Interventional Pain Management,

Provider Presentation for Horizon BCBS

EviCore
By EVERNORTH

Agenda

Solutions Overview
Interventional Pain Management, Joint & Spine Surgery

Submitting Requests

Prior Authorization Outcomes, Special Considerations & Post-Decision Options

EviCore Provider Portal
Overview, Features, and Benefits

Provider Resources

Questions & Next Steps

Appendix

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

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Solution Overview

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Horizon Prior Authorization Services

Applicable Membership	Prior authorization applies to the following services	Prior authorization does NOT apply to services performed in
• Horizon FI • Medicare (Braven) • SHPBB	• Outpatient • Elective/Non-emergent	• Emergency Rooms • Observation Services • Inpatient Stays

It is the responsibility of the ordering provider to request prior authorization approval for services.

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Interventional Pain Management

Interventional Pain

- Spinal injections

To find a list of CPT codes that require prior authorization through EviCore, please visit:
https://www.evicore.com/resources/healthplan/horizon

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Submitting Requests

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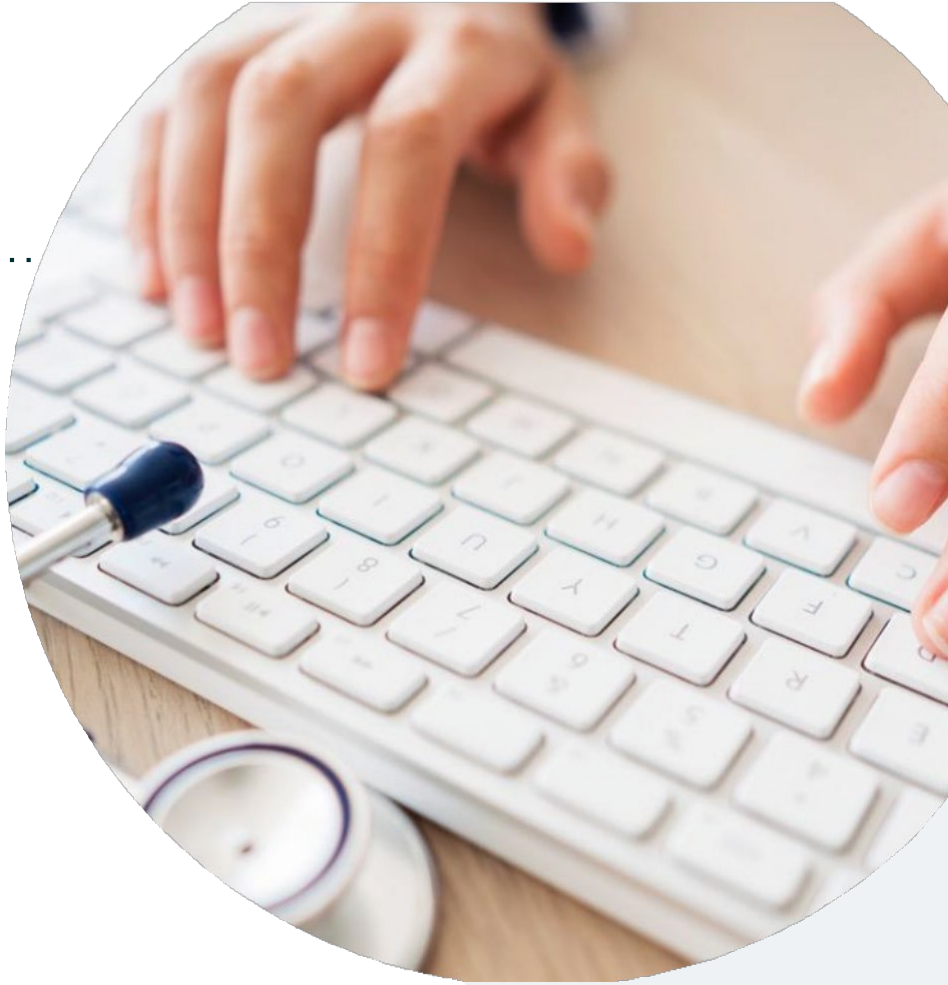
12/18/2024

How to Request Prior Authorization



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

- **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 **www.EviCore.com**

Phone:866.241.6603
Monday – Friday
7 AM – 7 PM (local time)

Fax: 800.649.4548

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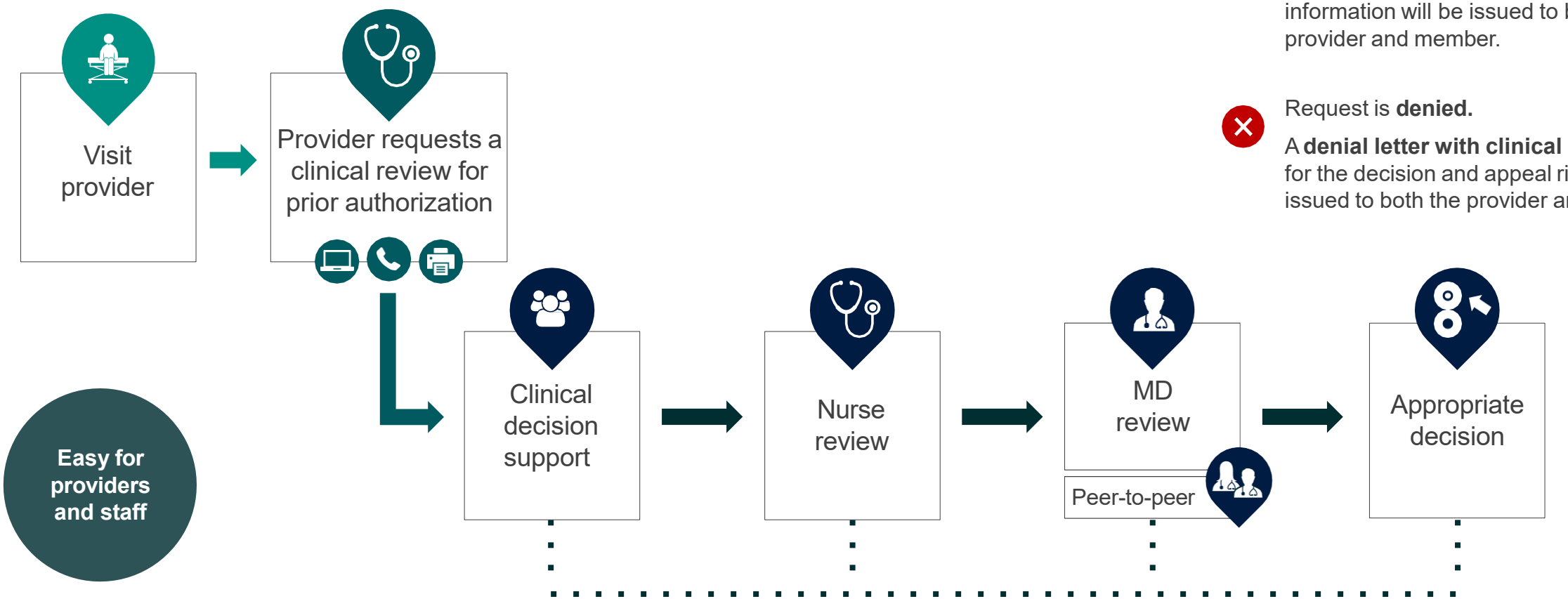
Utilization Management | Prior Authorization



Request is **approved.**

An **approval letter** with authorization information will be issued to both the provider and member.

Request is **denied.**

A **denial letter with clinical rationale** for the decision and appeal rights will be issued to both the provider and member.

Easy for providers and staff

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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

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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.

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Prior Authorization Outcomes, Special Considerations & Post-Decision Options

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Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are valid for up to 45 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, 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: www.EviCore.com

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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 866.241.6603.
- 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.

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Post-Decision Options

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 866.241.6603 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 **EviCore.com** to see available options.

Reconsiderations

- Providers can request a reconsideration review.
- Reconsiderations must be requested within 7 calendar days after the determination date.
- Reconsiderations can be requested in writing or verbally via a Clinical Consultation with an EviCore physician.

Appeals

- EviCore will process first-level appeals. (Commercial Membership Only)
- For Medicare appeals, please contact Horizon
- The timeframe by which appeal requests must be submitted to EviCore varies by line of business. Please refer to the denial letter for instructions.

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Special Circumstances

Retrospective (Retro) Authorization Requests

- Must be submitted within 30 calendar days from the date of service
- Reviewed for clinical urgency and medical necessity.
- Retro requests are processed within 30 calendar days after receiving all necessary information.
- 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.
  - 72 hours for Medicare Braven
  - 24 hours for Commercial Members

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EviCore Provider Portal

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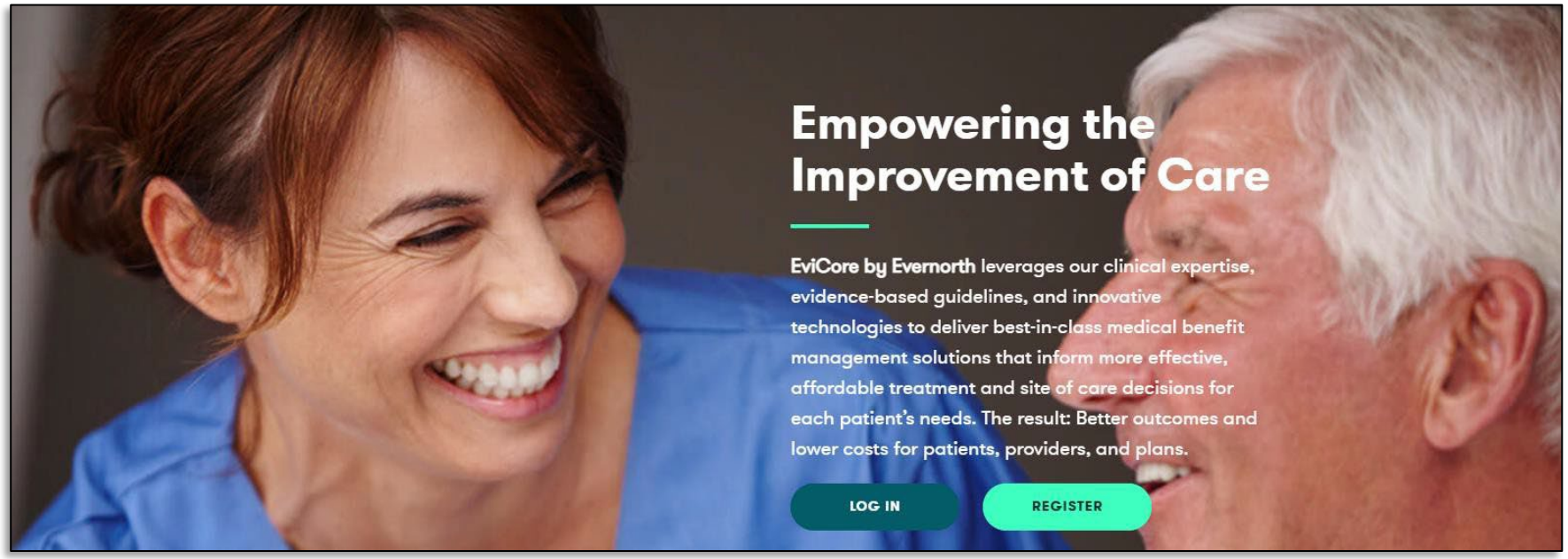
EviCore Provider Portal | Access and Compatibility

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

- To access resources on the EviCore Provider Portal, visit EviCore Provider's Hub
- 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.

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Creating an EviCore Provider Portal Account

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User Information

Next

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.

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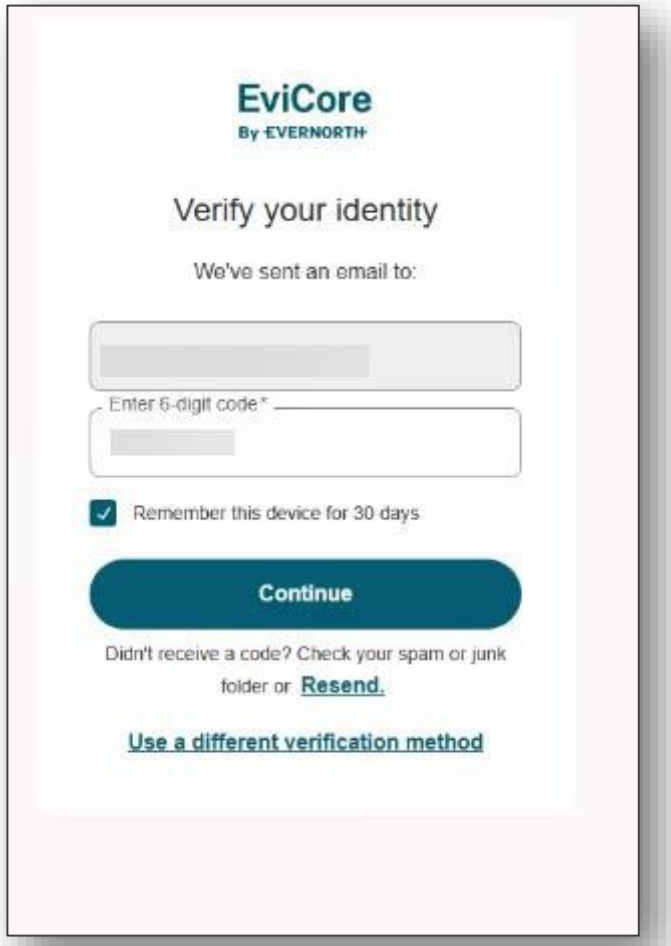
Setting Up Multi-Factor Authentication (MFA)

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.



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Unified Dashboard

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Hello,

Authorization Lookup | Request An Authorization | Worklist | Portals | Help / Contact | User Access

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
No Data Available									

Feedback

+ **View** the full EviCore **Unified** Provider Dashboard training at **www.EviCore.com/provider** under **Video Resources**.

+ **EviCore** Unified Provider Experience Dashboard Frequelenty Asked Questions **UPX Dashboard**

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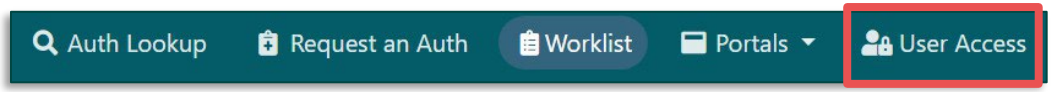
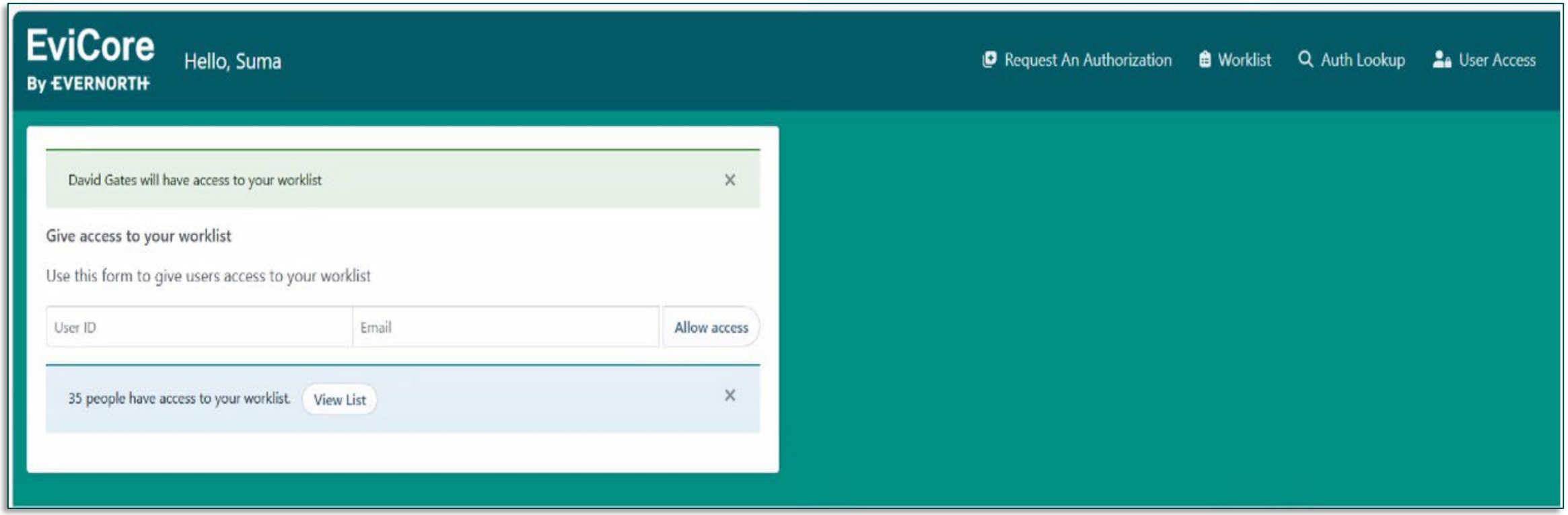
Provider Shared Worklist

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.





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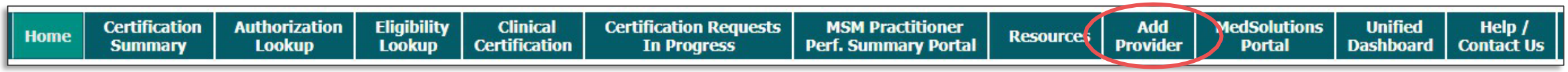
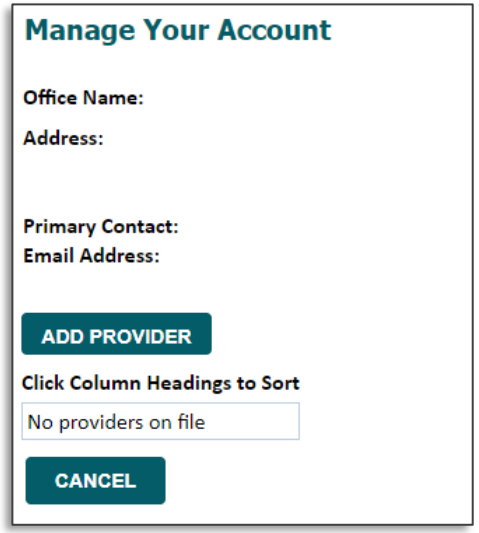
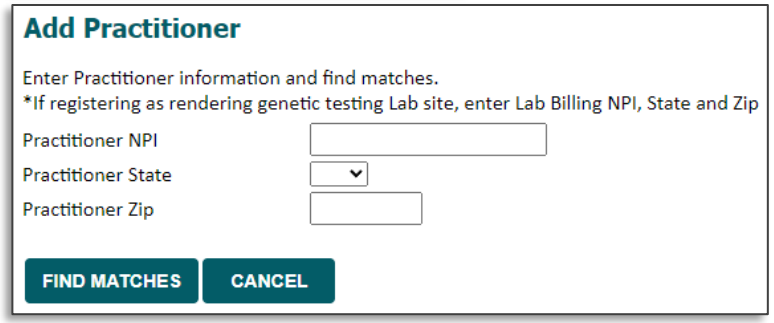
EviCore Provider Portal | Add Providers



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

- Click the **Add Provider** tab to add provider information.
- Select **Add Provider**.
- 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.
- You can access the **Manage Your Account** at any time to make any necessary updates or changes.





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EviCore Portal Features

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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

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Provider Portal | Feature Access

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Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

User Worklist

Most Popular portal feature

Check if a member requires an authorization

Pick up where you left off

REQUEST AN AUTH

RESUME IN-PROGRESS REQUEST

ENTER PHARMACY CASE NUMBER

SUMMARY OF AUTH

AUTH LOOKUP

MEMBER ELIGIBILITY

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Certification Summary | User Worklist

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Certification Summary

Search For: All Other Programs

Search..

Page 1 of 1 10

	Authorization Number	Case Number	Member Last Name	Ordering Provider Last Name	Ordering Provider NPI	Status	Case Initiation Date	Procedure Code	Service Description
1	NA					Expired / Cancelled	05/01/2024		

Page 1 of 1 10

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

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Authorization Lookup | Popular Tool

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Authorization Lookup

Search by Member Information | Search by Authorization Number/NPI | OnePA: Prior Authorization Portal for Providers | Search by Claim Number/Health plan

Required Fields
Healthplan:

PRINT

Click here for 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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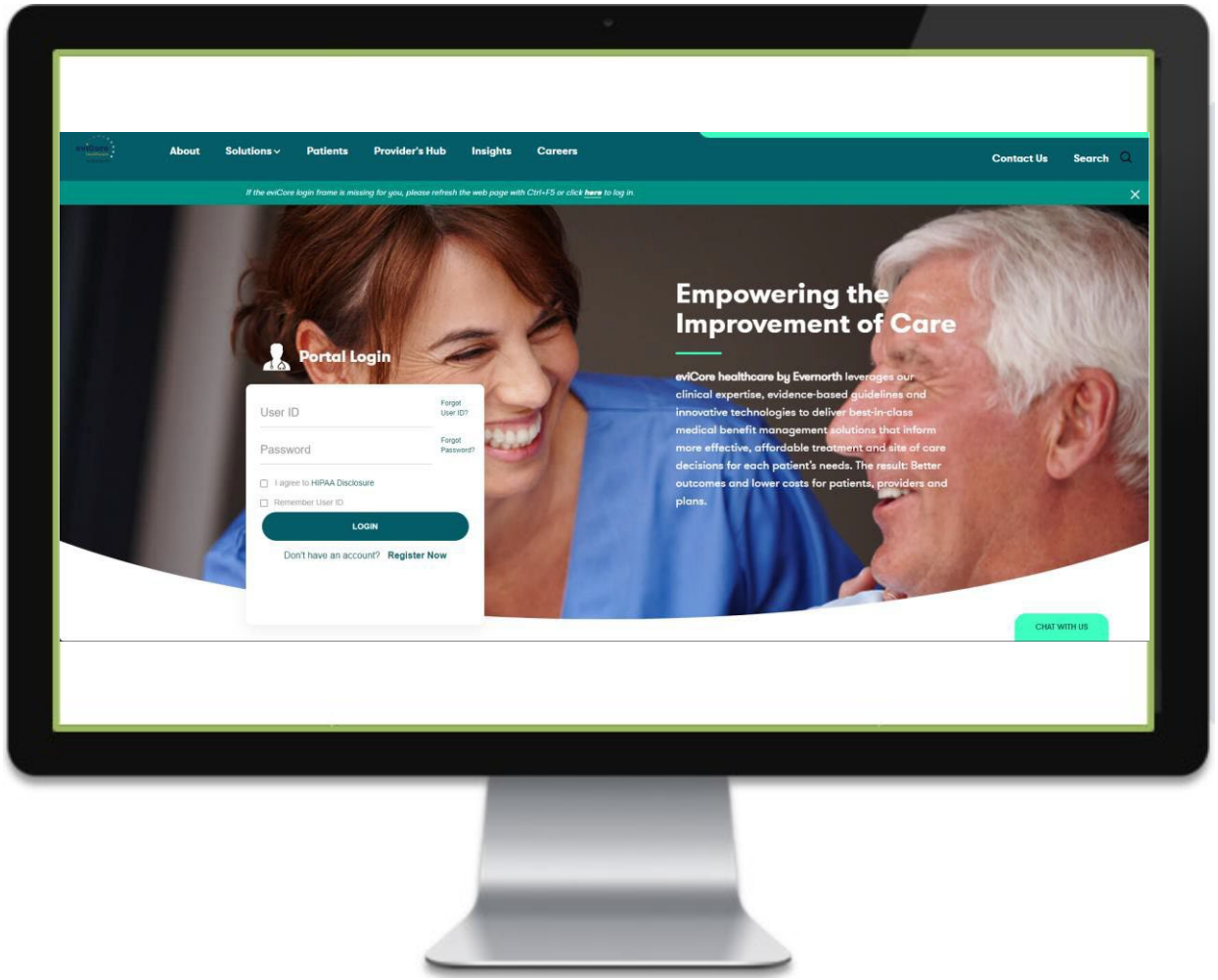
Provider Portal Demo | MSK Pain Procedures

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)



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Initiating a Case

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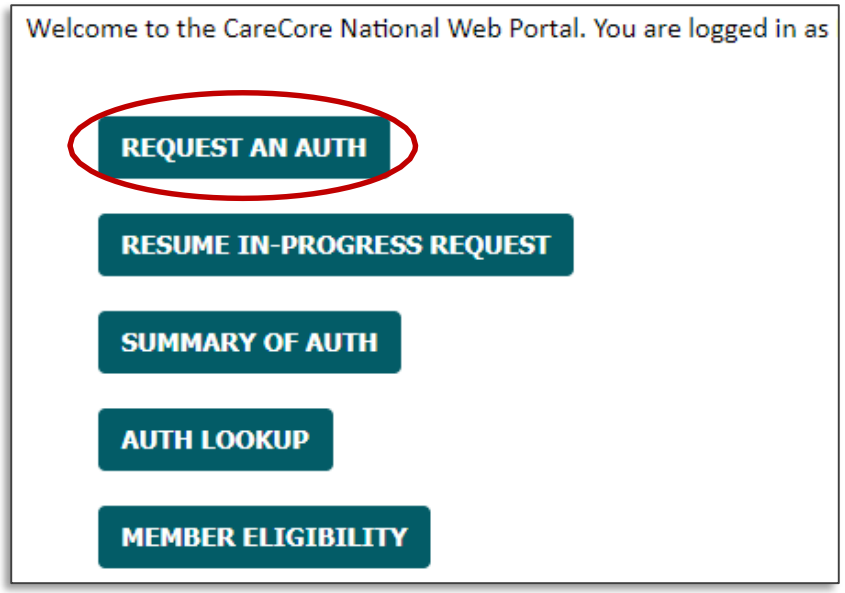
Initiating a Case



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

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Select Program

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Add Provider	MedSolutions Portal	Unified Dashboard	Help / Contact Us

Request an Authorization

To begin, please select a program below:

- Durable Medical Equipment(DME)
- Gastroenterology
- Lab Management Program
- Medical Oncology Pathways
- Musculoskeletal Management
- Pharmacy Drugs (Express Scripts Coverage)
- Radiation Therapy Management Program (RTMP)
- Radiology and Cardiology
- Sleep Management
- Specialty Drugs

CONTINUE

Click here for help

- Select the **Program** for your certification.
- For **Interventional Pain** cases, please select Musculoskeletal Management.

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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 | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH CLEAR SEARCH

	Provider
SELECT	

If the provider's NPI is not listed above, please use the search feature below to add a new provider and continue with case build.

Search By NPI: SEARCH

BACK CONTINUE

Click here for help

- Search for and select the **Provider/Group** for whom you want to build a case. This is the list of providers you added to your account.
- If the **Provider/Group** is not on your list of providers added to your account, you can now **Search by NPI**.

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Clinical Certification Request | Search and Select Provider

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Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH | CLEAR SEARCH

	Provider
SELECT	

If the provider's NPI is not listed above, please use the search feature below to add a new provider and continue with case build.

Search By NPI: SEARCH

	Practitioner Name	NPI	Address	City	State	ZipCode	Phone	Fax
SELECT								

BACK | CONTINUE

Click here for help

- Once the provider is found by searching **NPI**, the line will turn gray to indicate they are selected.

Attention!

Do you want to add this NPI ( ) to your account for future requests ?

YES | NO

By choosing **YES**, the practitioner will be added to the provider list in your account.

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Clinical Certification Request | Select Health Plan

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Add Provider	MedSolutions Portal	Unified Dashboard	Help / Contact Us

Choose Your Insurer

Requesting Provider:

Please select the insurer for this authorization request.

Please Select a Health Plan

BACK CONTINUE

Click here for help

- Choose the appropriate **health plan** for the request.
- Another drop down will appear to select the appropriate address for the **provider**.
- Click **CONTINUE**.

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Clinical Certification Request | Enter Contact Information

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Add Your Contact Info

Provider's Name:* [?]
Who to Contact:* [?]
Fax:* [?]
Phone:* [?]
Ext.: [?]
Cell Phone:
Email:

☑ Receive notification of case status changes. Please enter email address in box above.

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.

BACK | CONFIRM FAX AND CONTINUE

Click here for help

- 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.

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Clinical Certification Request | Procedure Date

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Attention!

What is the expected procedure date or treatment start date for this request? (MM/DD/20YY)

If the Date of Service is unknown, please enter today's date.

SUBMIT

- Enter the expected date of service.
- If you do not know the date of the procedure, enter today's date.

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Clinical Certification Request | Enter Member Information

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Add Provider	MedSolutions Portal	Unified Dashboard	Help / Contact Us

Patient Eligibility Lookup

Patient ID:*

Date Of Birth:* MM/DD/YYYY

Patient Last Name Only:* [?]

When entering patient details, please review and confirm the spelling of the patient's name. Verify accuracy of the patient's ID and date of birth.

ELIGIBILITY LOOKUP

BACK

Click here for help

- Enter **member information**, including patient ID number, date of birth, and last name.
- Click **ELIGIBILITY LOOKUP**.

Search Results

	Patient ID	Member Code	Name	DOB	Gender	Address
SELECT		01			F	

BACK

Click here for help

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

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Clinical Certification Request | Procedure and Diagnosis Codes

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Requested Service + Diagnosis

This procedure will be performed on 5/6/2024. CHANGE

Musculoskeletal Management Procedures

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

Don't see your procedure code or type of service? Click here

Additional Procedure codes will be collected/presented during the clinical questionnaire

Diagnosis

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

LOOKUP

Trouble selecting diagnosis code? Please follow these steps

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

Secondary diagnosis is optional for Musculoskeletal Management

LOOKUP

BACK

Click here for help

- Enter the primary CPT code.
- Add diagnosis code(s):
  - For pain procedures, enter the numeric CPT.

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Clinical Certification Request | Clinical Details

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Attention!

Will you also be the surgeon performing the procedure?

YES NO

If you answer NO, you will have the option of entering a rendering surgeon.

Attention!

Surgeon Search

Use the fields below to search for specific providers. 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 provider name by entering some portion of the name and we will provide you the provider names that most closely match your entry.

NPI: TIN:

Zip Code: City:

Provider Name: Exact match / Starts with

LOOKUP PROVIDER

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Clinical Certification Request | Site Selection

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

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

- 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.

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Clinical Certification Request | Clinical Certification

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / 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.
- **You will not have the opportunity to make changes after this point.**

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Clinical Certification Request | Standard or Urgent Request?

Home | Certification Summary | Authorization Lookup | Eligibility Lookup | Clinical Certification | Certification Requests In Progress | MSM Practitioner Perf. Summary Portal | Resources | Add Provider | MedSolutions Portal | Unified Dashboard | Help / Contact Us

Proceed to Clinical Information

Urgency Indicator

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

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

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

Clinical Upload

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

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

Choose File No file chosen
Choose File No file chosen
Choose File No file chosen
Choose File No file chosen
Choose File No file chosen

UPLOAD

Proceed to Clinical Information

Is this case Routine/Standard?

YES NO

- 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** files.
  (.doc, .docx, or .pdf format; max 5MB size)
- Your case will only be considered urgent if there is a successful upload.

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Interventional Pain Pathway

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Clinical Collection Process | Pathway Questions

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Add Provider	MedSolutions Portal	Unified Dashboard	Help / Contact Us

Proceed to Clinical Information

Please indicate the reason for this procedure:

To treat post-herpetic neuralgia
To treat low back pain (radiculopathy/radicular pain/non-radiating pain)
To inject Spinraza® (nusinersen)
A trial for an implanted pump
For obstetrical or surgical anesthesia
To manage perioperative pain

You can save a certification request to finish later.

Proceed to Clinical Information

Lumbar Epidural Injection

Please indicate the type of injectate(s) that will be used (choose all that apply):

- ☐ Anesthetic
- ☐ Corticosteroid
- ☐ Biologics (e.g., platelet rich plasma, stem cells, amniotic fluid)
- ☐ Spinraza® (nusinersen)
- ☐ Other injectate(s)
- ☐ Unknown

How many levels will this procedure be performed at?

SUBMIT

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Clinical Collection Process | Pathway Questions

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Proceed to Clinical Information

How many epidural steroid injection sessions of ALL types have been performed in this region for this episode of pain in the last 6 months? (Please include transforaminal AND interlaminar injections)

How many epidural steroid injection sessions of ALL types have been performed in this region in the last 12 months? (Please include transforaminal AND interlaminar injections)

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Clinical Collection Process | Pathway Questions

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Add Provider	MedSolutions Portal	Unified Dashboard	Help / Contact Us

Proceed to Clinical Information

Does physical exam/patient history indicate any of the following: (Choose all that apply)

- ☐ Pain and/or abnormal sensation (numbness, tingling, burning, etc.) that radiates into the arm or leg
- ☐ Symptomatic spinal stenosis
- ☐ Positive straight leg raise/crossed leg raise test (for lumbar procedures) or Spurling's maneuver (for cervical procedures)
- ☐ Loss of strength
- ☐ Change in sensation to light touch, pressure, pin prick or temperature
- ☐ Decreased, absent or asymmetric reflex(es)
- ☐ Positive electrodiagnostic study (EMG/NCV) for nerve root compression
- ☐ None of the above or unknown

Please indicate the documented number of weeks of conservative care prior to this request: (e.g. number of weeks of exercise, physical therapy, chiropractic care, NSAIDS, or analgesics)

Will your patient be participating in an active rehabilitation or therapeutic exercise program following this injection?

○ Yes ○ No ○ Unknown

SUBMIT

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Case Summary | Medical Review

Summary of Your Request

Please review the details of your request below and if everything looks correct click SUBMIT

Your case has been sent to clinical review. You will be notified via fax within 2 business days if additional clinical information is needed. If you wish to speak with eviCore at anytime, please call 1-888-333-8641.

Provider Name:	[illegible]	**Contact:**	[illegible]
Provider Address:	[illegible]	**Phone Number:**	[illegible]
		Fax Number:	[illegible]
Patient Name:	[illegible]	**Patient Id:**	[illegible]
Insurance Carrier:	[illegible]		
Site Name:	[illegible]	**Site ID:**	[illegible]
Site Address:	[illegible]		
Primary Diagnosis Code:	[illegible]	**Description:**	Other cervical disc displacement, unspecified cervical region
Secondary Diagnosis Code:		**Description:**	
Date of Service:	[illegible]		
CPT Code:	[illegible]	**Description:**	Spine Surgery
Case Number:	[illegible]		
Review Date:	5/13/2020 2:36:00 PM		
Expiration Date:	N/A		
Status:	Your case has been sent to clinical review. You will be notified via fax within 2 business days if additional clinical information is needed. If you wish to speak with eviCore at anytime, please call 1-888-333-8641.		

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Case Summary | Approval

Summary of Your Request

Please review the details of your request below and if everything looks correct click SUBMIT

Your case has been Approved.

Provider Name:		**Contact:**	
Provider Address:		**Phone Number:**	
		Fax Number:	
Patient Name:		**Patient Id:**	
Insurance Carrier:			
Site Name:		**Site ID:**	
Site Address:			
Primary Diagnosis Code:	M43.16	**Description:**	Spondylolisthesis, lumbar region
Secondary Diagnosis Code:		**Description:**	
Date of Service:	Not provided		
CPT Code:	SPINE	**Description:**	Spine Surgery
Authorization Number:			
Review Date:	5/13/2020 1:52:08 PM		
Expiration Date:	6/27/2020		
Status:	Your case has been Approved.		

CANCEL PRINT CONTINUE

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Provider Resources

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12/18/2024

EviCore Communication Relationship Management (ECRM)

For program-related questions or concerns, please submit inquiries via the **EviCore Communication Relationship Management (ECRM)** application. Common issues addressed through ECRM include:

- Questions regarding accreditation and/or credentialing
- Requests for an authorization to be sent to the health plan
- Complaints and grievances
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues
- Issues with EviCore provider portal

ECRM is available **24/7**. **Users can login or register here, ECRM**

Additional Information about ECRM, including trainings, can be found on Providers Hub

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Contact EviCore's Dedicated Teams

Client and Provider Services

- For eligibility issues (customer or provider not found in system) or transactional authorization related issues requiring research.
- ECRM: ECRM
- Phone: **800- 646-0418** (option 4)

Provider Engagement

- Regional team that works directly with the provider community.
- **Sara Pomeroy**
- Email: sara.pomeroy@EviCore.com
- Phone: **804-814-4878**

- **Web-Based Services and Portal Support**
- Live chat
- Email: portal.support@EviCore.com
- Phone: **800-646-0418** (option 2)

Call Center

Call **866.241.6603**, representatives are available from 7 a.m. to 7 p.m. local time.

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Provider Resource Website

Provider Resource Pages

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

- Provider Training
- CPT code list(s)
- Quick Reference Guide (QRG)
- Frequently Asked Questions (FAQ) Document

To access these helpful resources, please visit:
https://www.evicore.com/resources/healthplan/horizon

EviCore also maintains online resources not specific to health plans, such as guidelines and our required clinical information checklist.

To access these helpful resources, visit EviCore's Providers' Hub.

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Continued Learning:
Provider Training Opportunities

Get More Out of the EviCore Portal—Join a Free Training Session

Whether you're just getting started or have been using the EviCore portal for a while, our **free, live training sessions** can help you work more efficiently and confidently. In just **one hour**, you'll learn tips, tools, and best practices you can use right away.

Sessions are offered on **multiple dates and times**, making it easy to fit training into your schedule.

Training Options & Frequency

+ Intro to Web Portal Training– Offered **twice per week**
+ Intro to EviCore Online Resources– Offered **twice per month**
+ Therapy Provider Training *(for therapy providers)* – Offered **twice per quarter**
+ Post-Acute Care Portal Training *(for hospitals and post-acute care providers)* – Offered **once per week**

How to View Sessions & Register

1. Click on the training session you would like to attend.
2. Select your preferred date and time by checking the radio button.
3. Complete the registration form.
4. Look for a confirmation email with session details.

Have questions? The training host's contact information will be included in your confirmation email.

We look forward to seeing you at an upcoming training session!

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Stay up to date with our free provider newsletter!

To subscribe:

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

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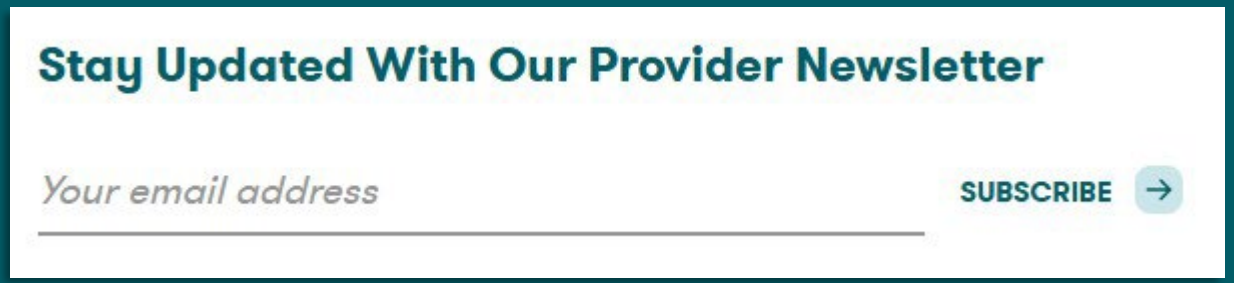
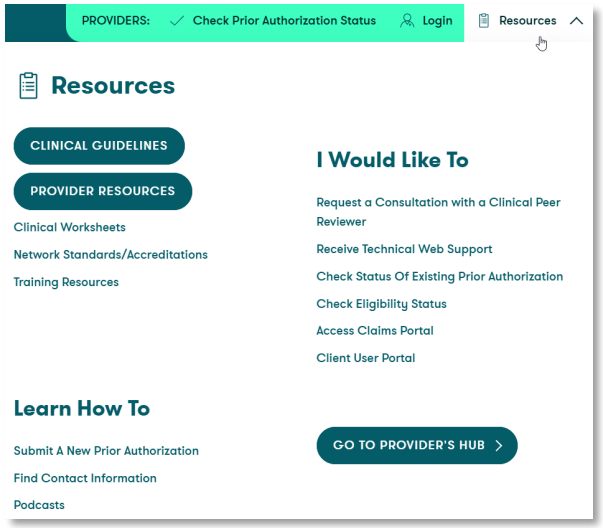
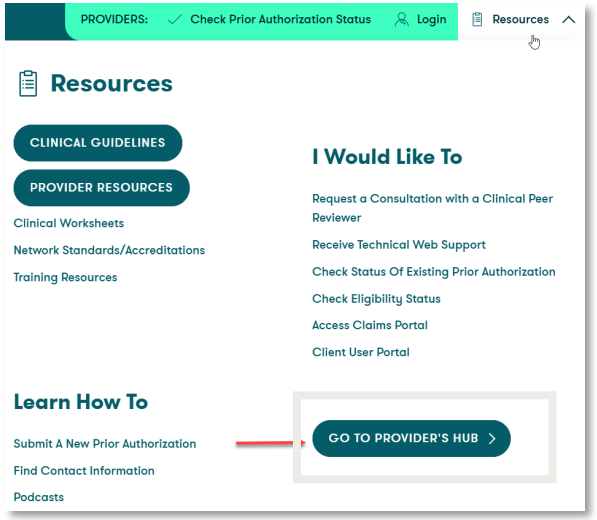
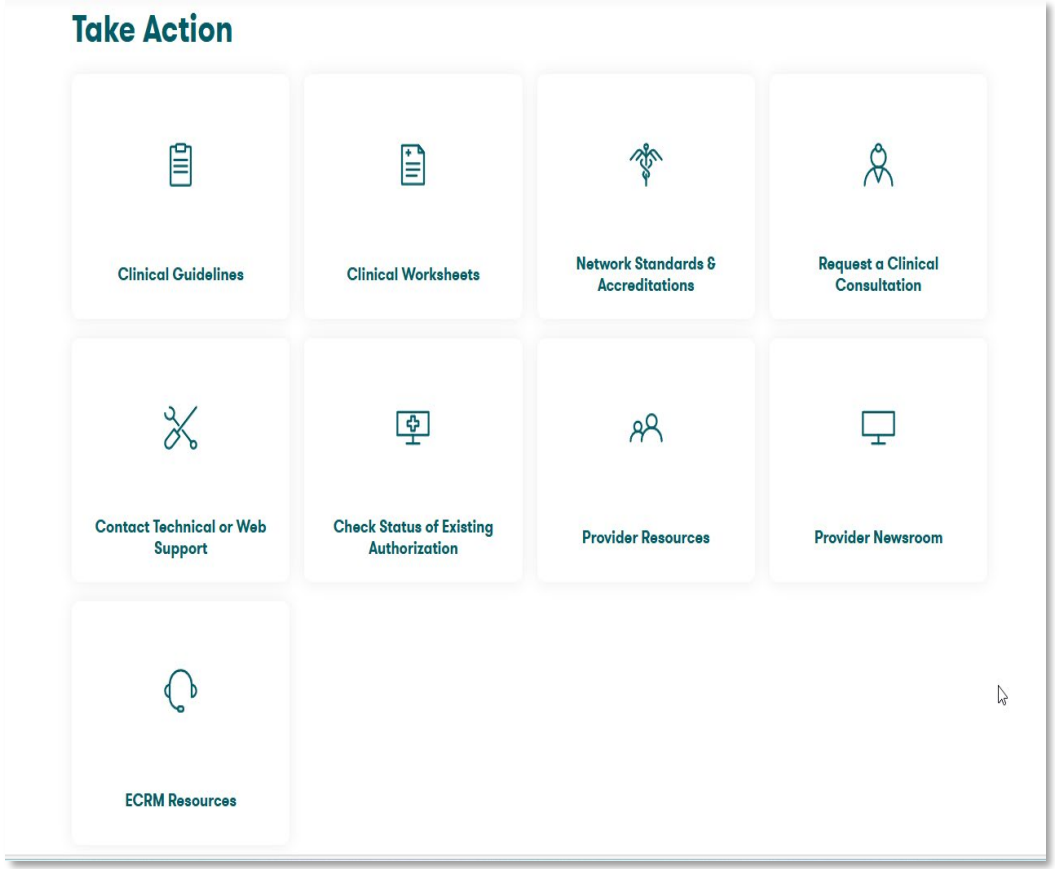


Provider Resources | EviCore Provider's Hub

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







Step 1

Open the **Resources** menu in the top right of the browser

Step 2

Select **GO TO PROVIDERS HUB** to access clinical guidelines, clinical worksheets, and more

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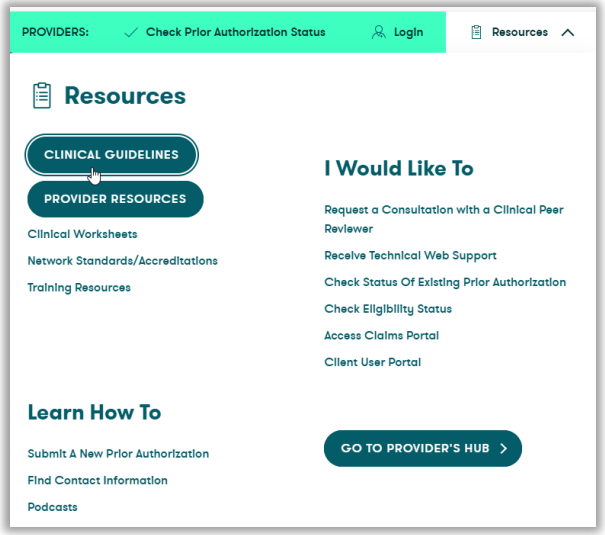
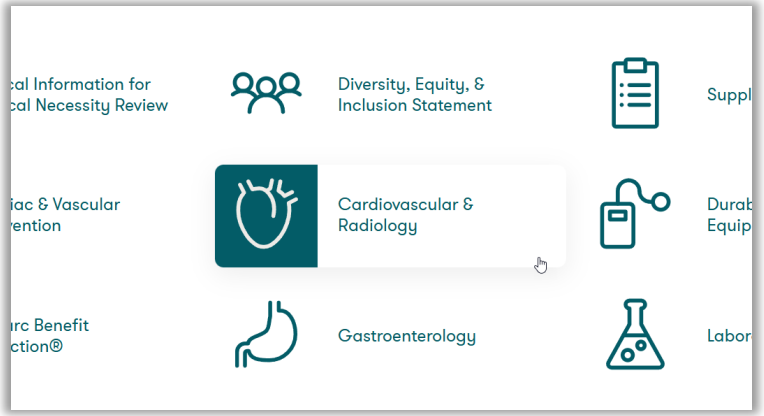
Provider Resources | Clinical Guidelines

How do I access EviCore's clinical guidelines?





Step 1

- Open the **Resources** menu in the top right of the browser
- Select **Clinical Guidelines**

Step 2

Select the **solution/program** associated with the requested guidelines

Step 3

- Search by **health plan** name to view clinical guidelines
- If you would like to view all guidelines, type in "EviCore healthcare" as your health plan

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Appendix

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Online Peer-to-Peer Scheduling Tool

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How to Schedule a Peer-to-Peer (P2P) Request

- Log into your account at www.EviCore.com
- Perform Authorization 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 conversation:

Authorization Number:	NA	
Case Number:		P2P AVAILABILITY
Patient Name:		
DOB:		
Status:	Denied	
P2P Status:		

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

P2P AVAILABILITY | Request Peer to Peer Consultation

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How to Schedule a Peer-to-Peer Request

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

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

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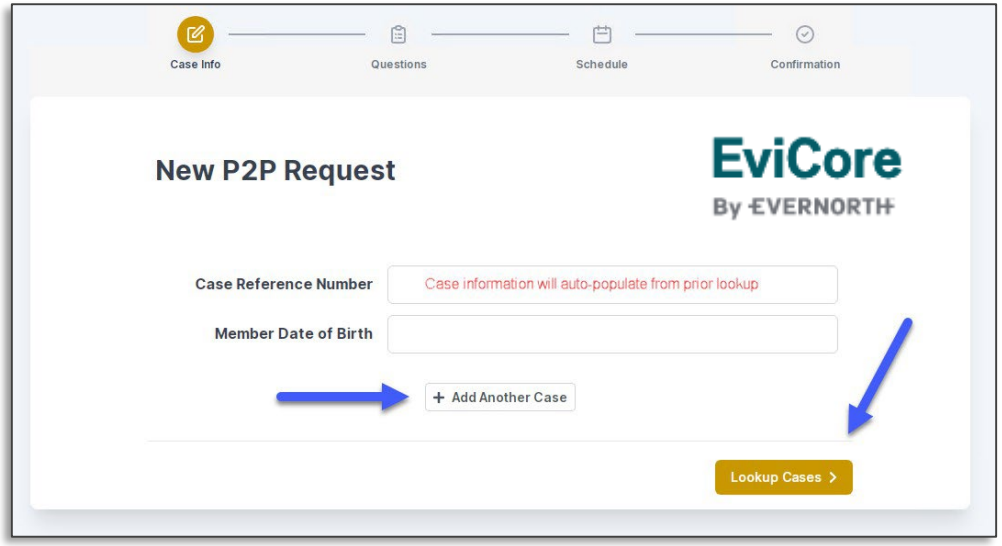
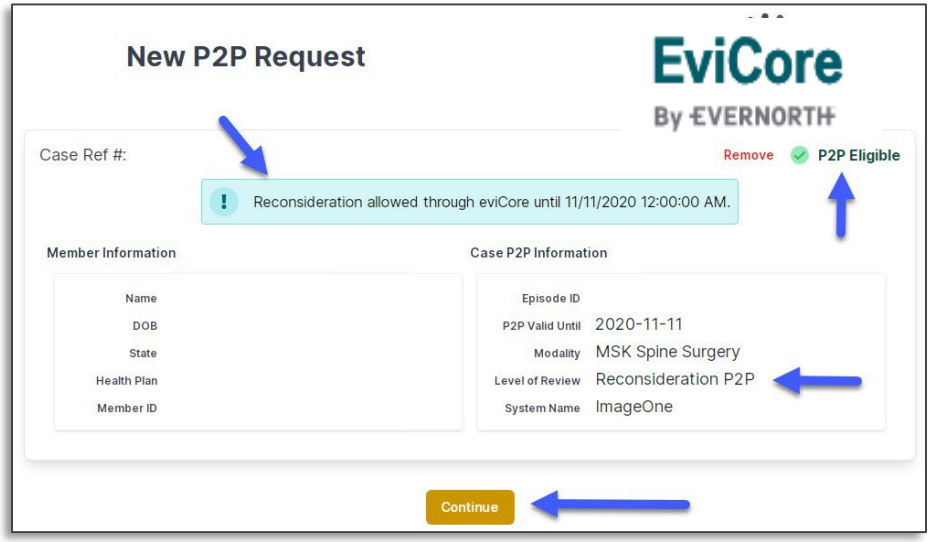
How to Schedule a Peer-to-Peer Request



- Upon first login, you will be asked to confirm your default time zone.
- You will be presented with the case number and member date of birth (DOB) for the case you just looked up.
- You can add another case for the same Peer-to-Peer appointment request by selecting **Add Another Case**.
- To proceed, select **Lookup Cases**.

- You will receive a confirmation screen with member and case information, including the Level of Review for the case in question. Click **Continue** to proceed.



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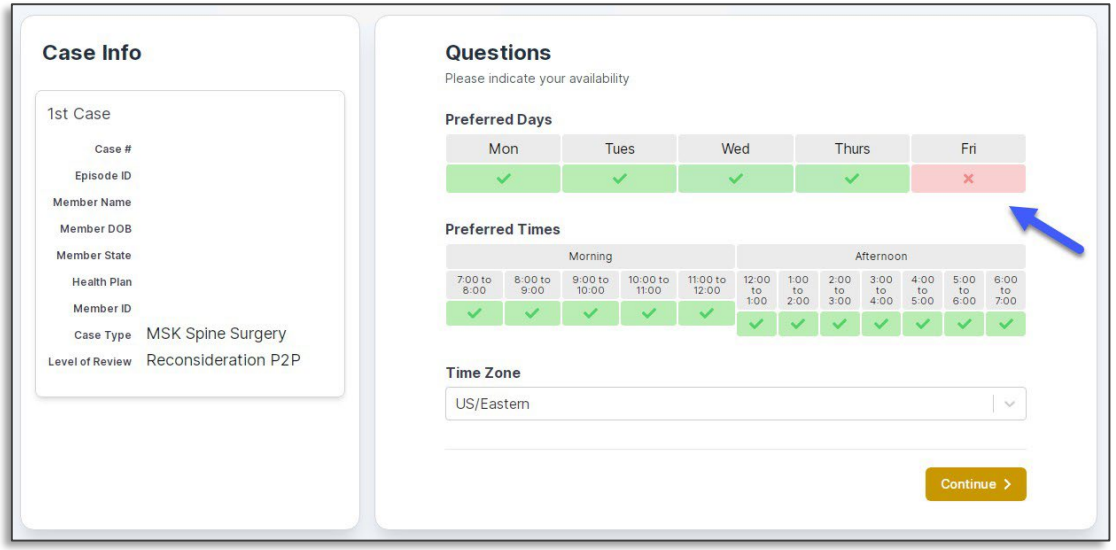
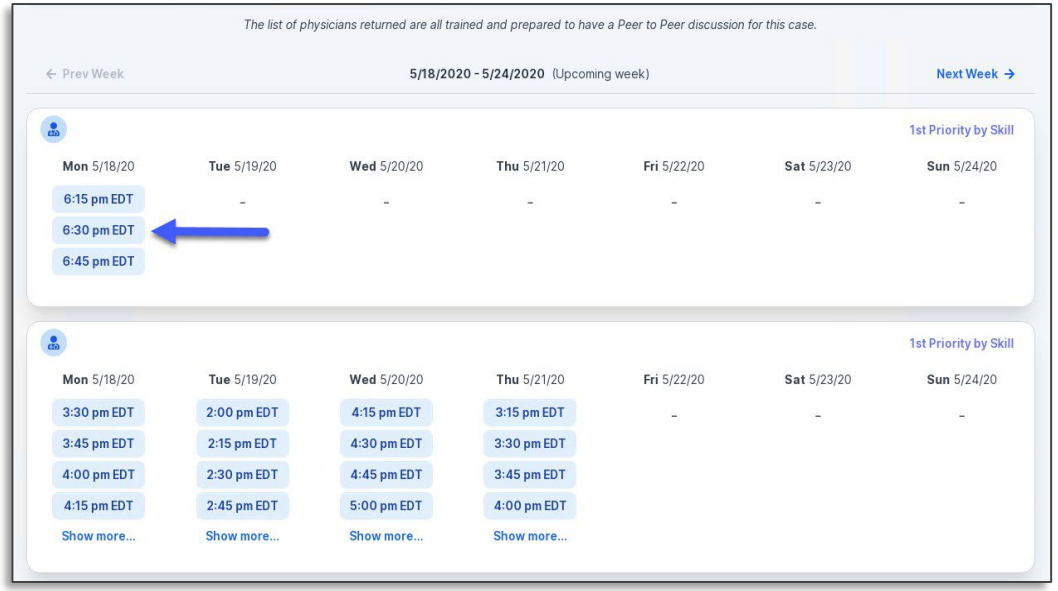
How to Schedule a Peer-to-Peer Request



- You will be prompted to identify your preferred days and times for a Peer-to-Peer conversation. All opportunities will automatically present. Click on any green check mark to deselect the option and then click **Continue**.

- You will be prompted with a list of EviCore physicians/reviewers and appointment options per your availability. Select any of the listed appointment times to continue.



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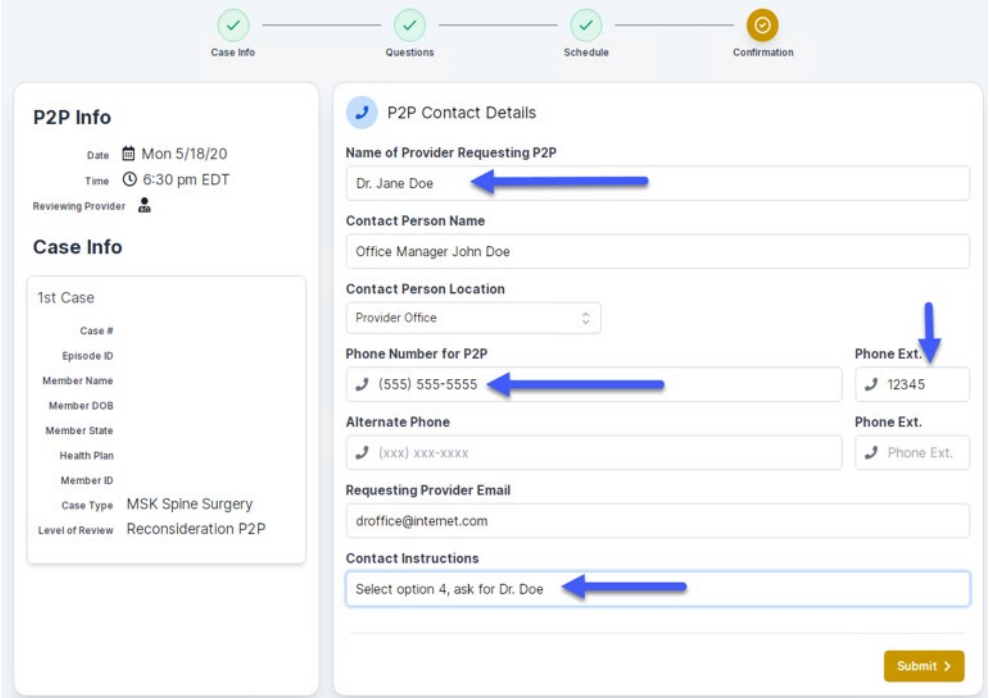
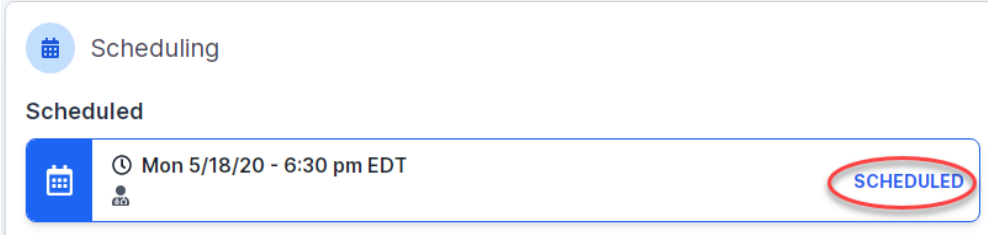
Provider Resources | Schedule a P2P Request





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

Click **Submit** to schedule the appointment

You will be presented with a summary page containing the details of your scheduled appointment

Confirm contact details

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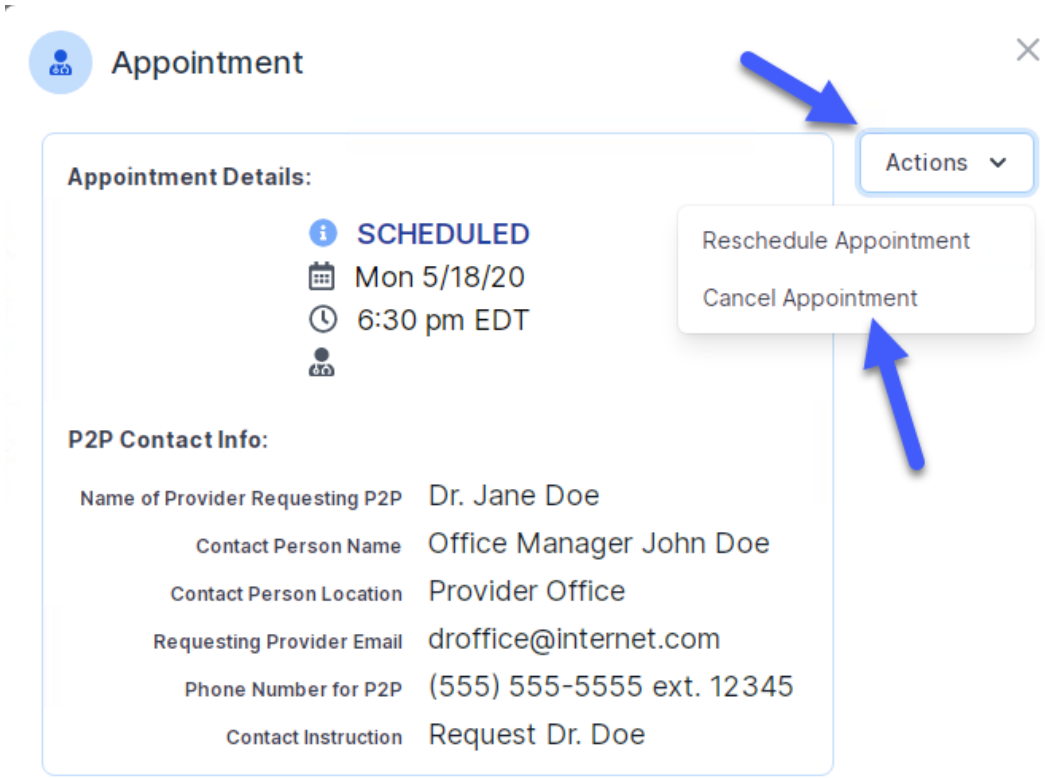
Provider Resources | Cancel or Reschedule a P2P Appointment



To cancel or reschedule an appointment:

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

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Thank you

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