

RADIATION ONCOLOGY MANAGEMENT

HealthSpring (Medicare Advantage)

Provider Orientation Presentation

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	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)



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 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.
- + 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

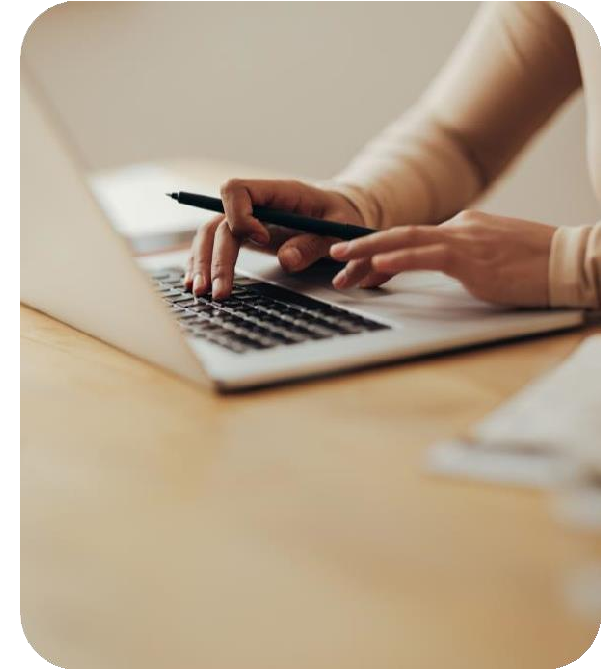
- + If a request requires further clinical review, we welcome requests for a clinical consultation with an EviCore medical director.

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.

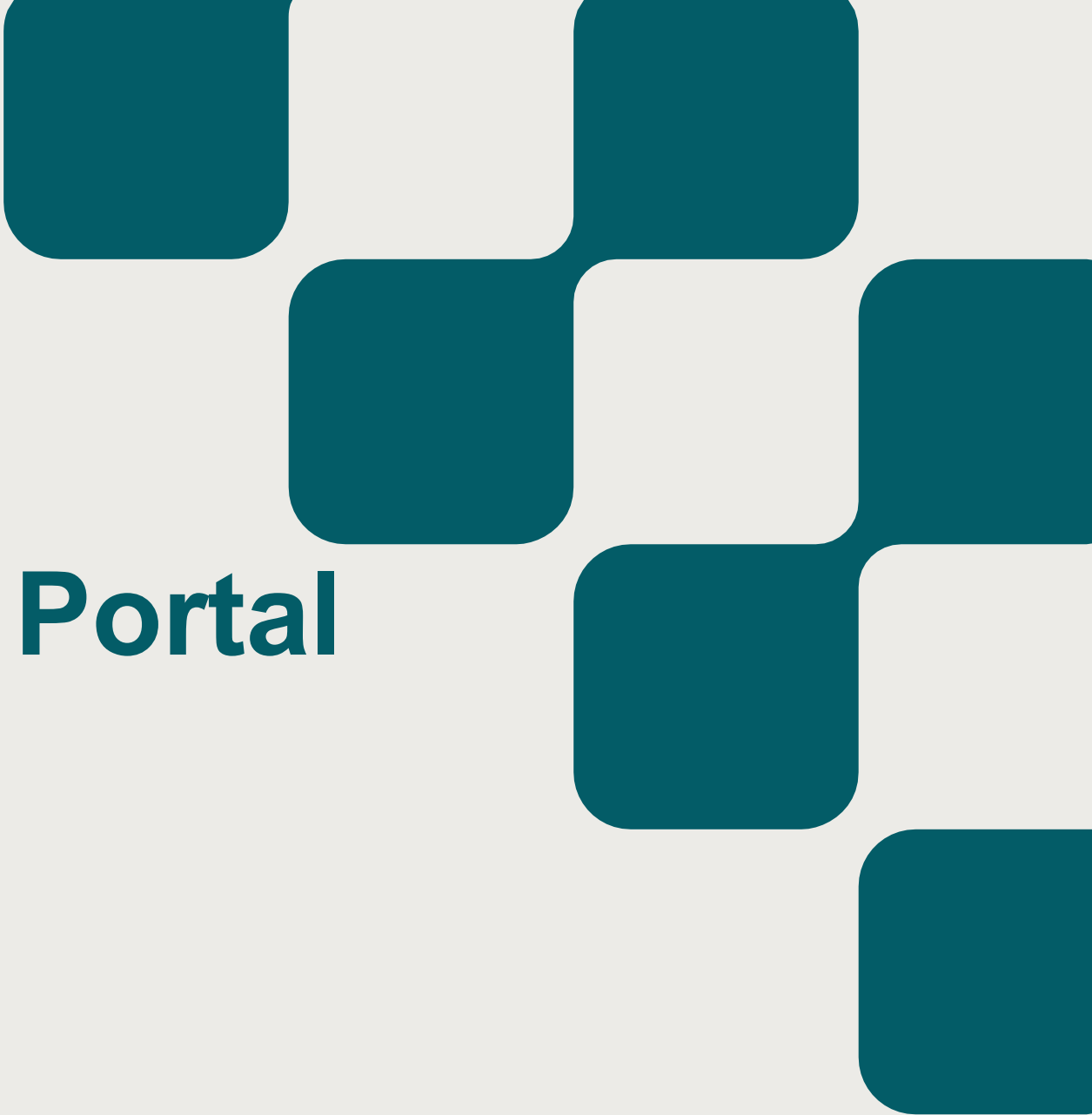


Special Circumstances | Authorization Updates

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

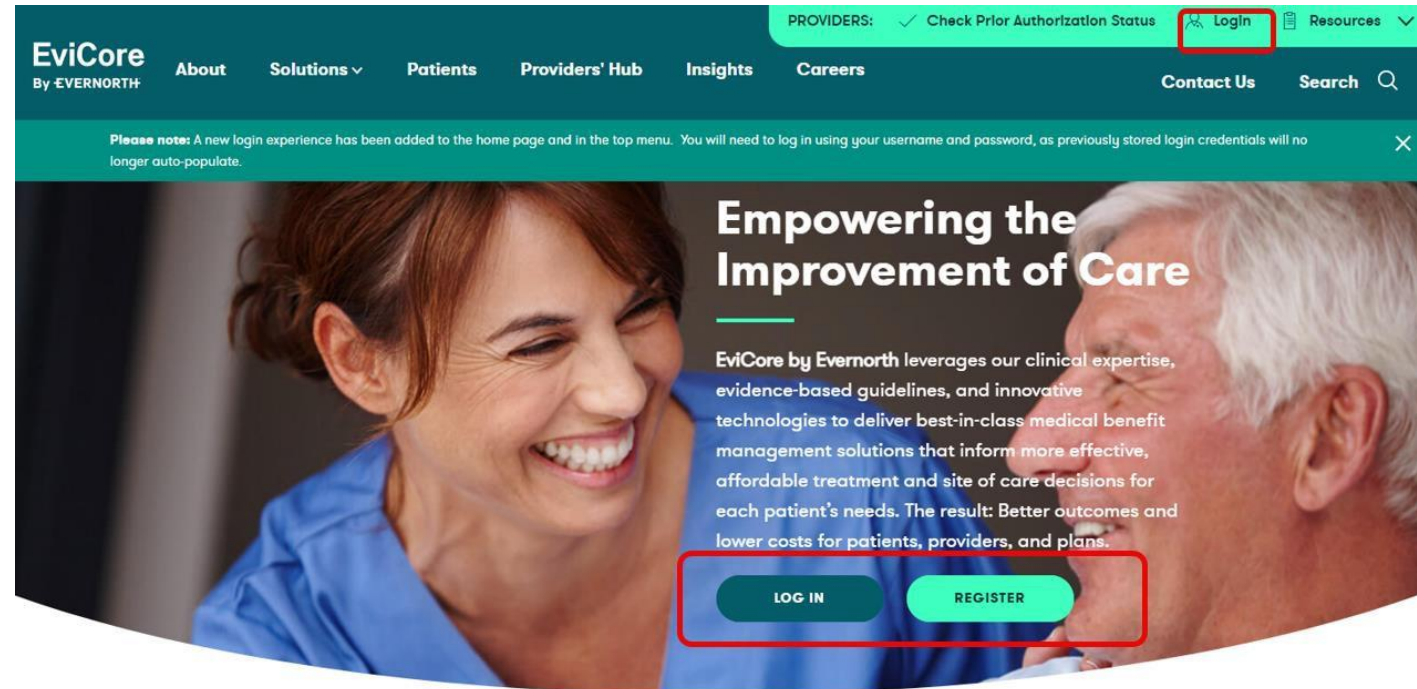
Most providers are already saving time submitting clinical review requests online vs. telephone.

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

+ Already a user?

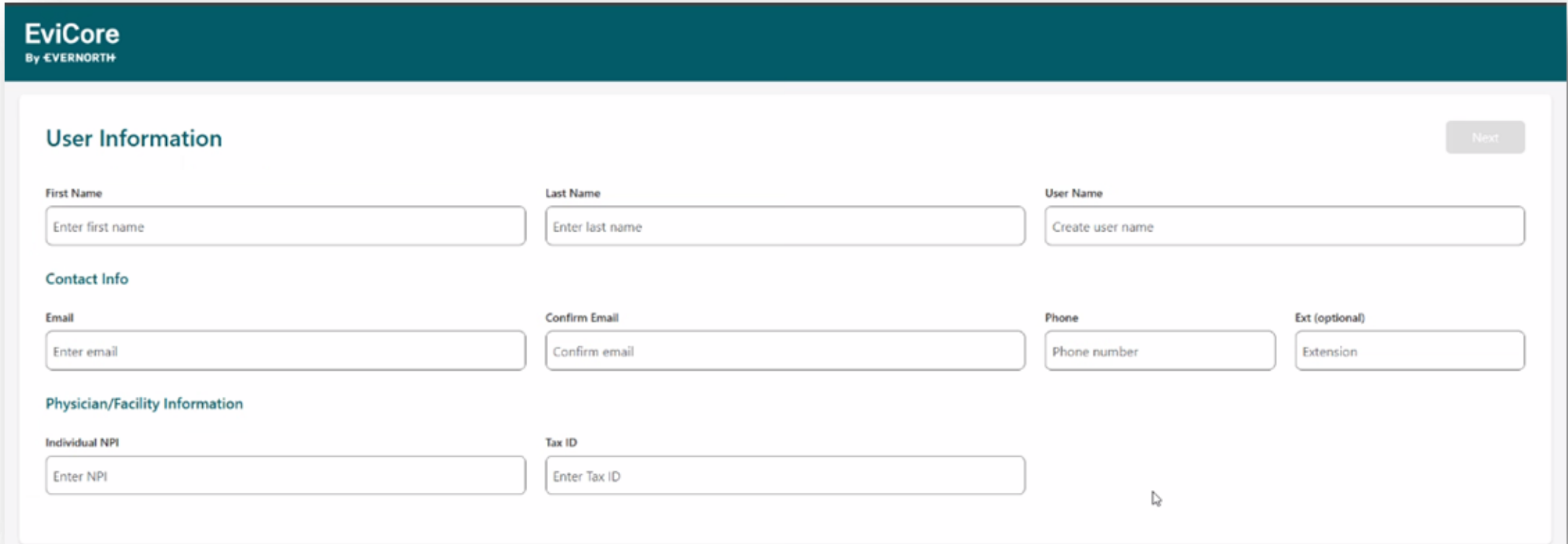
Log in with User ID & Password.

+ 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.

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 at the top right of the form area.

EviCore
By EVERNORTH

User Information Next

First Name Last Name User Name

Contact Info

Email Confirm Email Phone Ext (optional)

Physician/Facility Information

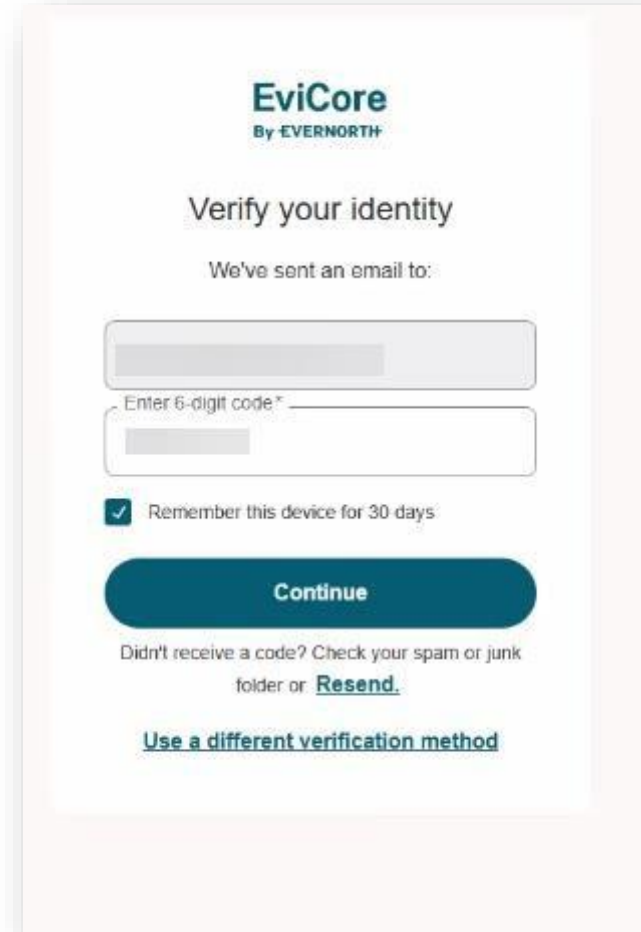
Individual NPI Tax ID

- 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.

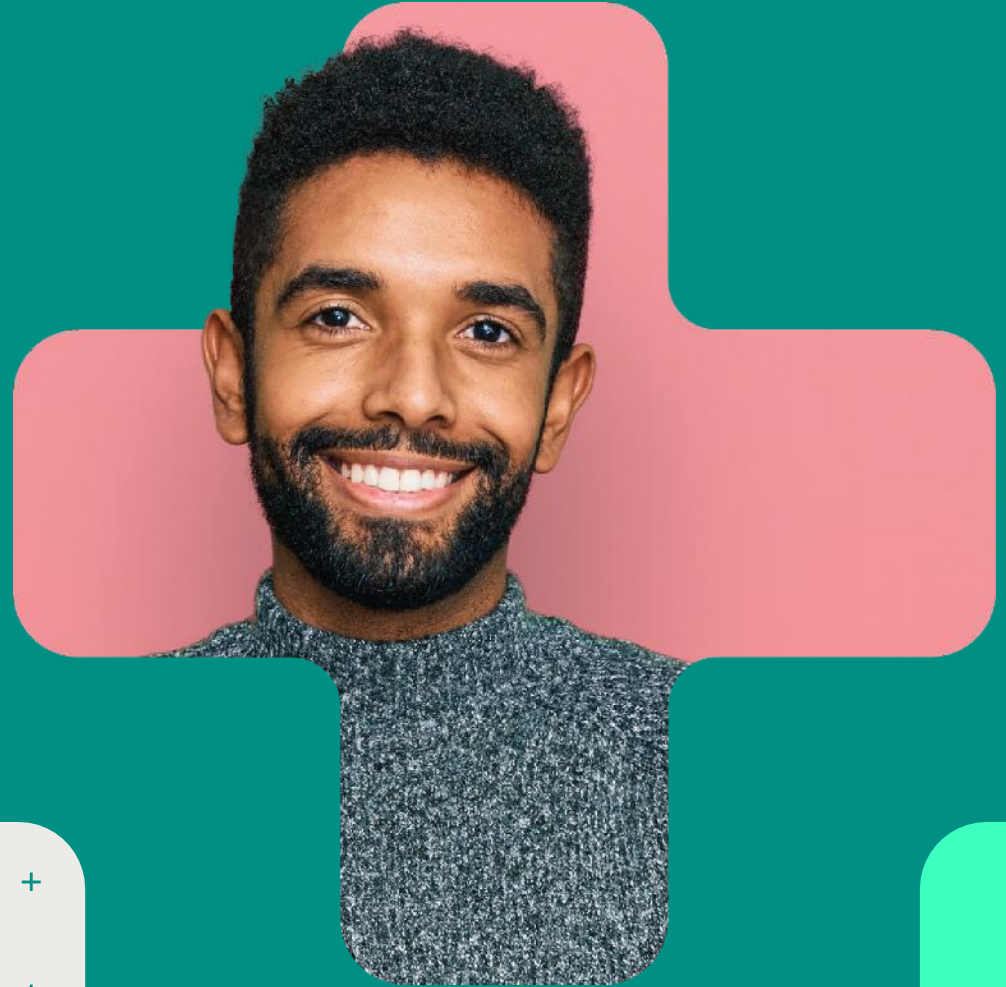
Setting Up Multi-Factor Authentication (MFA)

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...

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

REGISTER NOW



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
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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 enter the following:

- 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

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
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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 7/2/2020 CHANGE

Radiation Therapy Procedures

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

RCADRE

RCANAL

RCBILE

RCBLAD

RCBONE

RCBRAI

RCBREA

RCCERV

RCCNSL

RCCNSN

RCENDO

RCESOP

RCGACA

RCGALL

RCHDKL

RCHENE

RCHEPA

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

Primary Diagnosis Code (Lookup by Code or Description)

LOOKUP

Secondary Diagnosis Code (Lookup by Code or Description)

LOOKUP

Secondary diagnosis code is optional for Radiation Therapy

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:

[Change Procedure or Primary Diagnosis](#)

[Change Secondary Diagnosis](#)

BACKCONTINUE

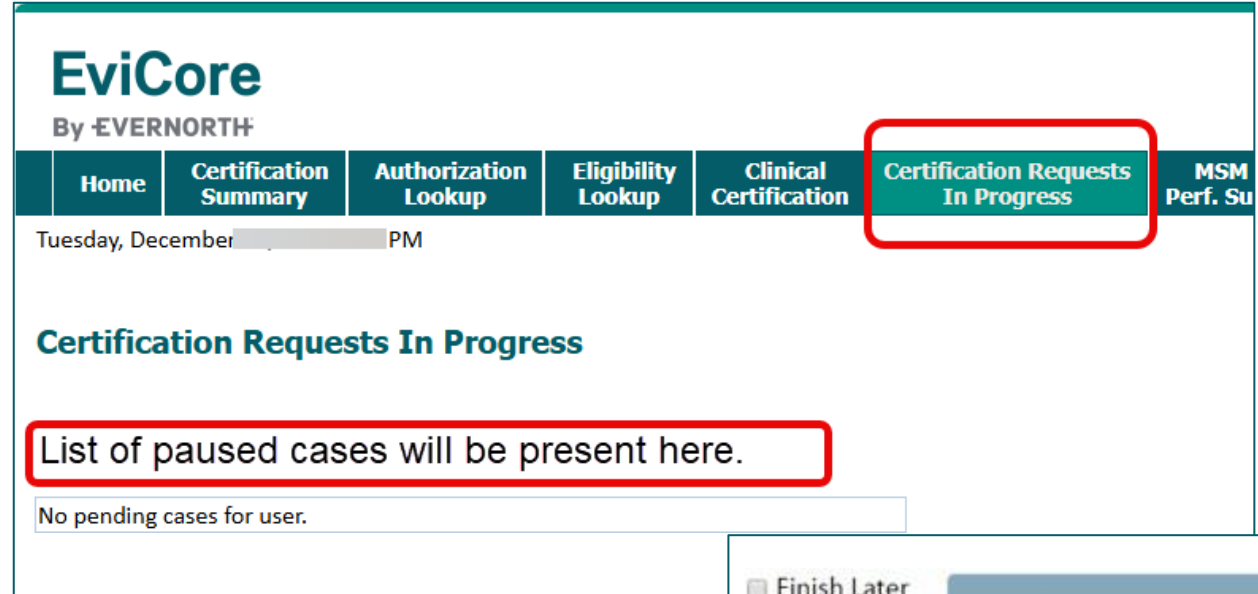
[Click here for help](#)

- + 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

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)



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

1 Does the patient have distant metastases (stage M1) (i.e. to brain, lung, liver, bone)?
☐ Yes ☐ No

1 Where will treatment be directed?
☐ Bilateral breast (treated concurrently)
☒ Left breast
☐ Right breast

1 Will the patient receive concurrent chemotherapy?
☐ Yes ☐ No

1 Will daily image-guided radiation therapy (IGRT) be used for phase I?
☐ Yes ☐ No

1 What is the treatment intent?
☐ Pre-operative (neo-adjuvant)
☐ Definitive (No surgery planned)
☐ Post-operative (adjuvant)
☐ Palliative (for relief of symptoms)

1 What is the T stage?

1 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
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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

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 \(evicore.com\)](#)

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:	DR. MICHAEL J. GONZALEZ	Contact:	781-335-3333
Provider Address:	100 N. MAIN ST. ROCKFORD, IL 60067	Phone Number:	781-335-3333
		Fax Number:	781-335-3333
Patient Name:	JOHN DOE	Patient Id:	12345678
Insurance Carrier:	ABC INSURANCE		
Site Name:	ABC HOSPITAL	Site ID:	123456
Site Address:	100 N. MAIN ST. ROCKFORD, IL 60067		
Primary Diagnosis Code:	R68.89	Description:	Other general symptoms and signs
Secondary Diagnosis Code:	RCBREA	Description:	Breast Cancer
Date of Service:	6/1/2020		
CPT Code:	96110		
Authorization Number:	12345678		
Review Date:	5/20/2020 10:41:09 AM		
Expiration Date:	11/16/2020		
Status:	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 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. On the right side, there is a dropdown menu with the following options: PROVIDERS: (with a checkmark icon), Check Prior Authorization Status (with a checkmark icon), Login (with a person icon), and Resources (with a book icon and an upward arrow). Below the navigation bar, the Resources section is displayed. It features a large heading 'Resources' with a book icon. Underneath, there are two main categories: CLINICAL GUIDELINES and PROVIDER RESOURCES. The PROVIDER RESOURCES category is expanded, showing links to Clinical Worksheets, Network Standards/Accreditations, and Training Resources. To the right of the PROVIDER RESOURCES section, there is a section titled 'I Would Like To' with links 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, and Access Claims Portal. At the bottom of the Resources section, there is a 'Learn How To' section with links to Submit A New Prior Authorization, Find Contact Information, and Podcasts. A prominent button labeled 'GO TO PROVIDER'S HUB >' is located at the bottom right of the Resources section.

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

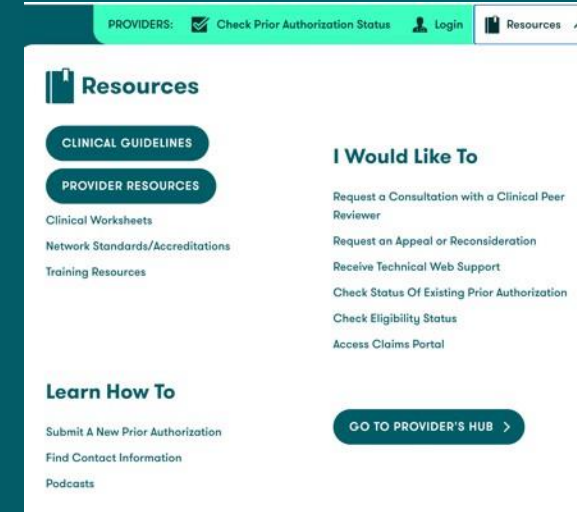


Access HealthSpring's provider resources at:
[Health Care Providers | HealthSpring](#)

Clinical 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.

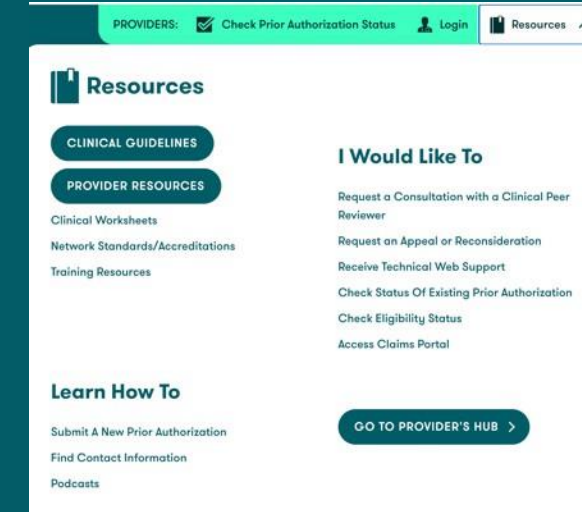
Search by Health Plan ...



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



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.

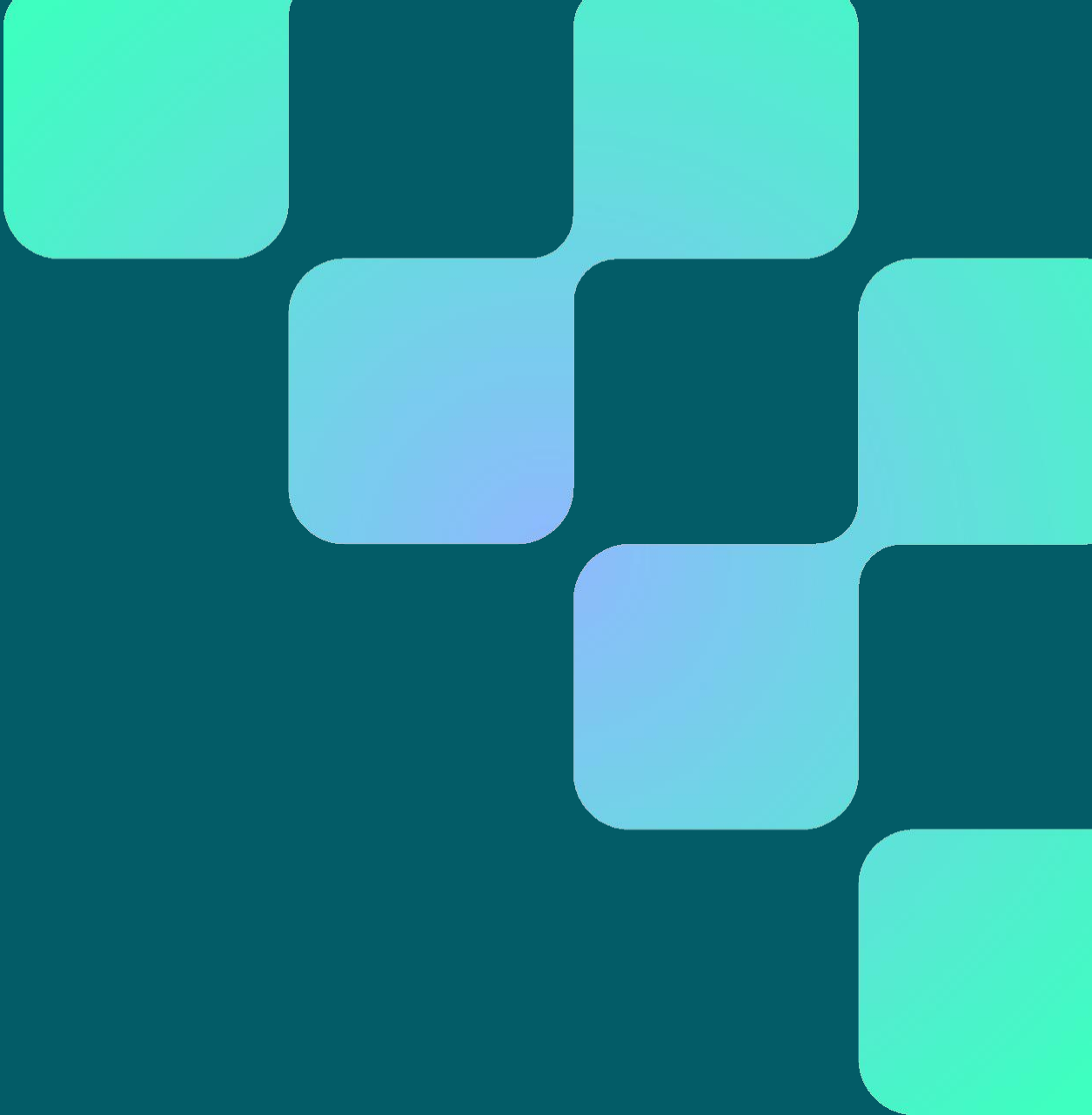
Search by Health Plan ...



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 Request 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](#)
- [Lookup Cases >](#)

Bottom Screenshot: Confirmation Screen

- New P2P Request** | **EviCore By EVERNORTH**
- Case Ref #: (Remove) ✓ P2P Eligible
- Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.**
- 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
 - 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

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 confirmation page titled 'Scheduling' with a calendar icon. Below the title, it says 'Scheduled'. A box displays the appointment details: a calendar icon, a clock icon, and the text 'Mon 5/18/20 - 6:30 pm EDT'. To the right of this box, the word 'SCHEDULED' is written in blue capital letters inside a red oval.

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.

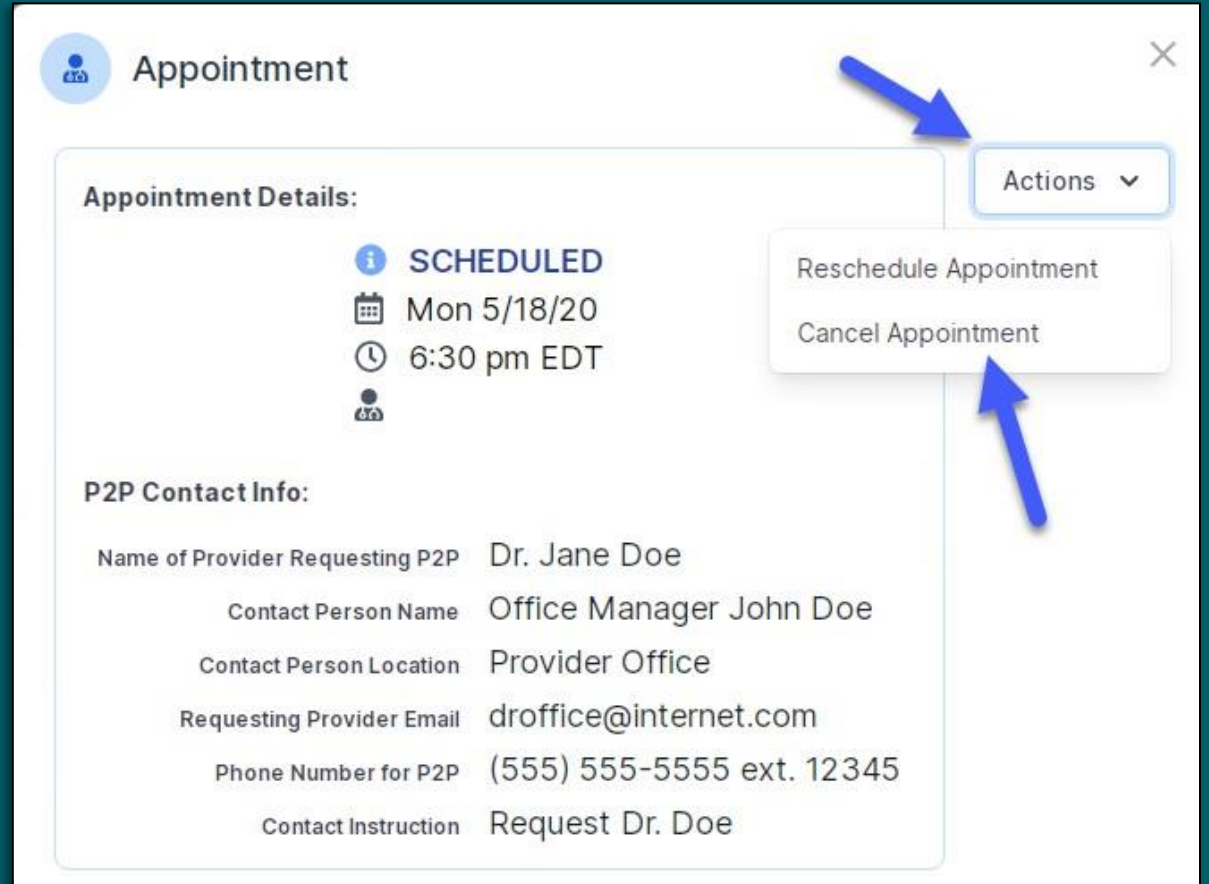
☐ TX licensed same specialty - Caller is aware P2P does not meet TX SSL/specialty match and wants to proceed with P2P

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:". The "Appointment Details:" section includes a status icon (i) labeled "SCHEDULED", a date icon (calendar) labeled "Mon 5/18/20", a time icon (clock) labeled "6:30 pm EDT", and a person icon. The "P2P Contact Info:" section contains a table of information. To the right of the details, 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 menu.

Appointment Details:	
<i>i</i>	SCHEDULED
<i>📅</i>	Mon 5/18/20
<i>🕒</i>	6:30 pm EDT
<i>👤</i>	

P2P Contact Info:	
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

Actions ▾

- Reschedule Appointment
- Cancel Appointment