagnosis
Change Secondary Diagnosis

[BACK](#) [CONTINUE](#)

[Click here for help](#)

Requested Service + Diagnosis

Confirm your service selection.

Treatment Start: 7/2/2020
CPT Code: RCADRE
Description: ADRENAL CANCER
Primary Diagnosis Code: C17.2
Primary Diagnosis: Malignant neoplasm of ileum
Secondary Diagnosis Code:
Secondary Diagnosis:

- + You will be asked the **expected treatment start date**, the date of the member's **initial radiation therapy treatment**. The case will be backdated to cover simulation and treatment planning.
- + You will then be asked to enter the **member information** (patient ID number, date of birth and last name), click **Eligibility Lookup** and verify the member.
- + Next, select the **cancer type/body part** being treated (RC code) and **diagnosis code** associated with the member's cancer type

Clinical Certification Requests

Example Questions and “Finish Later” function

- **Clinical Certification** questions will populate based on the information provided
- You can save your request and finish it later if needed
(**Note:** Make sure to complete (finish) the case before you leave for the day.)
- Select **Certification Requests in Progress** to resume a saved request (this function is **not** available for single sign on (SSO) users)

EviCore
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Home Certification Summary Authorization Lookup Eligibility Lookup Clinical Certification **Certification Requests In Progress** MSM Perf. Su

Tuesday, December 11 PM

Certification Requests In Progress

List of paused cases will be present here.

No pending cases for user.

Finish Later

Did you know?
You can save a certification request to finish later.

New: Now you can also edit your responses to clinical questions prior to case submission by clicking the link for the related question.

Clinical Certification Requests and Sample Questions

Proceed to Clinical Information

ⓘ Does the patient have distant metastases (stage M1) (i.e. to brain, lung, liver, bone)?

Yes No

ⓘ Where will treatment be directed?

Bilateral breast (treated concurrently)
 Left breast
 Right breast

ⓘ Will the patient receive concurrent chemotherapy?

Yes No

ⓘ Will daily image-guided radiation therapy (IGRT) be used for phase I?

Yes No

ⓘ What is the treatment intent?

Pre-operative (neo-adjuvant)
 Definitive (No surgery planned)
 Post-operative (adjuvant)
 Palliative (for relief of symptoms)

ⓘ What is the T stage?



ⓘ What is the N stage?



SUBMIT

- + **Clinical Certification** questions may populate based upon the information provided in previous questions.
- + **Physician worksheets** located on www.EviCore.com can be used as a guide and will help prepare the requestor for the questions that are presented.

Request for Clinical Upload | Medical Information Checklist

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account
------	-----------------------	----------------------	--------------------	------------------------	------------------------------------	---------------------------------------	-----------	---------------------

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.

Required Medical information checklist

Browse for file to upload (max size 25MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

No file chosen
 No file chosen

UPLOAD

EviCore
By EVERNORTH

Required Medical Information Check List

Radiation Therapy Program

- Please fill out the appropriate Clinical Worksheet/Guide
- Site of treatment and/or cancer type
- Radiation Prescription
- Will IGRT be needed?
- Reason for treatment
- Staging of the cancer, if applicable
- Technique to be used, and start date which should be the first day of treatment, not simulation
- Number of phases of treatment if more than one, and number of fractions
- Diagnosis codes
- Pertinent clinical information to substantiate medical necessity for requested treatment plan
- Radiation Oncologists consultation note
- Recent imaging if applicable

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.

Tips:

- + 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 \(evicore.com\)](#)

EviCore

By EVERNORTH
Public Information

Summary Screen

REQUESTED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions)		
APPROVED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions) As Medically Necessary: Special radiation dosimetry (8 x 77331)		
DENIED		
DENIAL RATIONALE		
 Provider Name: [REDACTED] Provider Address: [REDACTED]		
Contact: [REDACTED] Phone Number: [REDACTED] Fax Number: [REDACTED]		
 Patient Name: [REDACTED] Insurance Carrier: [REDACTED]		
 Patient Id: [REDACTED]		
 Site Name: [REDACTED] Site Address: [REDACTED]		
 Site ID: [REDACTED]		
Primary Diagnosis Code: R68.89 Secondary Diagnosis Code: Date of Service: 6/1/2020 CPT Code: RCBREA Authorization Number: Review Date: 5/20/2020 10:41:09 AM Expiration Date: 11/16/2020 Status:	 Description: Other general symptoms and signs Description: Description: Breast Cancer	
 REQUESTED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions)		
 APPROVED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions) As Medically Necessary: Special radiation dosimetry (8 x 77331)		
 DENIED		
 DENIAL RATIONALE		
 REQUESTED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions)		
 APPROVED Phase 1: Complex isodose plan25 Fractions (treatment sessions) Phase 2: Electrons/Photons5 Fractions (treatment sessions) As Medically Necessary: Special radiation dosimetry (8 x 77331)		
 DENIED		
 DENIAL RATIONALE		
CANCEL	PRINT	CONTINUE

- + If your request is authorized during the initial submission, you can print the summary of the request for your records.
- + Review the details of the request and select **CONTINUE**.

Ongoing sessions for Web Portal Training

- + Provides step-by-step guidance on submitting requests through both the EviCore CareCore National platform and EviCore MedSolutions platform.
- + Includes Portal registration, Case lookup, and Scheduling Peer to Peer Consultations

Register for Provider sessions:

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



EviCore Online Provider Resources Review Forum

The EviCore website contains multiple tools and resources to assist providers and their staff with the prior authorization process.

We invite you to attend an **Intro to EviCore Online Resources** to learn how to navigate EviCore's web site and understand all the non-health plan specific resources available on the Provider's Hub.

Included is a broad overview of registering and using the EviCore portal. This is great for those new to EviCore.com and the prior authorization process.

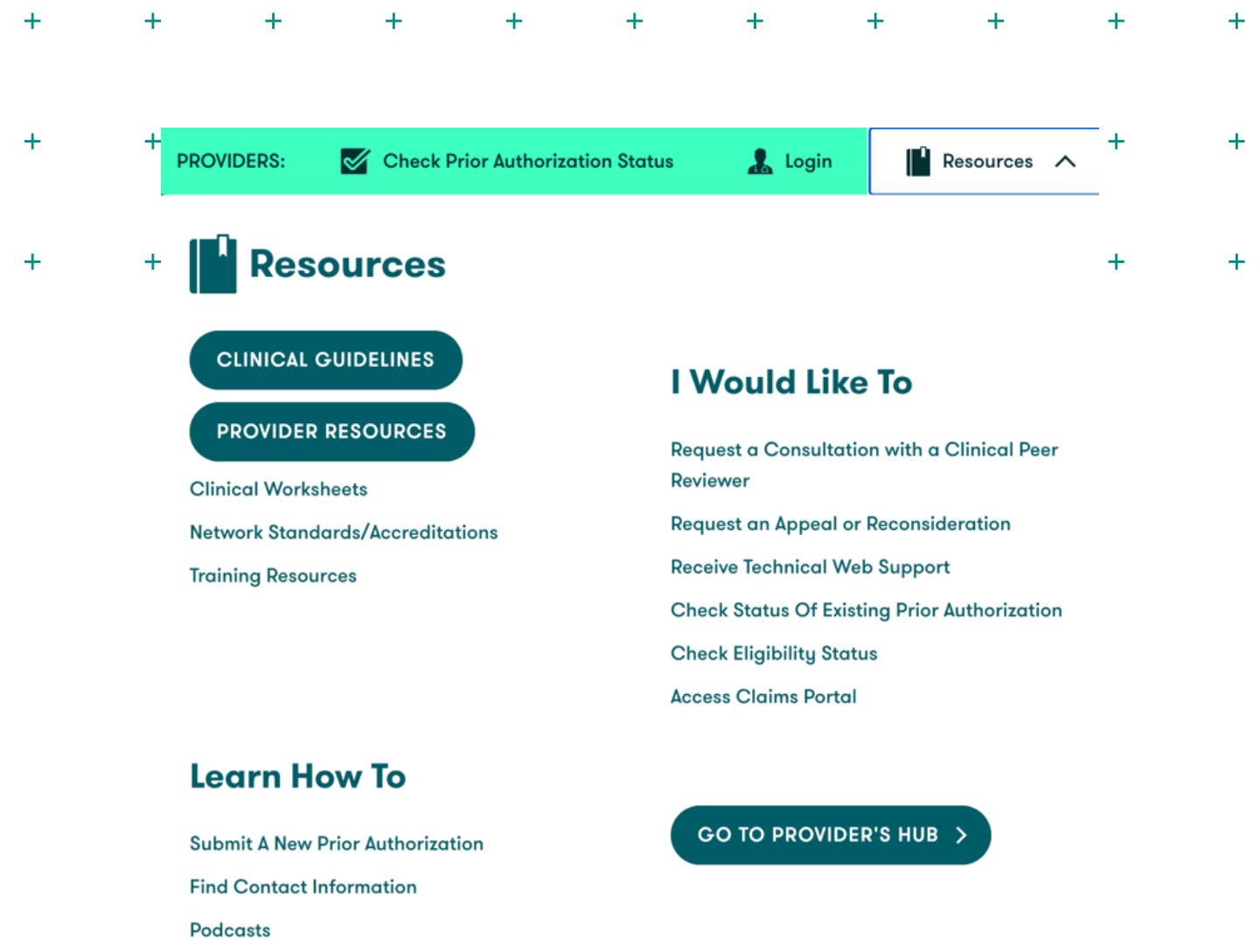
Provider Resources



Quick Reference

At the top right corner of any EviCore.com webpage, click the drop down to display quick links to a variety of resources.

- + Clinical Guidelines
- + Health Plan Specific “Provider Resources”
- + Worksheets for some programs
- + Click “Go to Provider’s Hub” to:
 - Log into the provider portal
 - Find Training resources not specific to any health plan.
 - Register for provider Training Webinars
 - Find Contact Information
 - Sign up for our provider Newsletter



The screenshot shows a dropdown menu from the EviCore.com provider resources page. The menu includes a header with 'PROVIDERS', a 'Check Prior Authorization Status' button, a 'Login' link, and a 'Resources' dropdown menu. The 'Resources' menu is expanded, showing sections for 'CLINICAL GUIDELINES' and 'PROVIDER RESOURCES'. Under 'PROVIDER RESOURCES', there are links for 'Clinical Worksheets', 'Network Standards/Accreditations', and 'Training Resources'. To the right of the menu, there are sections for 'I Would Like To' (with links for consultation, appeal, technical support, and status checks) and 'Learn How To' (with links for prior authorization, contact info, and podcasts). A 'GO TO PROVIDER'S HUB >' button is also present.

PROVIDERS: Check Prior Authorization Status [Login](#) [Resources](#)

Resources

[CLINICAL GUIDELINES](#)

[PROVIDER RESOURCES](#)

[Clinical Worksheets](#)

[Network Standards/Accreditations](#)

[Training Resources](#)

I Would Like To

[Request a Consultation with a Clinical Peer Reviewer](#)

[Request an Appeal or Reconsideration](#)

[Receive Technical Web Support](#)

[Check Status Of Existing Prior Authorization](#)

[Check Eligibility Status](#)

[Access Claims Portal](#)

Learn How To

[Submit A New Prior Authorization](#)

[Find Contact Information](#)

[Podcasts](#)

[GO TO PROVIDER'S HUB >](#)

Contact EviCore's Dedicated Teams



Provider Services and Portal Support

- Live chat
- Clientservices@evicore.com
- Phone: **800-646-0418**

Provider Engagement

You can contact your Provider Engagement Representative by visiting the [Provider's Hub](#) and viewing the Provider Engagement Territory Map in the Training Resources.

Call Center/Intake Center

Call **866.666.4452**. Representatives are available from 7 a.m. to 7 p.m. local time.

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.

To access Health Plan Specific provider resources, visit

[Provider Resources | EviCore by Evernorth](#)

- + Frequently asked questions
- + Quick reference guides
- + Provider training
- + CPT code list



Access HealthSpring's provider resources at:
[Health care Providers | HealthSpring](#)

Clinical Worksheets

We highly recommend using the updated radiation oncology worksheets located on EviCore.com.

1. Open the **Resources** menu in the top right of the browser on any EviCore.com page
2. Select **Clinical Worksheets** located right under the 'Provider Resources' button
3. Select the solution/program associated with the requested guidelines
4. Search by health plan name
5. If you would like to view all worksheets, type in "EviCore by Evernorth" 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 ...



Clinical Guidelines

How do I access EviCore's clinical guidelines?

1. Open the **Resources** menu in the top right of the browser on any EviCore.com page
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 by Evernorth” as your health plan

PROVIDERS: Check Prior Authorization Status  Login  Resources 

Resources

CLINICAL GUIDELINES

PROVIDER RESOURCES

Clinical Worksheets

Network Standards/Accreditations

Training Resources

I Would Like To

Request a Consultation with a Clinical Peer Reviewer

Request an Appeal or Reconsideration

Receive Technical Web Support

Check Status Of Existing Prior Authorization

Check Eligibility Status

Access Claims Portal

Learn How To

Submit A New Prior Authorization

Find Contact Information

Podcasts

[GO TO PROVIDER'S HUB >](#)



Clinical Information for Medical Necessity Review



Diversity, Equity, & Inclusion Statement



Supplemental Information



Cardiac & Vascular Intervention



Cardiovascular & Radiology



Durable Medical Equipment



Embryo Benefit Protection®



FamilyPath™ Fertility



Gastroenterology



Laboratory Management



Medical Drug Management



Medical Oncology



Musculoskeletal: Advanced Procedures



Musculoskeletal: Therapies



Post-Acute Care

Contacts and Helpful Links

Client & Provider Operations, Portal support, Network support, etc.

clientservices@evicore.com

Find Contact information

[Contact Us | EviCore by Evernorth](#)

Regional Provider Engagement Manager team

[Provider Engagement Territory Map](#)

Clinical Guidelines

[Clinical Guidelines | EviCore by Evernorth](#)

Worksheets for some solutions

[Clinical Worksheets & Online Forms | EviCore by Evernorth](#)

Request a Clinical Consultation

[Request a Peer-to-Peer Discussion | EviCore by Evernorth](#)





Thank you

Online Peer-to-Peer Scheduling Tool

Schedule a P2P

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
4. Note carefully any messaging that displays.*

Authorization Lookup

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

P2P AVAILABILITY 

P2P AVAILABILITY 

Authorization Lookup

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

ALL POST DECISION OPTIONS 

Post-decision options for this case have been exhausted or are not delegated to eviCore. You may continue to schedule a Peer to Peer discussion for this case but it will be considered consultative only and the original decision cannot be modified.

*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.

Schedule a P2P

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.

New P2P Request

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

Member Date of Birth:

+ Add Another Case

Lookup Cases >

New P2P Request

Case Ref #: ! Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.

Remove P2P Eligible

Member Information

Name
DOB
State
Health Plan
Member ID

Case P2P Information

Episode ID	2020-11-11
P2P Valid Until	2020-11-11
Modality	MSK Spine Surgery
Level of Review	Reconsideration P2P
System Name	ImageOne

Continue

Schedule a P2P

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).
4. Click on any **green checkmark** to deselect that option, then click **Continue**.

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 >

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

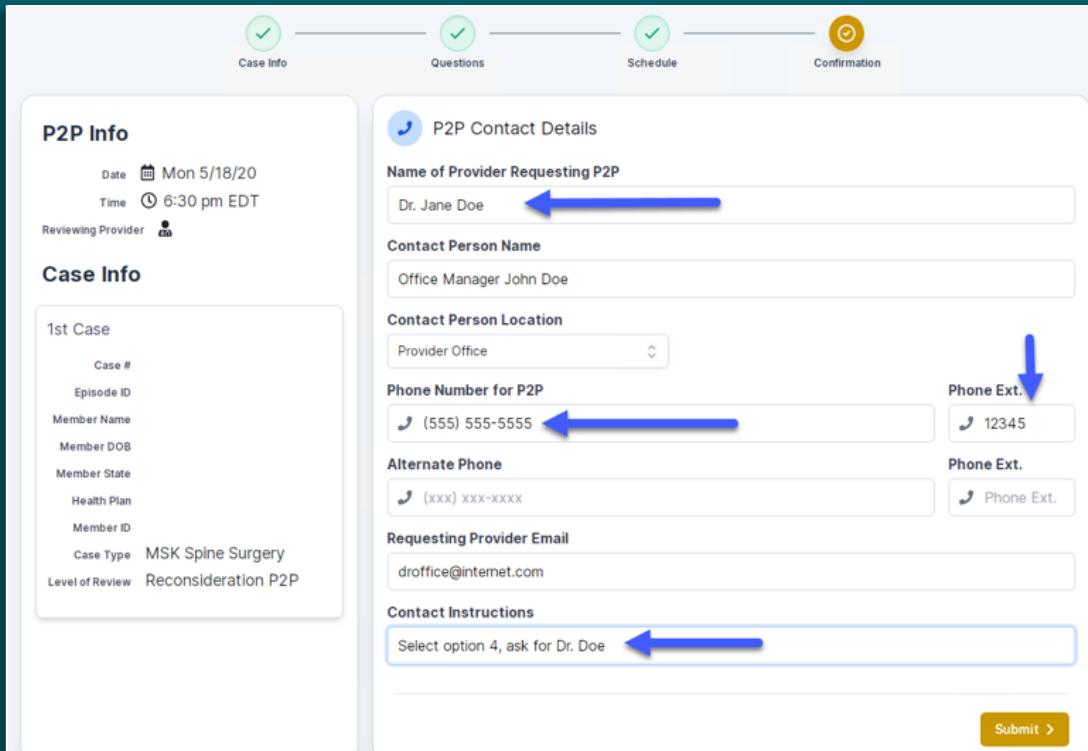
Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
6:15 pm EDT	-	-	-	-	-	-
6:30 pm EDT	-	-	-	-	-	-
6:45 pm EDT	-	-	-	-	-	-

1st Priority by Skill

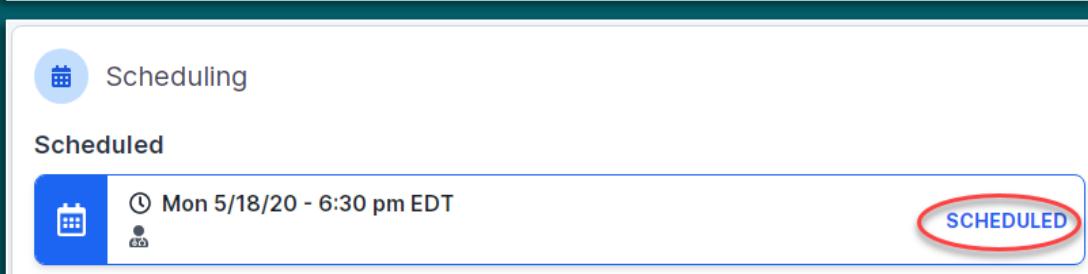
Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
3:30 pm EDT	2:00 pm EDT	4:15 pm EDT	3:15 pm EDT	-	-	-
3:45 pm EDT	2:15 pm EDT	4:30 pm EDT	3:30 pm EDT	-	-	-
4:00 pm EDT	2:30 pm EDT	4:45 pm EDT	3:45 pm EDT	-	-	-
4:15 pm EDT	2:45 pm EDT	5:00 pm EDT	4:00 pm EDT	-	-	-
Show more...	Show more...	Show more...	Show more...	-	-	-

Schedule a P2P

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.



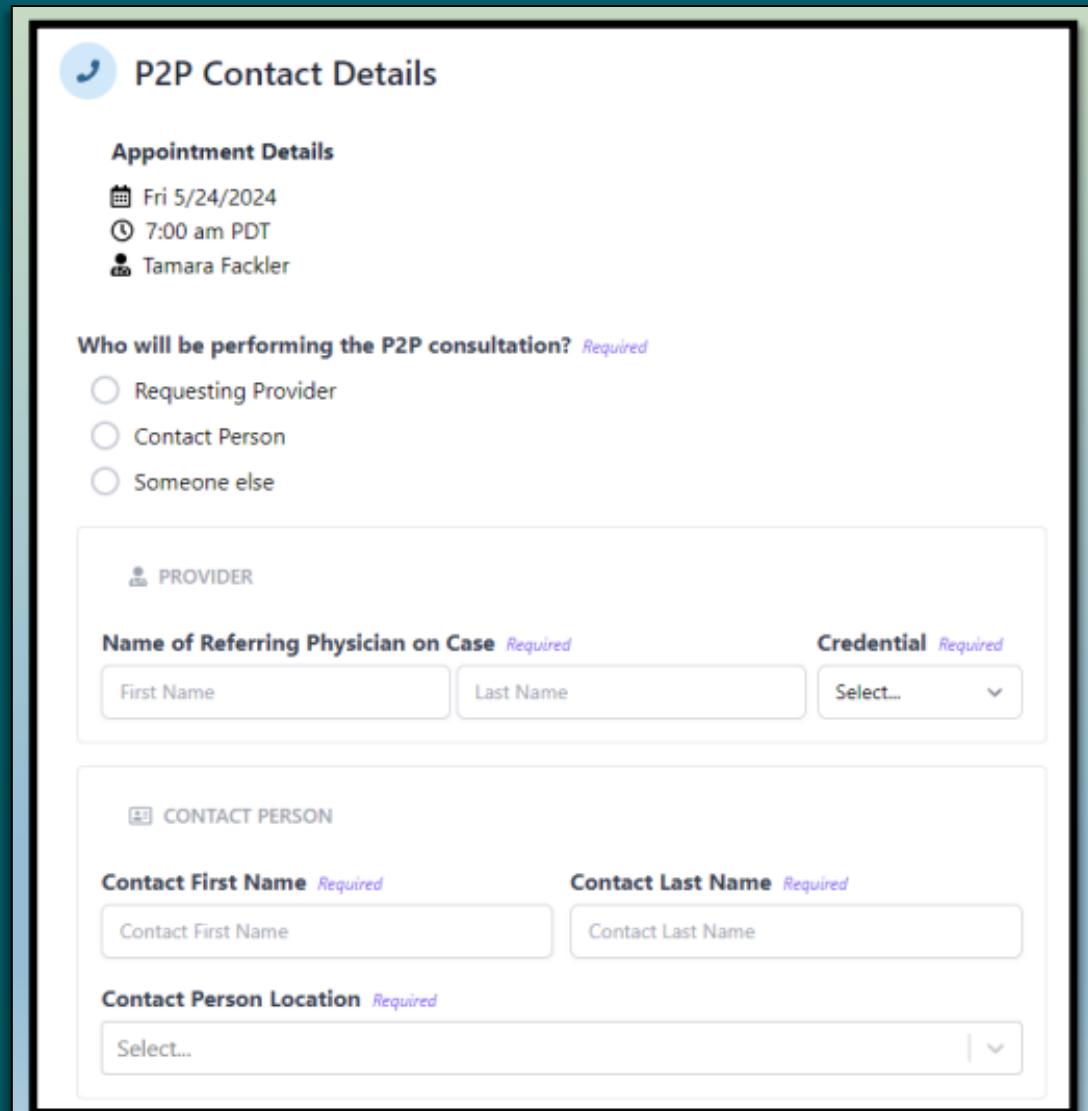
The screenshot shows the 'Case Info' and 'P2P Contact Details' sections of the appointment scheduling interface. The 'Case Info' section displays the following details for the '1st Case': Case #, Episode ID, Member Name, Member DOB, Member State, Health Plan, Member ID, Case Type (MSK Spine Surgery), and Level of Review (Reconsideration P2P). The 'P2P Contact Details' section includes fields for the Requesting Provider (Dr. Jane Doe), Contact Person Name (Office Manager John Doe), Contact Person Location (Provider Office), Phone Number for P2P ((555) 555-5555), Alternate Phone ((xxx) XXX-XXXX), Requesting Provider Email (droffice@internet.com), and Contact Instructions (Select option 4, ask for Dr. Doe). Blue arrows point to the 'Name of Provider Requesting P2P', 'Phone Number for P2P', and 'Contact Instructions' fields, indicating they are the focus for updating. A blue arrow also points to the 'Phone Ext.' field, which is empty. A yellow 'Submit' button is located at the bottom right of the contact details section.



The screenshot shows a summary page titled 'Scheduling' with the status 'Scheduled'. It displays the appointment details: Date (Mon 5/18/20), Time (6:30 pm EDT), and a blue icon representing the provider. To the right of the appointment details is a red oval containing the word 'SCHEDULED'.

P2P Contact Details

1. 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.



The screenshot shows a web-based form titled "P2P Contact Details". At the top, there is a section for "Appointment Details" with a date of "Fri 5/24/2024", a time of "7:00 am PDT", and a name "Tamara Fackler". Below this, a question asks "Who will be performing the P2P consultation?" with three radio button options: "Requesting Provider", "Contact Person", and "Someone else". The "Requesting Provider" option is selected. The form then splits into two main sections: "PROVIDER" and "CONTACT PERSON". The "PROVIDER" section requires input for "Name of Referring Physician on Case" (with fields for "First Name" and "Last Name") and "Credential" (with a dropdown menu labeled "Select..."). The "CONTACT PERSON" section requires input for "Contact First Name" and "Contact Last Name" (each with its own input field), and "Contact Person Location" (with a dropdown menu labeled "Select..."). All input fields are marked as required with a red asterisk.

P2P Contact Details

Appointment Details

Fri 5/24/2024
7:00 am PDT
Tamara Fackler

Who will be performing the P2P consultation? *Required*

Requesting Provider
 Contact Person
 Someone else

PROVIDER

Name of Referring Physician on Case *Required*

First Name Last Name Credential *Required*

Select...

CONTACT PERSON

Contact First Name *Required* Contact Last Name *Required*

Contact First Name Contact Last Name

Contact Person Location *Required*

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.

Contact Instructions

Contact Instructions

Call Notes

- ALT REC declined
- Procedure was performed on:
- 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:

1. 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.

