

MEDICAL ONCOLOGY MANAGEMENT

HealthSpring (Medicare Advantage)

Provider Orientation Presentation

EviCore
By EVERNORTH

 **HealthSpring**

EviCore manages prior authorization requests for Medical Oncology services for HealthSpring members

Prior authorization applies to the following services:

- + Outpatient Medical Oncology
- + Non-emergent treatment
- + Primary/ Supportive agents

Prior authorization does NOT apply to services performed in:

- + Emergency Room Services / 23 Hour Observations / Inpatient stays
- + Clinical Trials
- + Transplant Patients
- + Part D Medications
- + CAR-T requests



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	Health Care Providers HealthSpring
EviCore Provider Portal	Provider's Hub EviCore by Evernorth > 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)



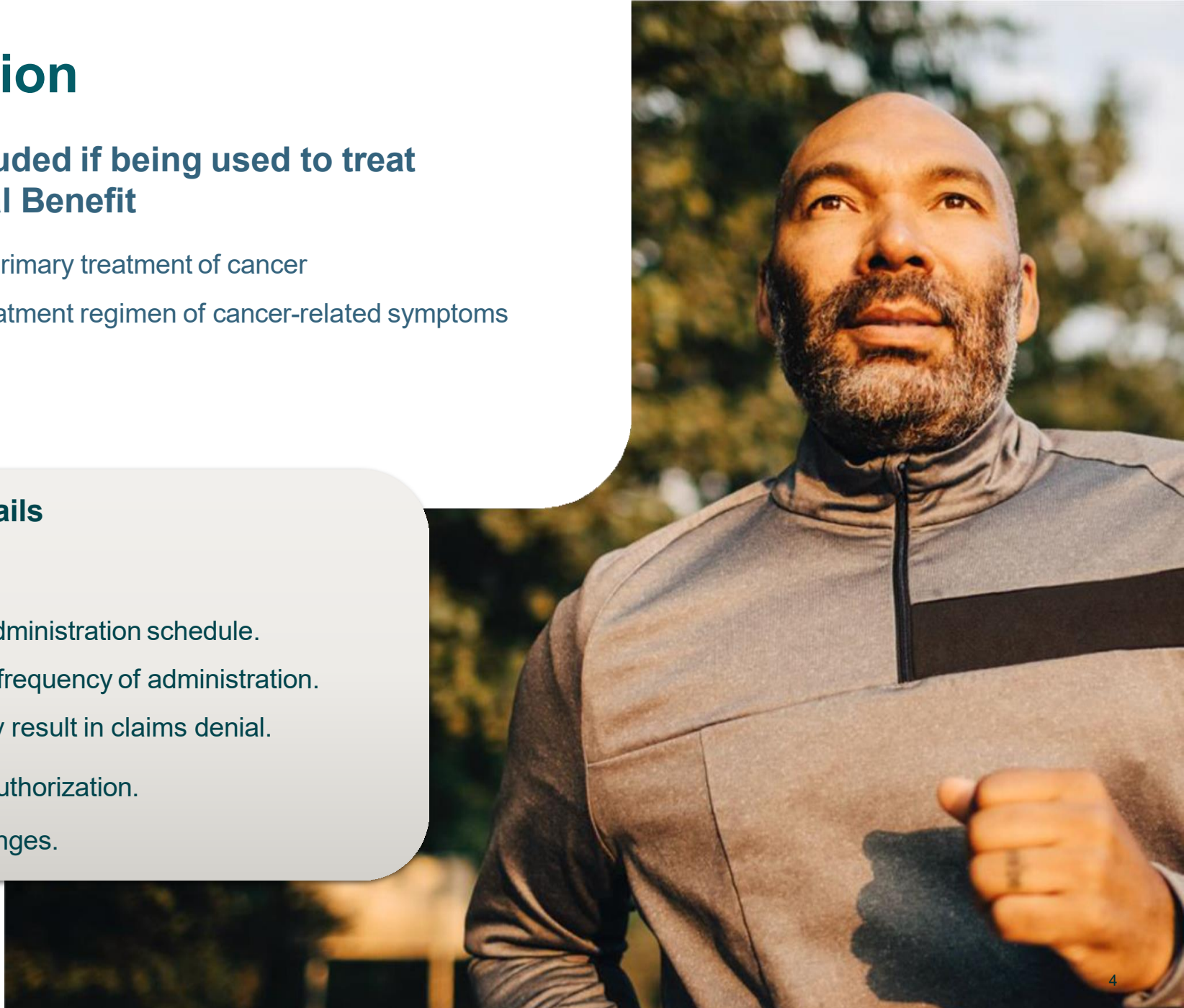
Medical Oncology Solution

The following types of drugs are included if being used to treat cancer, and if billed under the Medical Benefit

- + Infused, oral, and self-administered drugs in the primary treatment of cancer
- + Supportive agents included with the approved treatment regimen of cancer-related symptoms
- + Primary Injectable Chemotherapy
- + Companion diagnostics / precision medicine

Important Details

- + There are no partial approvals.
- + The Authorization is not for a specific dose or administration schedule.
- + Billing in excess of the appropriate # of units or frequency of administration.
based on **MUE/NCCN** guidelines for a drug may result in claims denial.
- + Supportive drugs will be issued as a separate authorization.
- + Please call **866.686.4452** for any treatment changes.



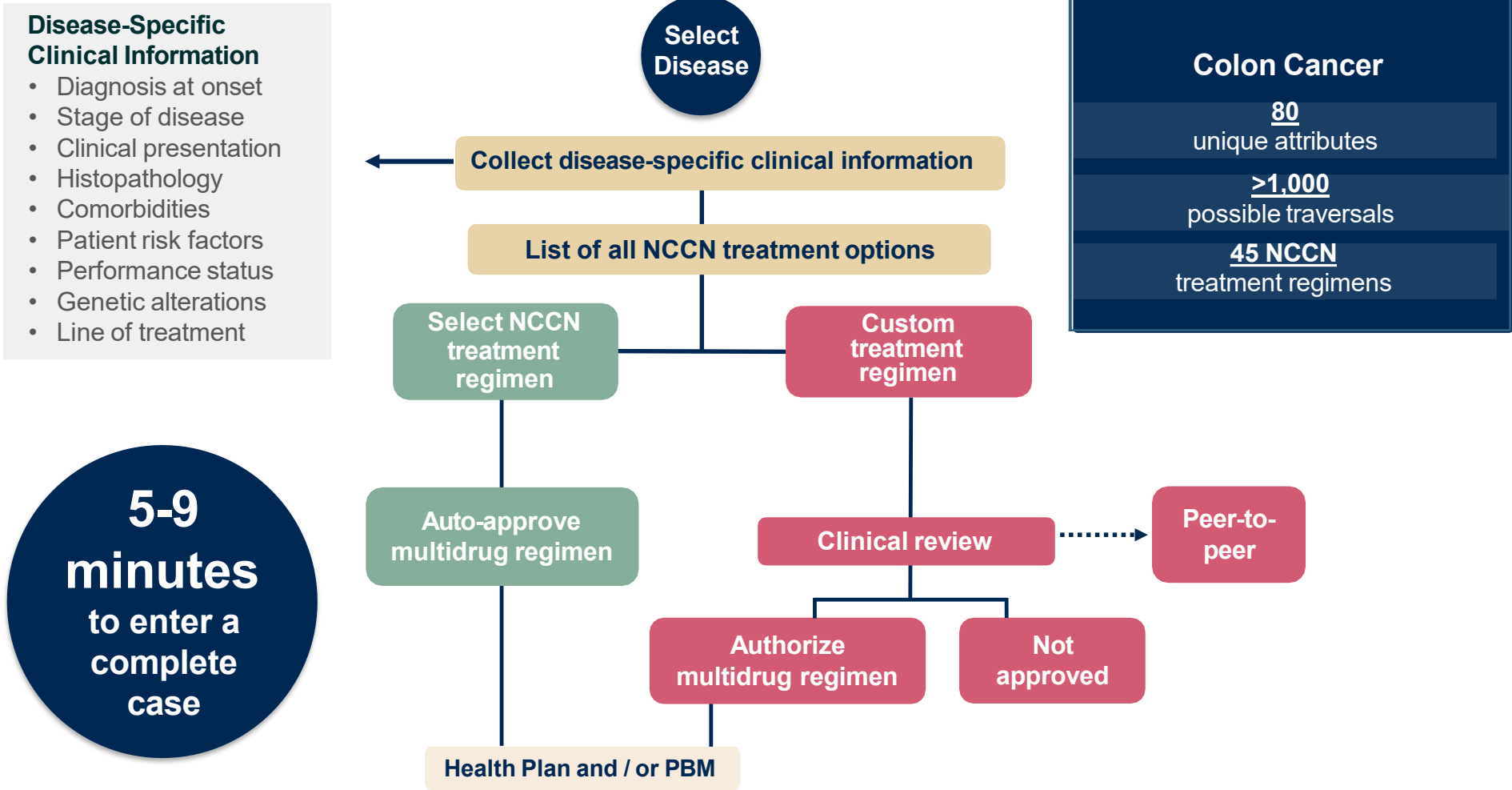
If clinical information is needed, please be able to supply the following information:

- + Patient's clinical presentation
- + Diagnosis Codes
- + Type and duration of treatments performed to date for the diagnosis
- + Disease-Specific Clinical Information:
 - ✓ Diagnosis at onset
 - ✓ Stage of disease
 - ✓ Clinical presentation
 - ✓ Histopathology
 - ✓ Comorbidities
 - ✓ Patient risk factors
 - ✓ Performance status
 - ✓ Genetic alterations
 - ✓ Line of treatment



Medical Oncology Solution Defines a Complete Episode of Care

EviCore Medical Oncology Guideline Management



Treatment options may be modified to align with formulary

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 Hold notification will inform the provider about what clinical information is needed as well as the date by which it is needed.

The Provider must submit the additional information to EviCore

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.

EviCore will review the additional documentation and reach a determination

Determination notifications will be sent.



There are specific ways to share the requested information with 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.
- + Authorizations are typically valid for 8-12 months from the date of the final determination.
- + 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

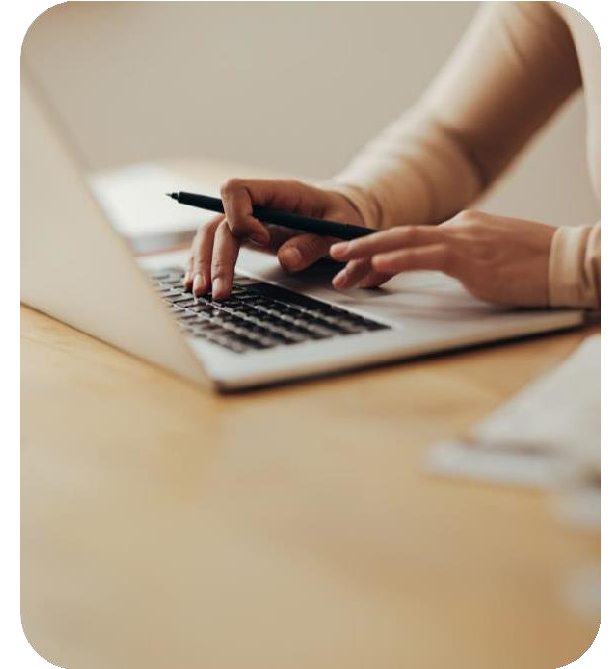
- + If a request requires further clinical review, we welcome requests for a clinical consultation with an EviCore medical director.

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

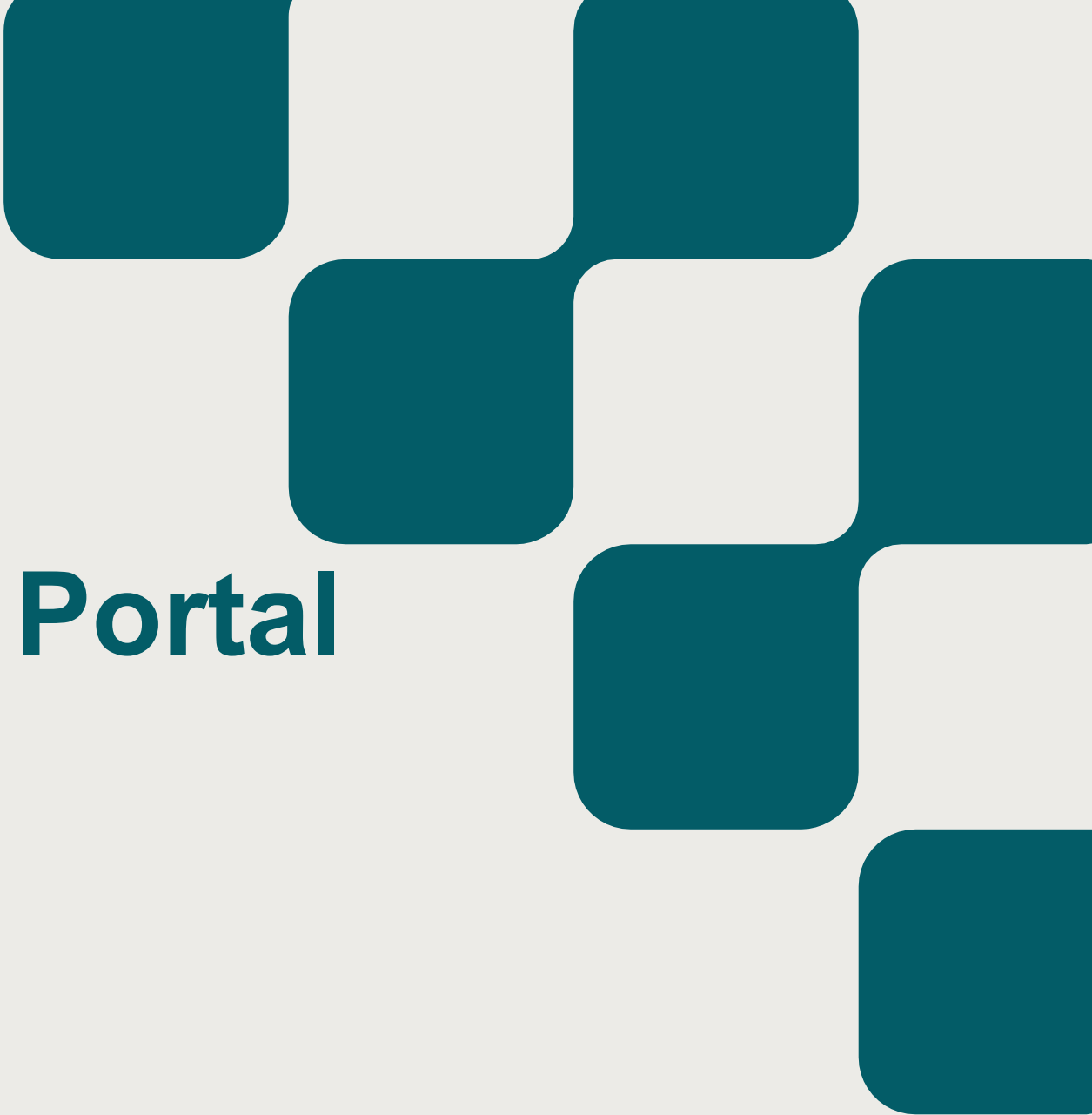
Retrospective Authorization Requests

- + 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 – 72 hours.





EviCore's Provider Portal

EviCore Provider Portal | Access and Compatibility

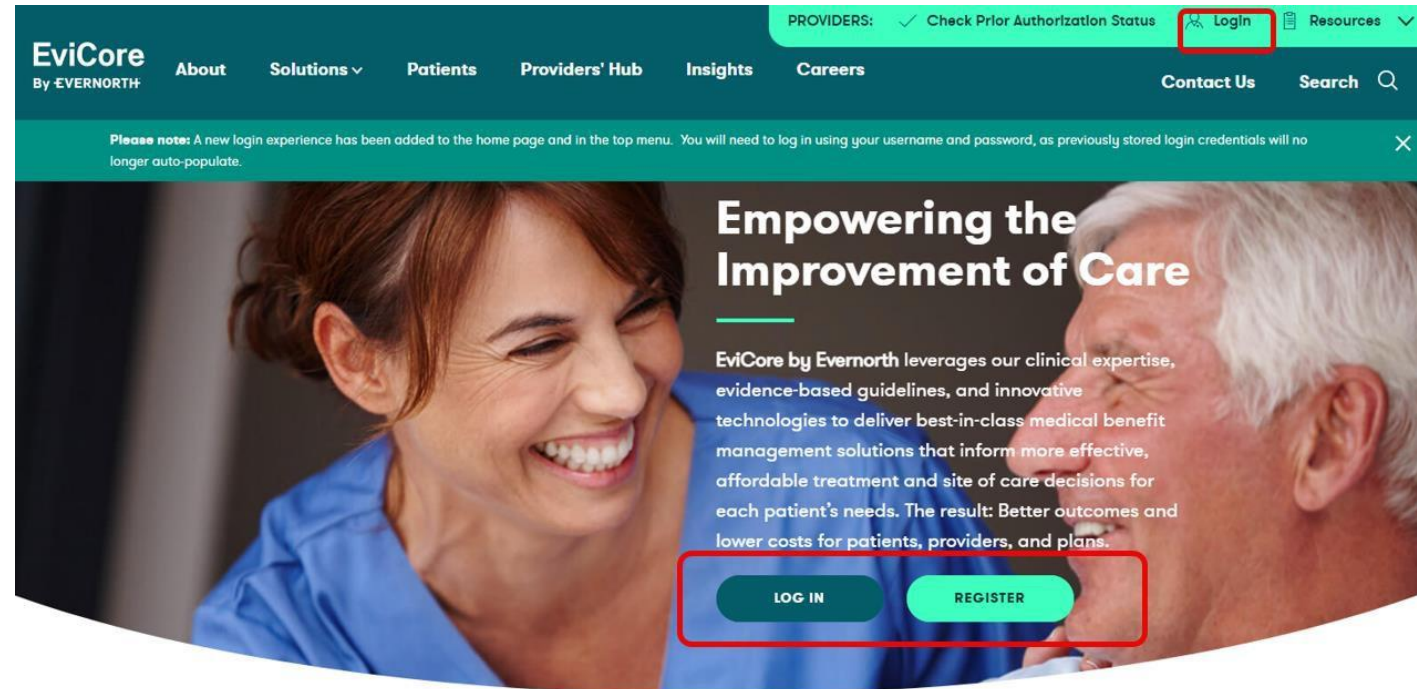
Most providers are already saving time submitting clinical review requests online vs. telephone.

+ To access resources on the EviCore Provider Portal, visit [Homepage | EviCore by Evernorth](#)

+ Already a user?

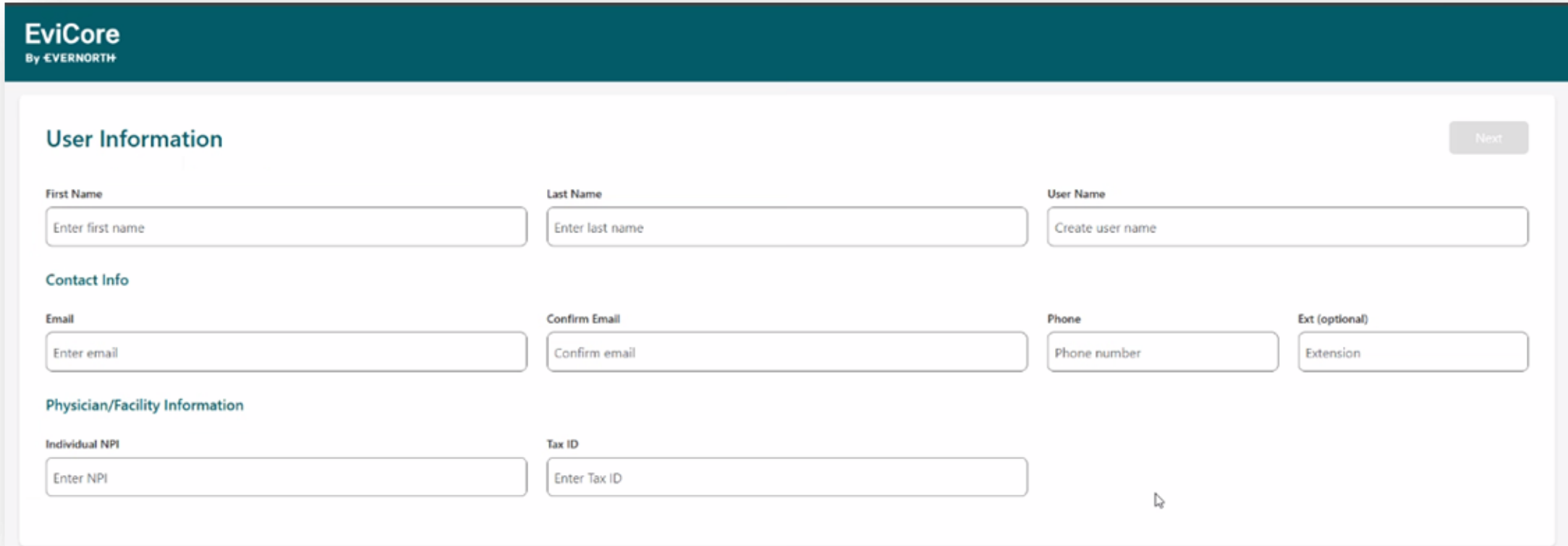
Log in with User ID & Password.

+ 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.

Registering for an EviCore Provider Portal Account



The screenshot shows the EviCore registration form with a teal header. The form is divided into three sections: User Information, Contact Info, and Physician/Facility Information. Each section contains input fields for various details, and a 'Next' button is located in the top right corner of the form area.

EviCore
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User Information Next

First Name Last Name User Name

Contact Info

Email Confirm Email Phone Ext (optional)

Physician/Facility Information

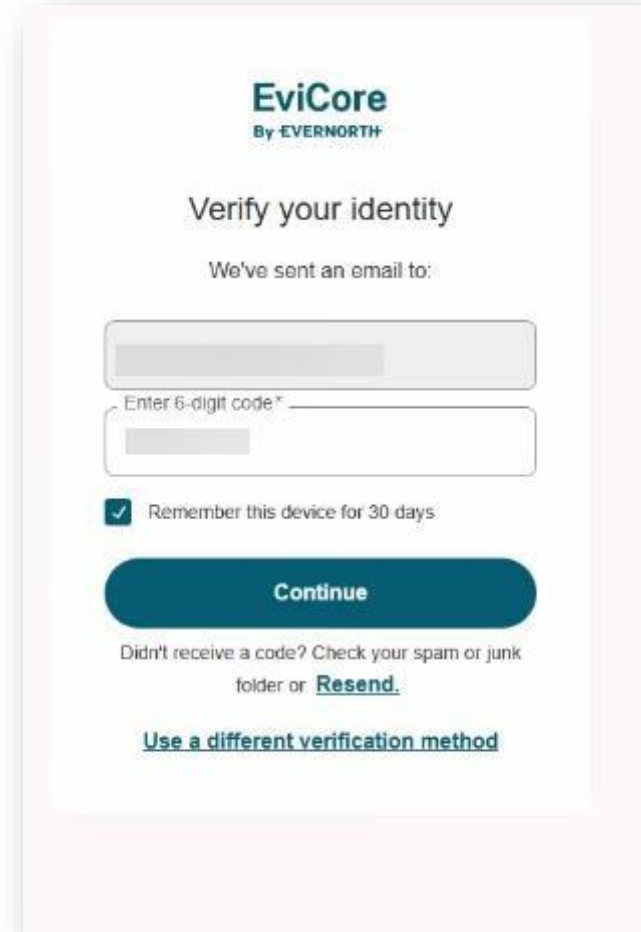
Individual NPI Tax ID

- 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.

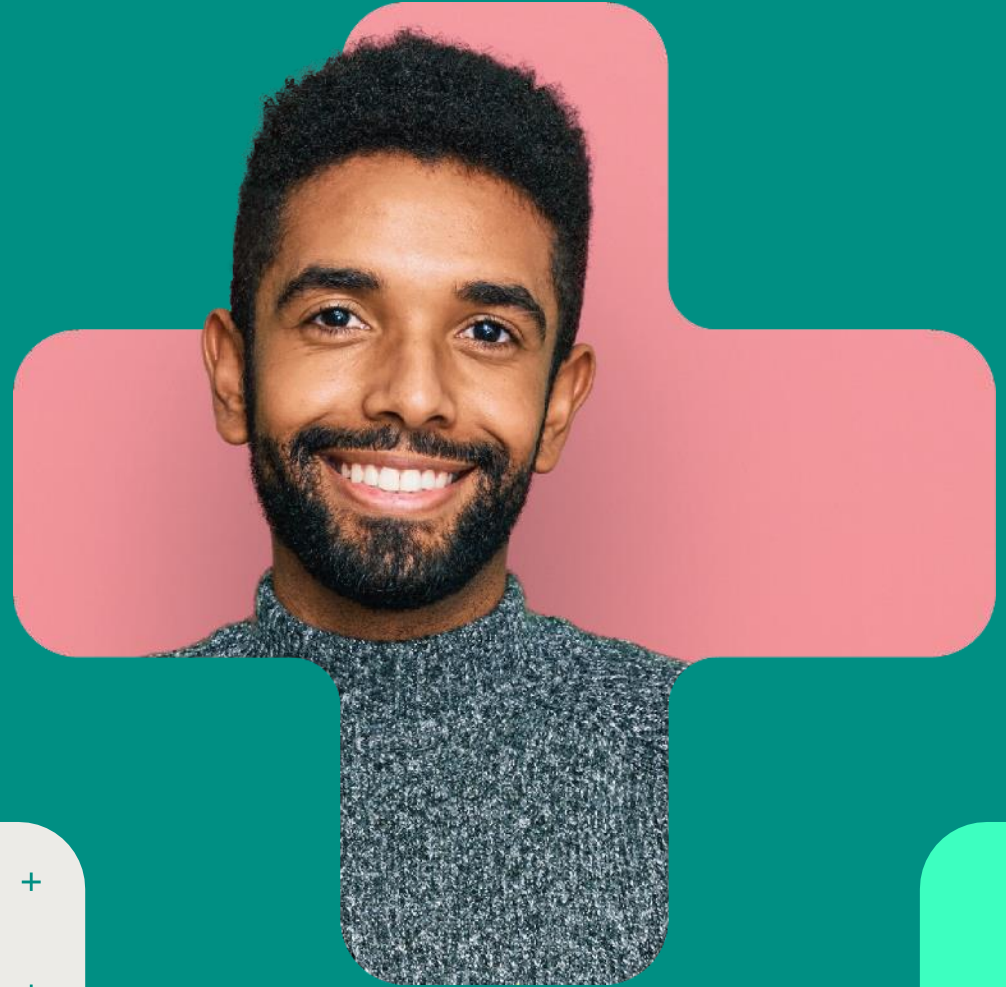
Setting Up Multi-Factor Authentication (MFA)

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.

A screenshot of the EviCore MFA verification interface. At the top is the EviCore logo with 'By EVERNORTH' underneath. The main heading is 'Verify your identity'. Below this, it says 'We've sent an email to:' followed by a text input field. Underneath that is a label 'Enter 6-digit code*' and another text input field. A checkbox with a checkmark is labeled 'Remember this device for 30 days'. A large teal 'Continue' button is centered below the checkbox. At the bottom, there is a link that says 'Didn't receive a code? Check your spam or junk folder or [Resend](#).' and another link below it that says '[Use a different verification method](#)'.

Building a Case on EviCore's Provider Portal



Provider Shared Worklist

EviCore

By EVERNORTH

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...

Q

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

David Gates will have access to your worklist

X

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

X

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.

Request an Authorization



You can request an authorization by clicking on “Request an Authorization” or use the “Portals” drop down and go straight to the CareCore portal.

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.

Video Resources



Case Build and Submission

Patient Eligibility Lookup

New Patient Registration

Member ID
(no spaces or dashes)

Date of Birth (MM/DD/YYYY)

Last Name

First Name (optional)

SEARCH

CANCEL

Current Patients

Filter by Physician

All Providers

(type to filter by patient name)

User or provider has no patients

GO

After selecting **Medical Oncology Pathways**, the referring provider, the health plan, and member, either register new members or select current patients from the drop-down list.

If a new patient is being registered and eligibility is verified, a confirmation screen will appear. Click “Yes” to continue.

New Patient Registration

Provider: 10

Health Plan: PLAN-X

Member ID: 5

Date of Birth: /1971

Name: \

City, State: \

Do you want to continue with this patient?

YES

NO

Case Build and Submission

Clinical Certification

NAD [REDACTED] [REDACTED]/1987

[REDACTED]

C [REDACTED] 167

[REDACTED] ID 25 [REDACTED]

Age: 36

Male

NEW REVIEW

The Patient History Screen becomes the hub for all future requests or data relating to this patient—including a record of previous requests for services through EviCore, authorization numbers and dates, and clinical summaries based on the information provided through the request process.

Reviews									
Date	Physician	Case #	Cancer Type	Therapy	Treatment	Status			
1/29/2024	BE [REDACTED] RIA	[REDACTED]	Undetermined	Primary	Undetermined	Expired			VIEW HISTORY

Click to view clinical information, Jcodes, and expiration date.

Case Build and Submission

Requested Service + Diagnosis

This procedure will be performed on 1/26/2024. CHANGE

Medical Oncology Pathways

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

CHEMO

CHEMOTHERAPY

Don't see your procedure code or type of service? [Click here](#)

Primary Chemotherapy and Supportive drugs must be entered as separate requests.

Diagnosis

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

colon

LOOKUP

	Diagnosis Code	Description
SELECT	153.1	Malignant neoplasm of transverse colon
SELECT	153.2	Malignant neoplasm of descending colon
SELECT	153.3	Malignant neoplasm of sigmoid colon

Attention!

CHEMO – Chemotherapy: Select this option for primary therapy; when the drug/regimen is being used to treat the cancer itself. If you need supportive drugs as well, you will have an option to request those at the end of the primary therapy request.

SPORT – Supportive: Select this option when the drug(s) are being used to prevent or treat the side effects of the primary therapy (example: anti-emetics).

OK

Select CHEMO for Chemotherapy treatment regimen or select SPORT for supportive medicine used to treat the side effects of the cancer treatment.

Clinical Certification Requests

Clinical 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)

Proceed to Clinical Information

Will there be any additional procedures needing prior authorization for the same patient, date of service, and site of service?

☐ Yes ☐ No

SUBMIT

Attention!

Is this a request for a bilateral procedure of a previously requested authorization?

YES

NO

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

Proceed to Clinical Information

Which anatomy will be examined with the requested study?

☐ Hip ☒ Knee ☐ Ankle

Submit

Show Review History

Review History:

Which anatomy will be examined with the requested study?

[Knee](#)

Which side will be examined with the requested study? [Left](#)

☐ Finish Later

Did you know?

You can save a certification request to finish later.

Clinical Certification Requests and Sample Questions

Proceed to Clinical Information

Was the patient initially diagnosed with metastatic disease beyond locoregional nodes?

☐ Yes ☐ No

SUBMIT

Proceed to Clinical Information

Most recent entry for this patient: None

What is the histology of the cancer?

- ☐ Papillary carcinoma
- ☐ Follicular carcinoma
- ☐ Oncocytic cell carcinoma
- ☐ Medullary carcinoma
- ☐ Anaplastic carcinoma

SUBMIT

Proceed to Clinical Information

Has the disease persisted, progressed or recurred?

☐ Yes ☐ No

SUBMIT

Proceed to Clinical Information

Enter the month and year of initial diagnosis in the format mm/yyyy. If the month is not known enter "00" for MM.

SUBMIT

Users will be asked a series of questions necessary to generate the recommended treatment list for the patient being treated. A typical traversal will have between 5 and 12 questions based on the complexity of the cancer. The system will dynamically filter to only the minimum number of questions needed.

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Clinical Certification Requests – NCCN Alignment

Proceed to Clinical Information

The treatment options listed below reflect the recommendations of the National Comprehensive Cancer Network (NCCN) based on the clinical information submitted. Febrile Neutropenia and Emetic Risk are sourced from the NCCN Guidelines and supplemented by supporting literature.

By selecting an NCCN regimen you will be granted an immediate authorization.* If a Pathway regimen is not selected, a peer consultation with an eviCore Medical Director may be required.

*Other policies may apply in select situations.

You will be given the ability to select biosimilar products – when available – after first selecting your regimen below.

Select Treatment Option:

	Regimen	Pathway	Febrile Neutropenia Risk	Emetic Risk
☐	VAIA: (Vincristine + Doxorubicin (alternating with Dactinomycin + Ifosfamide + mesna)	☐	High	High
☐	VDC/IE (Vincristine + Doxorubicin HCL + Cyclophosphamide + Ifosfamide + Etoposide)	☐	High	High
☐	VIDE (Vincristine + Ifosfamide + Doxorubicin HCL (or Dactinomycin) + Etoposide)	☐	High	High
☐	Build a Custom Treatment Plan (May Require Additional Clinical Review)			

SUBMIT

All NCCN recommended treatments are displayed. Custom Treatment plans can be submitted for any case where the provider does not want to use a recommended regimen and will be reviewed by a clinical reviewer.

Clinical Certification Requests – Customized Drug Selection

Proceed to Clinical Information

Select the chemotherapy drug(s) for the treatment regimen from the Drug List below.

- If you are able to select the treatment option using the Drug List, provide administration schedule and select "SUBMIT" to continue to the next step.
- If a chemotherapy drug is not on this list, and it is a newly approved chemotherapy drug that will be billed with a miscellaneous code, please contact customer service to have the drug added to the treatment regimen.

Drug List:

- ☒ 5-Fluorouracil (Adrucil, 5FU, 5FU, Adrucil)
- ☐ 5FU (5-Fluorouracil)
- ☐ 5FU (5-Fluorouracil)
- ☐ Abemaciclib - oral (Verzenio)
- ☐ Abiraterone Acetate - oral (Zytiga, Zytiga)
- ☐ Abiraterone Acetate - oral (Zytiga, Zytiga) } Yonsa
- ☐ Abraxane (Paclitaxel (albumin-bound))
- ☐ Abraxane (Paclitaxel (albumin-bound))
- ☐ Abraxane (Paclitaxel (albumin-bound))
- ☐ Abraxane (Paclitaxel (albumin-bound))
- ☐ Acalabrutinib - oral (Calquence, Calquence)
- ☐ Actemra (Tocilizumab)
- ☐ Actimmune (Interferon, gamma-1b)
- ☐ Adagrasib - oral (Krazati)
- ☐ Adcetris (Brentuximab Vedotin)
- ☐ Ado-Trastuzumab Emtansine (Kadcyla)
- ☐ Adriamycin (Doxorubicin HCL)
- ☐ Adrucil (5-Fluorouracil)
- ☐ Adrucil (5-Fluorouracil)

- ☐ Lynparza (Olaparib - oral)
- ☐ Lynparza (Olaparib - oral)
- ☐ Lytgobi (Futibatinib - oral)
- ☐ Lytgobi (Futibatinib - oral)
- ☐ Margenza (Margetuximab-cmkb)
- ☐ Margetuximab-cmkb (Margenza)
- ☐ Mekinist (Trametinib - oral)
- ☐ Mekinist (Trametinib - oral)
- ☐ Mekinist (Trametinib - oral)
- ☐ Mektovi (Binimetinib - oral)
- ☐ Mektovi (Binimetinib - oral)
- ☐ Melphalan HCL - inj (Alkeran)
- ☐ Melphalan HCL (Evomela)
- ☐ Methotrexate (accord)
- ☐ Midostaurin - oral (Rydapt, Rydapt)
- ☐ Mirvetuximab Soravtansine-gynx (Elahere, Elahere, Elahere)
- ☐ Mitomycin (Jelmyto)
- ☐ Mitomycin (Mutamycin, Mutamycin)
- ☐ Mitoxana (Ifosfamide)

Proceed to Clinical Information

Is there any additional clinical information you would like to submit at this time?

Documentation to support your proposed treatment should be submitted in the following manner:

- Free text in box below
- Attach documentation to case

If you need additional time, click "Save and Exit" and return by clicking "RESUME".

Click "Submit" if you have no additional clinical information to add at this time.

Enter supporting Clinical Information in the field below:

You may attach up to 5 documents no larger than 5 MB each (25 MB total). Click "Browse" to select the document from your desktop or other network location.

Allowable file formats:

.DOC, .DOCX, .PDF, .JPG, .JPEG, .TIF, .TXT

Attach a document:

Choose File No file chosen

Drugs are selected from a drop down list and the user has the opportunity to attach or enter supporting information for the request.

Summary Screen

Summary of Your Request

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

Your case has been APPROVED.

The prior authorization you submitted, Case [REDACTED], has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.

Provider Name:	DR. [REDACTED]	Contact:	B
Provider Address:	[REDACTED] [REDACTED] 3	Phone Number:	(555) 555-5555
		Fax Number:	(555) 555-5555
Patient Name:	[REDACTED]	Patient Id:	[REDACTED]
Insurance Carrier:	[REDACTED]		
Site Name:	[REDACTED]	Site ID:	[REDACTED]
Site Address:	[REDACTED] [REDACTED] 10		
Primary Diagnosis Code:	C50.412	Description:	Malignant neoplasm of upper-outer quadrant of left female breast
Secondary Diagnosis Code:		Description:	
Date of Service:	2/2/2024	Drug(s):	PACLITAXEL (TAXOL, NOV-ONXOL, TAXOL, NOV-ONXOL), TRASTUZUMAB-DKST (OGIVIRI)
HCPCS Code(s):	J9267, Q5114		
Authorization Number:	[REDACTED]		
Review Date:	1/30/2024 1:59:59 PM		
Expiration Date:	4/2/2025		
Status:	Your case has been APPROVED. The prior authorization you submitted, Case [REDACTED] has been received. Additional case status notifications will be sent if you opted in for email notifications. Thank you.		

CANCEL

PRINT

GO TO PATIENT HISTORY

REQUEST SUPPORTIVES

Selection of one of the recommended treatment regimens will result in immediate approval of all drugs in the requested regimen with an authorization time span sufficient to complete the entire treatment.

No further action is needed unless the treatment needs to be changed due to disease progression or other clinical factors.

Ongoing Sessions for Web Portal Training

- + Provides step-by-step guidance on submitting requests through the EviCore provider portal
- + Includes portal registration, case lookup, and scheduling peer to peer consultations

Register for Provider Training 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 a great option for those who are new to EviCore.com and the prior authorization process.

Provider Resources



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](#)

Contact EviCore's Dedicated Teams



Web-Based Services and Portal Support

- Live chat
- [ECRM](#)
- Phone: **800.646.0418** (option 2)

Provider Engagement

Regional team that works directly with the provider community. 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.

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 the top navigation bar of the EviCore.com website. The bar is teal with white text. On the right side, there is a dropdown menu labeled 'Resources' with a chevron icon. The dropdown menu is open, showing a list of links. The first link is 'PROVIDERS:' followed by a checkmark icon and the text 'Check Prior Authorization Status'. Next to it is a 'Login' button with a user icon. Below these are three buttons: 'CLINICAL GUIDELINES', 'PROVIDER RESOURCES', and 'GO TO PROVIDER'S HUB >'. The 'PROVIDER RESOURCES' button is highlighted with a teal background. Below the buttons, there are three sections: 'Clinical Worksheets', 'Network Standards/Accreditations', and 'Training Resources'. The 'I Would Like To' section lists several options: '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', and 'Access Claims Portal'. The 'Learn How To' section lists: 'Submit A New Prior Authorization', 'Find Contact Information', and 'Podcasts'.

Provider Resource Site

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 materials
- + CPT code lists

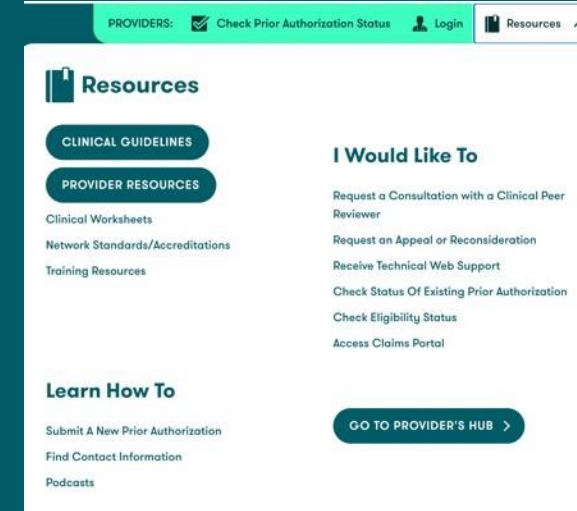


Access HealthSpring's provider resources at:
[Health Care Providers | HealthSpring](#)

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 healthcare" 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.

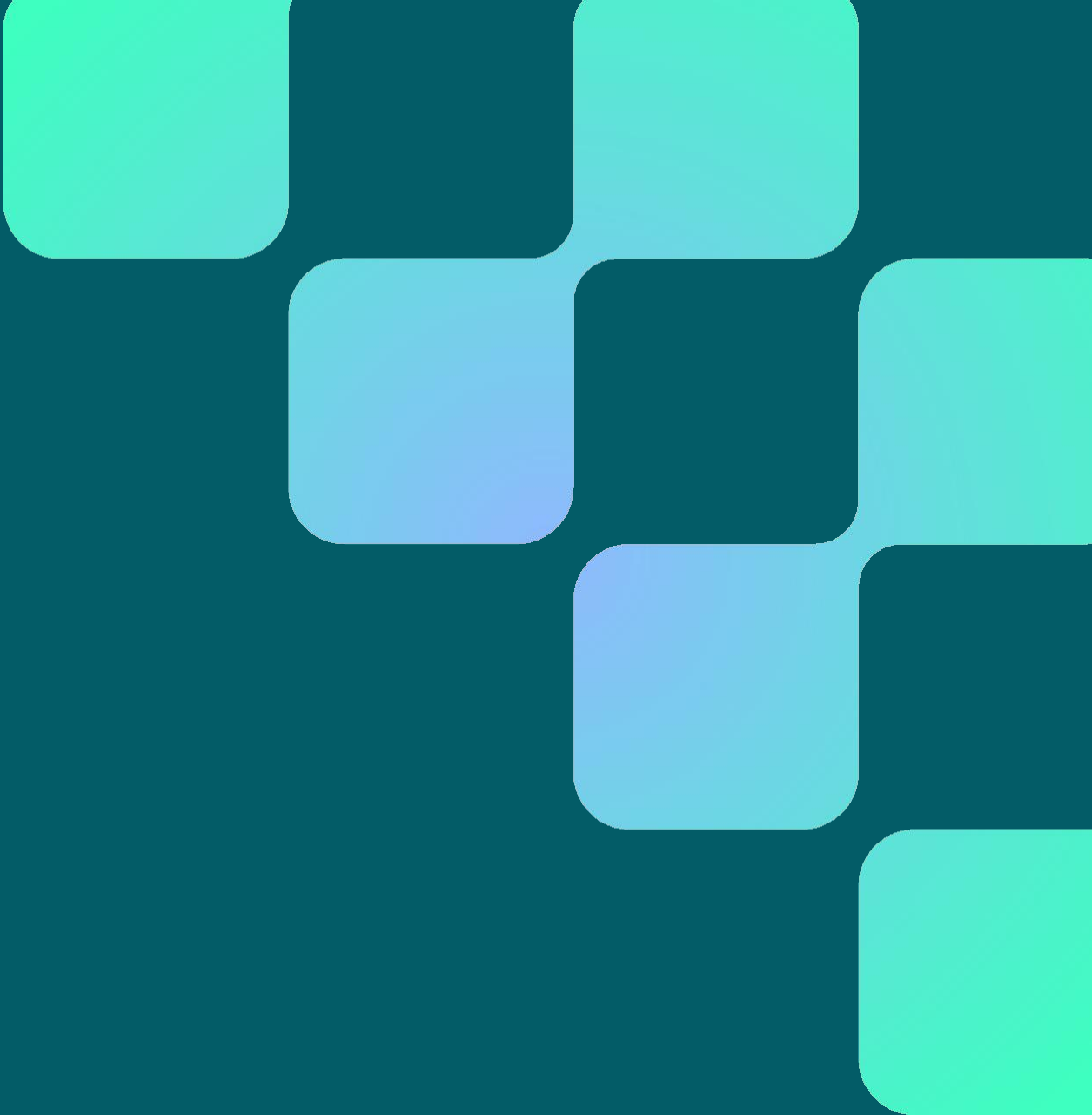
Search by Health Plan ...



Contacts and Helpful Links

Client & Provider Operations, Portal Support, Network Support, etc.	ECRM
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 [Request Peer to Peer Consultation](#)

Authorization Lookup

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

ALL POST DECISION OPTIONS



*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.

The image displays two screenshots of the EviCore 'New P2P Request' form, illustrating the steps to schedule a Peer-to-Peer appointment.

Top Screenshot: Initial Form

- Case Info** | **Questions** | **Schedule** | **Confirmation**
- New P2P Request** | **EviCore By EVERNORTH**
- Case Reference Number: (Case information will auto-populate from prior lookup)
- Member Date of Birth:
- + Add Another Case** (indicated by a blue arrow)
- Lookup Cases >** (indicated by a blue arrow)

Bottom Screenshot: Confirmation Screen

- New P2P Request** | **EviCore By EVERNORTH**
- Case Ref #: (indicated by a blue arrow)
- Remove** | **P2P Eligible** (indicated by a blue arrow)
- Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.** (indicated by a blue arrow)
- Member Information**
 - Name
 - DOB
 - State
 - Health Plan
 - Member ID
- Case P2P Information**
 - Episode ID
 - P2P Valid Until: 2020-11-11
 - Modality: MSK Spine Surgery
 - Level of Review: Reconsideration P2P (indicated by a blue arrow)
 - System Name: ImageOne
- Continue** (indicated by a blue arrow)

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

Level of Review

MSK Spine Surgery

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 a web form for scheduling a Peer-to-Peer (P2P) appointment. At the top, there is a progress bar with four steps: Case Info (checked), Questions (checked), Schedule (checked), and Confirmation (active, indicated by a yellow circle). The form is divided into two main sections. The left section, titled 'P2P Info', contains a 'Case Info' box with fields for Date (Mon 5/18/20), Time (6:30 pm EDT), and a 'Reviewing Provider' dropdown. Below this is a '1st Case' box with fields for 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 right section, titled 'P2P Contact Details', contains several fields: 'Name of Provider Requesting P2P' (Dr. Jane Doe), 'Contact Person Name' (Office Manager John Doe), 'Contact Person Location' (Provider Office), 'Phone Number for P2P' ((555) 555-5555), 'Phone Ext.' (12345), 'Alternate Phone' ((xxx) xxx-xxxx), 'Phone Ext.' (Phone Ext.), '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. A 'Submit' button is located at the bottom right of the form.

The screenshot shows a scheduling confirmation page. At the top, there is a 'Scheduling' header with a calendar icon. Below this, the word 'Scheduled' is displayed. The appointment details are shown in a box: a calendar icon, a clock icon, and the text 'Mon 5/18/20 - 6:30 pm EDT'. To the right of the details, there is a red oval containing the word 'SCHEDULED' in blue capital letters.

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.

 **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 First Name

Contact Last Name *Required*

Contact Last Name

Contact Person Location *Required*

Select...

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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.

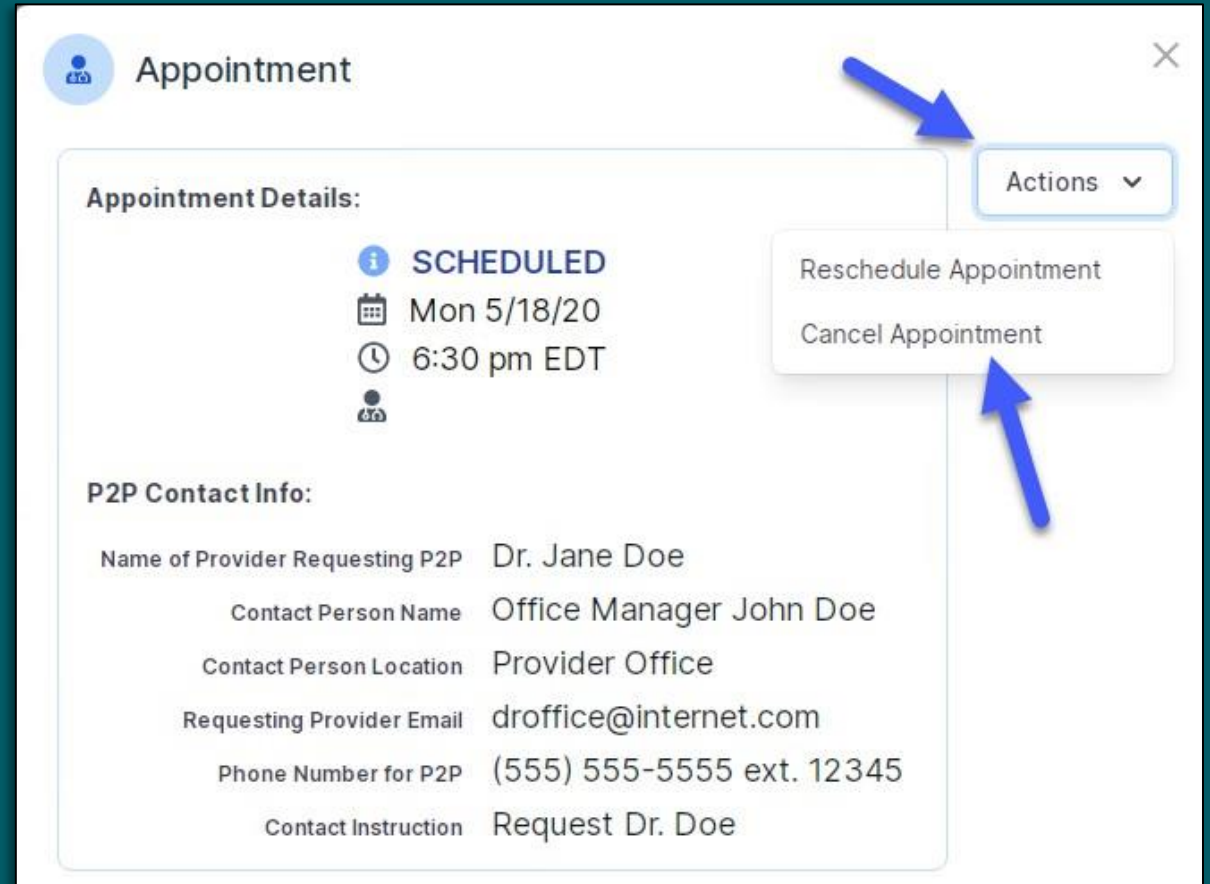
☐ TX licensed same specialty - Caller is aware P2P does not meet TX SSL/specialty match and wants to proceed with P2P

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.



The screenshot shows a window titled "Appointment" with a close button (X) in the top right corner. The window is divided into two main sections: "Appointment Details:" and "P2P Contact Info:". In the "Appointment Details:" section, there is a status "SCHEDULED" with an information icon (i), a date "Mon 5/18/20" with a calendar icon, a time "6:30 pm EDT" with a clock icon, and a person icon. In the "P2P Contact Info:" section, there is a table with the following information:

Name of Provider Requesting P2P	Dr. Jane Doe
Contact Person Name	Office Manager John Doe
Contact Person Location	Provider Office
Requesting Provider Email	droffice@internet.com
Phone Number for P2P	(555) 555-5555 ext. 12345
Contact Instruction	Request Dr. Doe

On the right side of the "Appointment Details:" section, there is an "Actions" drop-down menu. A blue arrow points to the "Actions" menu, and another blue arrow points to the "Cancel Appointment" option in the dropdown list. The "Reschedule Appointment" option is also visible in the dropdown list.