

Gastroenterology

Provider Orientation Session for Network
Health

Company Overview



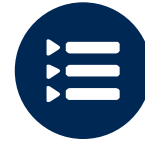
**100M
Members
Managed**

**Headquartered in Bluffton, SC
Offices across the US including:**

- Lexington, MA
- Colorado Springs, CO
- Franklin, TN
- Greenwich, CT
- Melbourne, FL
- Plainville, CT
- Sacramento, CA
- St. Louis, MO

EviCore
By EVERNORTH

10 Comprehensive Solutions



The industry's most
**comprehensive clinical
evidence-based guidelines**



5k+ employees including
1k clinicians

Engaging with 570k+ providers



Advanced, innovative, and
intelligent technology



**Quality Improvement
Organizations**
Sharing Knowledge, Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

Gastroenterology - Our Tenth Solution!

10 | Comprehensive Solutions



Our Clinical and Service Approach

+Evidence-Based Guidelines

The foundation of our solutions

Aligned with National Societies:

- American Society for Gastrointestinal Endoscopy
- American College of Physicians
- American College of Gastroenterology
- American Gastroenterological Association
- Canadian Association of Gastroenterology
- European Society of Gastrointestinal Endoscopy



+Clinical Staffing – Multi-Specialty Expertise

Dedicated nursing and physician specialty teams for various solutions

- ♦ **Anesthesiology**
- ♦ **Cardiology**
- ♦ **Chiropractic**
- ♦ **Emergency Medicine**
- ♦ **Family Medicine**
 - Family Medicine / OMT
 - Public Health & General Preventative Medicine
- ♦ **Gastroenterology**
- ♦ **Internal Medicine**
 - Cardiovascular Disease
 - Critical Care Medicine
 - Endocrinology, Diabetes & Metabolism
 - Gastroenterology
 - Geriatric Medicine
 - Hematology
 - Hospice & Palliative Medicine
 - Medical Oncology
 - Pulmonary Disease
 - Rheumatology
 - Sleep Medicine
 - Sports Medicine
- ♦ **Medical Genetics**
- ♦ **Nuclear Medicine**
- ♦ **OB / GYN**
 - Maternal-Fetal Medicine
- ♦ **Oncology / Hematology**
- ♦ **Orthopedic Surgery**
- ♦ **Otolaryngology**
- ♦ **Pain Mgmt. / Interventional Pain**
- ♦ **Pathology**
 - Clinical Pathology
- ♦ **Pediatric**
 - Pediatric Cardiology
 - Pediatric Hematology-Oncology
- ♦ **Physical Medicine & Rehabilitation**
 - Pain Medicine
- ♦ **Physical Therapy**
- ♦ **Radiation Oncology**
- ♦ **Radiology**
 - Diagnostic Radiology
 - Neuroradiology
 - Radiation Oncology
 - Vascular & Interventional Radiology
- ♦ **Sleep Medicine**
- ♦ **Sports Medicine**
- ♦ **Surgery**
 - Cardiac
 - General
 - Neurological
 - Spine
 - Thoracic
 - Vascular
- ♦ **Urology**



400+
Medical
Directors

Covering
51
different
specialties

800+
Nurses

+Why Our Service Delivery Model Works



One centralized intake point allows for timely identification, tracking, trending, and reporting of all issues. It also enables EviCore to quickly identify and respond to systemic issues impacting multiple providers.



Complex issues are escalated to resources who are the subject matter experts and can quickly coordinate with matrix partners to address issues at a root-cause level.



Routine issues are handled by a team of representatives who are cross trained to respond to a variety of issues. There is no reliance on a single individual to respond to your needs.

Program Overview

+Gastroenterology

+EviCore healthcare will begin accepting prior authorization requests for Gastroenterology services on 6/29/2021 for dates of service 7/1/2021 and beyond.

Prior Authorization applies to the following services:

- Esophagogastroduodenoscopy (EGD)
- Capsule Endoscopy (CAP)
- Colonoscopy (COL), non-screening only

Prior Authorization does **NOT** apply to services that are in:

- Emergency Room Services
- 23 Hour Observations
- Inpatient Stays

Monitored Anesthesia Care (MAC)

All ancillary procedure codes, including Monitored Anesthesia, performed in conjunction with denied services, are not covered and will likely not be reimbursed by Network Health if performed.

Provider Resource Page

Providers and/or staff can utilize Network Health Provider Resource page to access a list of covered CPT codes, Clinical Worksheets, FAQs, Quick Reference Guides, and additional educational materials by visiting:

<https://www.EviCore.com/resources/healthplan/network-health-wisconsin?solutionid=061D5D92-A3E1-42CF-96C2-3A96ABDF4F15#solutiondocs>

+Colonoscopy Management

Non-screening and surveillance colonoscopies will be reviewed in this program

- **All non-screening colonoscopies will require medical necessity review.**
- **If an authorization is not on file for non-screening colonoscopy, claims payment may be denied.**
- **Network Health Plan will conduct retrospective claims analyses on screening colonoscopies to ensure proper utilization of screening indications.**
- **Medical necessity review is not required for average-risk* or high-risk** screening colonoscopies**
 - * Average risk applies to those asymptomatic individuals undergoing a screening colonoscopy with no previously diagnosed colon cancer, colonic adenomas, or inflammatory bowel disease involving the colon.
 - ** High risk applies to those asymptomatic individuals undergoing screening colonoscopy due to family history of colorectal cancer or polyps.

+More on Colonoscopy Management

+As you know, colonoscopies are performed for two basic reasons:

- for asymptomatic, routine colorectal cancer screening and
- for diagnostic reasons or for surveillance of a previous colonoscopy's findings.

For this program, asymptomatic routine screening colonoscopies do NOT require an authorization with EviCore and ONLY surveillance/diagnostic colonoscopies do.

For cases in which the indication for the colonoscopy is asymptomatic routine colorectal cancer screening, should the procedure become therapeutic (e.g., removal of a polyp) during its course, authorization is not required.

- **In this situation, the code for the therapeutic procedure should be submitted with a PT modifier (or, in the case of Medicare- modifier 33) signifying that the colonoscopy started as screening but turned therapeutic due to the detection of polyps or other abnormalities during the procedure.**

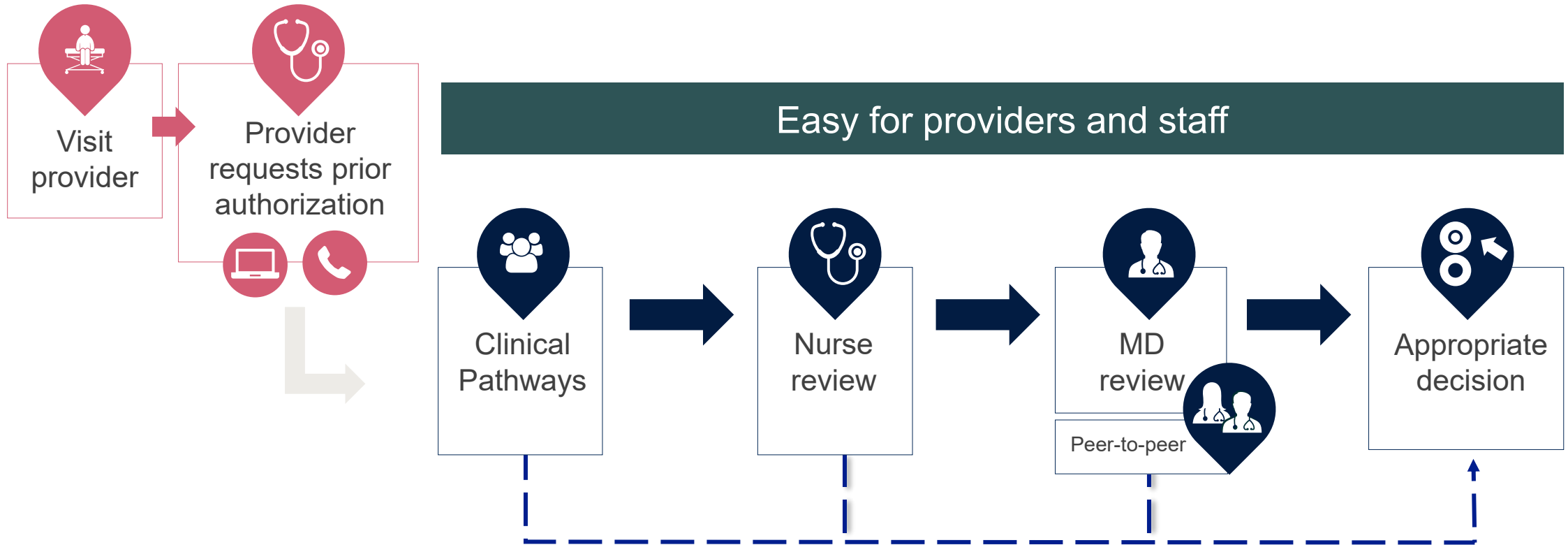
+News about Colorectal Cancer Screenings

+While this program does not require prior authorization for Colorectal Cancer Screenings, we wanted to share an important update.

- In May 2021 the United States Preventative Task Force (USPSTF) published the anticipated update to their recommendation for the age at which to be screened.
- The updated USPSTF recommendation is to be effective January, 2022.
- As a result of this anticipated update, Network Health proactively adopted this recommendation, and has already begun to cover Colorectal Cancer Screenings for patients ages 45 to 49 years.



+Prior Authorization Process



 +By submitting Prior Authorization requests through EviCore's online portal, providers have the potential to receive immediate authorization. Please ensure all necessary clinical information has been provided when answering the clinical pathway (clinical collection process) questions.

+Non-Clinical Information Needed

The following information must be provided to initiate the prior authorization request:

+Member Information

- First and Last Name
- Date of Birth
- Member Identification Number
- Phone Number (If Applicable)

+Ordering Physician Information

- First and Last Name
- Practice Address
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Numbers

Rendering Facility Information

- Facility Name
- Street Address (i.e. 111 Tennessee Rd. Franklin, TN 37067)
- National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Numbers



+Clinical Information Needed

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

- A relevant history and physical examination
- A relevant summary of the patient's clinical condition
- Imaging and/or pathology and/or laboratory reports as indicated relevant to the requested procedure
- Co-morbidities if relevant
- The indication for the specified procedure
- Prior treatment regimens (for example, appropriate clinical trial of conservative management, if indicated)
- Results of prior endoscopic procedures if relevant
- Genetic testing results, if applicable



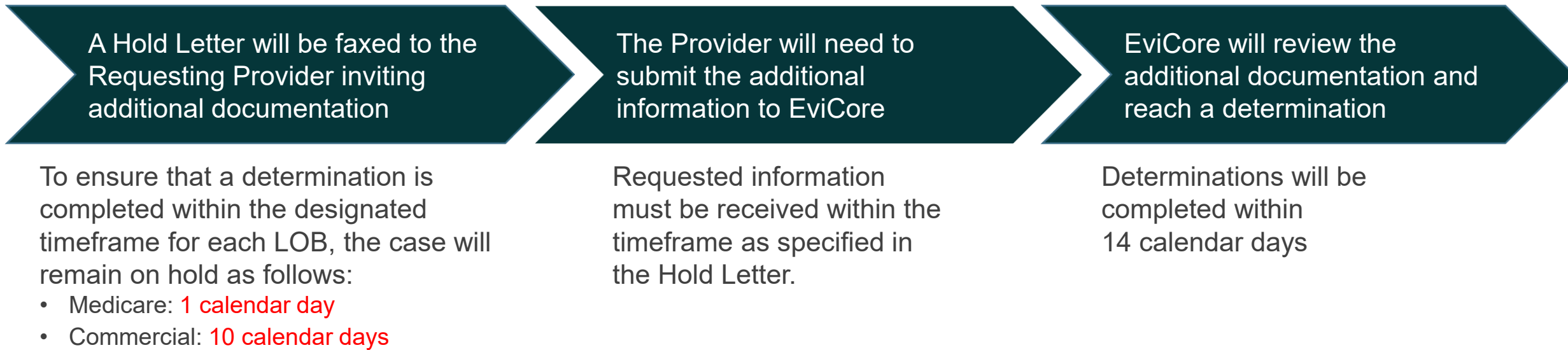
Prior Authorization Process

- Questions are included in the pathway to help EviCore create a case correctly.
- Clinical information is required to determine whether the services requested are medically necessary.
- To assist provider's understanding of the medical necessity expectations, we have resources available on our website:
 - Specific questions and answers about Gastroenterology procedures can be found under solution resources for Gastroenterology: FAQs and EviCore delegated CPT code lists are available
 - Clinical Guidelines are also available on our Providers Hub (screen shots shown later in the presentation)
- **Medicare** cases with incomplete or missing information will receive special handling. CMS allows EviCore to reach out multiple times over a 14 day period to obtain the information required to complete our review.
- Missing or incomplete clinical information will delay case processing.

+Insufficient Clinical – Additional Documentation Needed

Additional Documentation to Support Medical Necessity

+If all required pieces of documentation are not received, or are insufficient for EviCore to reach a determination, the following will occur:



Prior Authorization Outcomes & Special Considerations

+Prior Authorization Outcomes

Approvals and Denials

+Approved Requests

- Requests are processed within 2 business days after receipt of all necessary clinical information.
- Authorizations are typically valid for 90 days from the date of the final determination.

+Denied Requests

- Communication of the denial determination and rationale.
- Instructions on how to request a Clinical Consultation.

+Approval Letter

- The letter will be faxed to the ordering physician and performing facility.
- The member will receive the letter in the mail.
- Approval information can be printed on demand from the EviCore portal.

+ Denial Letter

- The letter will be faxed to the ordering physician and performing facility.
- The member will receive the letter in the mail.
- The letter will contain the denial rationale and appeal options and instructions.



+Reconsideration Options

+Reconsiderations – available only for Commercial memberships

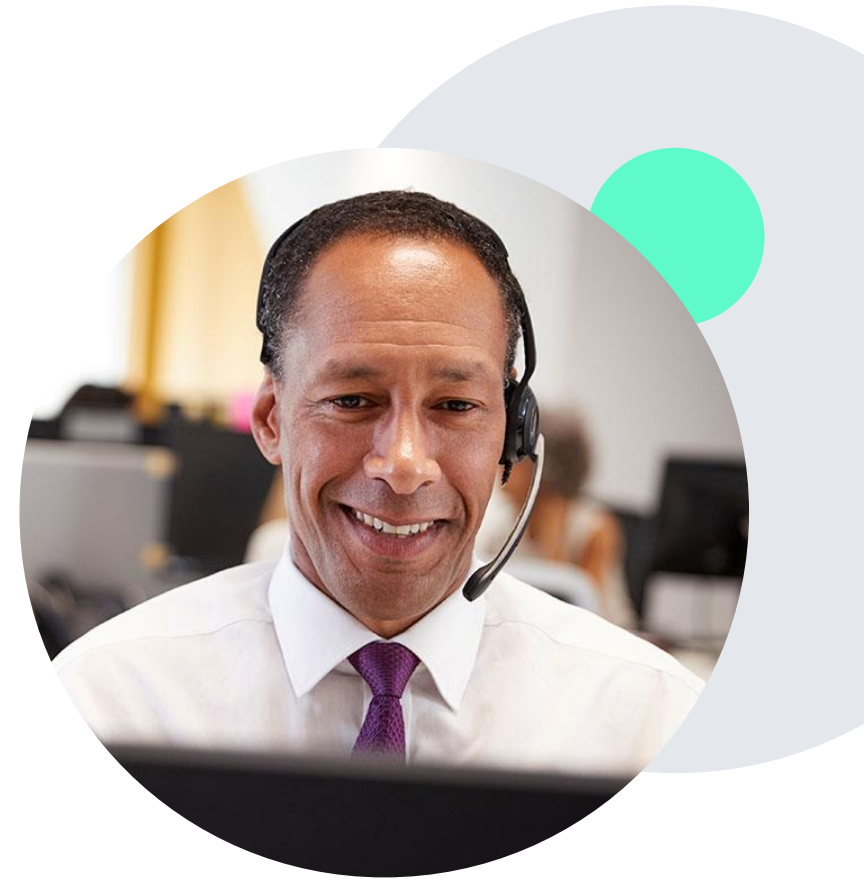
+Physicians and/or staff can request a reconsideration by submitting additional clinical information without the need for a physician to participate.

+Reconsideration must be requested on or before the anticipated date the services will be performed. Reconsiderations are available in most states and should be submitted prior to submitting an appeal request.

+Clinical Consultations

+If a request requires further clinical review, we welcome requests for a Clinical Consultation with an EviCore Medical Director. In certain instances (non-Medicare), additional clinical information provided during the consultation is sufficient to satisfy the medical necessity criteria for approval.

+Physicians, Nurse Practitioners and Physician Assistants can request a clinical consultation directly through the portal via Authorization Lookup (shown later in this presentation)



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+Special Circumstances

+Appeals

- EviCore will not be delegated to process appeals at this time for gastroenterology procedures. Appeals should be submitted directly to Network Health by following the appeal instructions referenced in the denial letter.

+Retrospective (Retro) Authorization Requests

- All Retrospective requests must be submitted within 7 business days from the date the services were performed. Retrospective requests that are submitted beyond this time frame would be advised to submit an appeal.
- Retrospective authorization requests are reviewed for medical necessity.

+Urgent Prior Authorization Requests

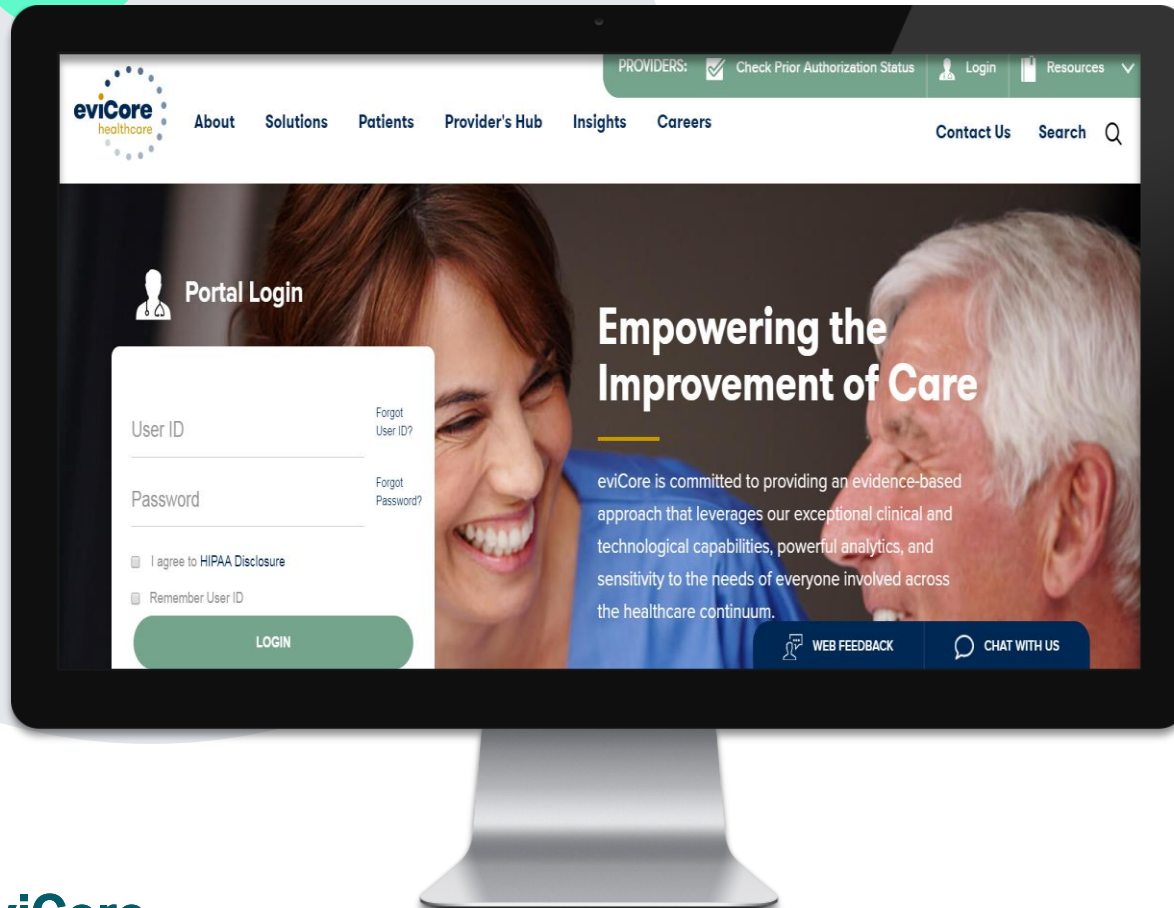
- Urgent requests can now be submitted on EviCore's website www.EviCore.com. When asked "Is this request standard/routine?" simply answer no and the case will be sent to the urgent work list.
- Providers and/or staff can also contact our office by phone and state that the prior authorization request is Urgent. Urgent request will be reviewed within 24 hours upon receiving the prior authorization request.
- Medically urgent outpatient procedures must meet the NCQA definition of medical urgency requests defined as conditions that are a risk to the patient's life, health, ability to regain maximum function, or the patient is having severe pain that requires a medically urgent procedure.



Provider Portal Overview

Registration

+EviCore Provider Portal

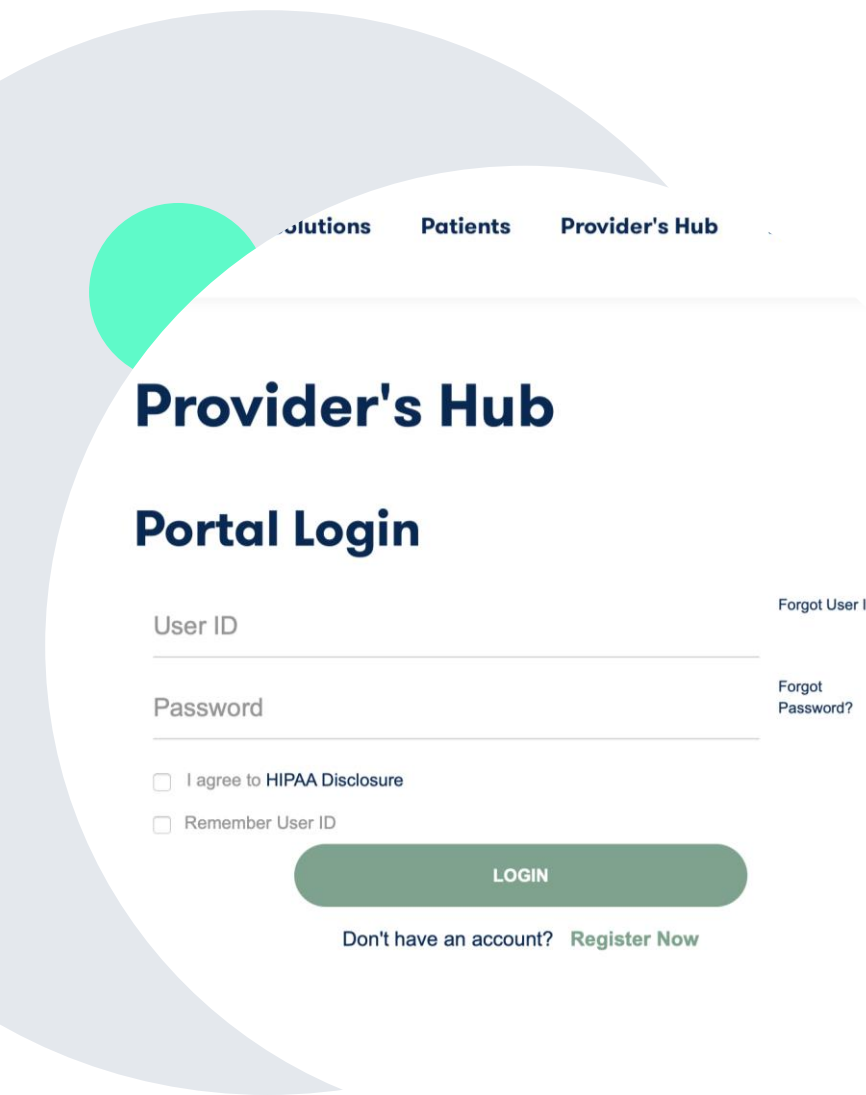


The EviCore online portal is the quickest, most efficient way to request prior authorization and check authorization status and is available 24/7.

By visiting www.EviCore.com providers can spend their time where it matters most — with their patients!

Or by phone:

(866) 668 -9250
7:00 a.m. to 7:00p.m.
Monday - Friday



+Portal Compatibility

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+The EviCore.com website is compatible with the following web browsers:

- Google Chrome
- Mozilla Firefox
- Internet Explorer 9, 10, and 11

+You may need to disable pop-up blockers to access the site. For information on how to disable pop-up blockers for any of these web browsers, please refer to our [Disabling Pop-Up Blockers guide](#).

+EviCore healthcare Website

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Visit www.EviCore.com



Portal Login

User ID

[Forgot
User ID?](#)

Password

[Forgot
Password?](#)

☐ I agree to HIPAA Disclosure

☐ Remember User ID

LOGIN

Don't have an account? [Register Now](#)

Already a user?

- +If you already have access to EviCore's online portal, simply login with your
- +User ID and Password and begin submitting requests real-time!

Don't have an account?

Click "Register Now" and provide the necessary information to receive access today!

- + Select a **Default Portal**, and complete the registration form.

Review information provided, and click
“Submit Registration”



Please review the information before you submit this registration. An Email will be sent to your registered email address to set your password.

Web Portal Preference

Please select the Portal that is listed in your provider training material. This selection determines the primary portal that you will using to submit cases over the web.

Default Portal*: CareCore National ▼

If you are a health plan representative, please contact web support at 1-800-646-0418 option 2 for your account to be created.

User Registration

UserName:	Address:	Phone:
Email:	City:	Ext:
Account Type:	State:	Fax:
First Name:	Office Name:	
Last Name:		

[Back](#) [Submit Registration](#)

[Legal Disclaimer](#) [Privacy Policy](#) [Corporate Website](#) [Report Fraud & Abuse](#) [Guidelines and Forms](#) [Contact Us](#)

Creating An Account



* Required Field

Web Portal Preference

Please select the Portal that is listed in your provider training material. This selection determines the primary portal that you will using to submit cases over the web.

Default Portal*: CareCore National ▼

If you are a health plan representative, please contact web support at 1-800-646-0418 option 2 for your account to be created.

User Information

All Pre-Authorization notifications will be sent to the fax number and email address provided below. Please make sure you provide valid information.

User Name*:		Address*:	 	Phone*:	
Email*:				Ext:	
Confirm Email*:		City*:		Fax*:	
First Name*:		State*:	Select ▼	Zip*:	
Last Name*:		Office Name*:			

Next



Review information provided, and click **“Submit Registration.”**

eviCore healthcare
innovative solutions

Default Portal*:

CareCore National ▼

UserName:

Email:

Account Type:

First Name:

Last Name:

Phone:

Ext:

Fax:

Zip:

Submit Registration

 Web Support 800-646-0418

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+Registration Successful



You will receive a message on the screen confirming your registration is successful.
You will be sent an email to create your password.

Registration Successful

Your Registration has been accepted. An email has been sent to your registered email account allowing you to set your password. Please close the browser.

Your password must be at least (8) characters long and contain the following:

Password Maintenance

Please set up a new password for your account.

Note: The password must be at least 8 characters long and contains the following categories : Uppercase letters, Lowercase letters, Numbers and special characters.

New Password*

Confirm New Password*

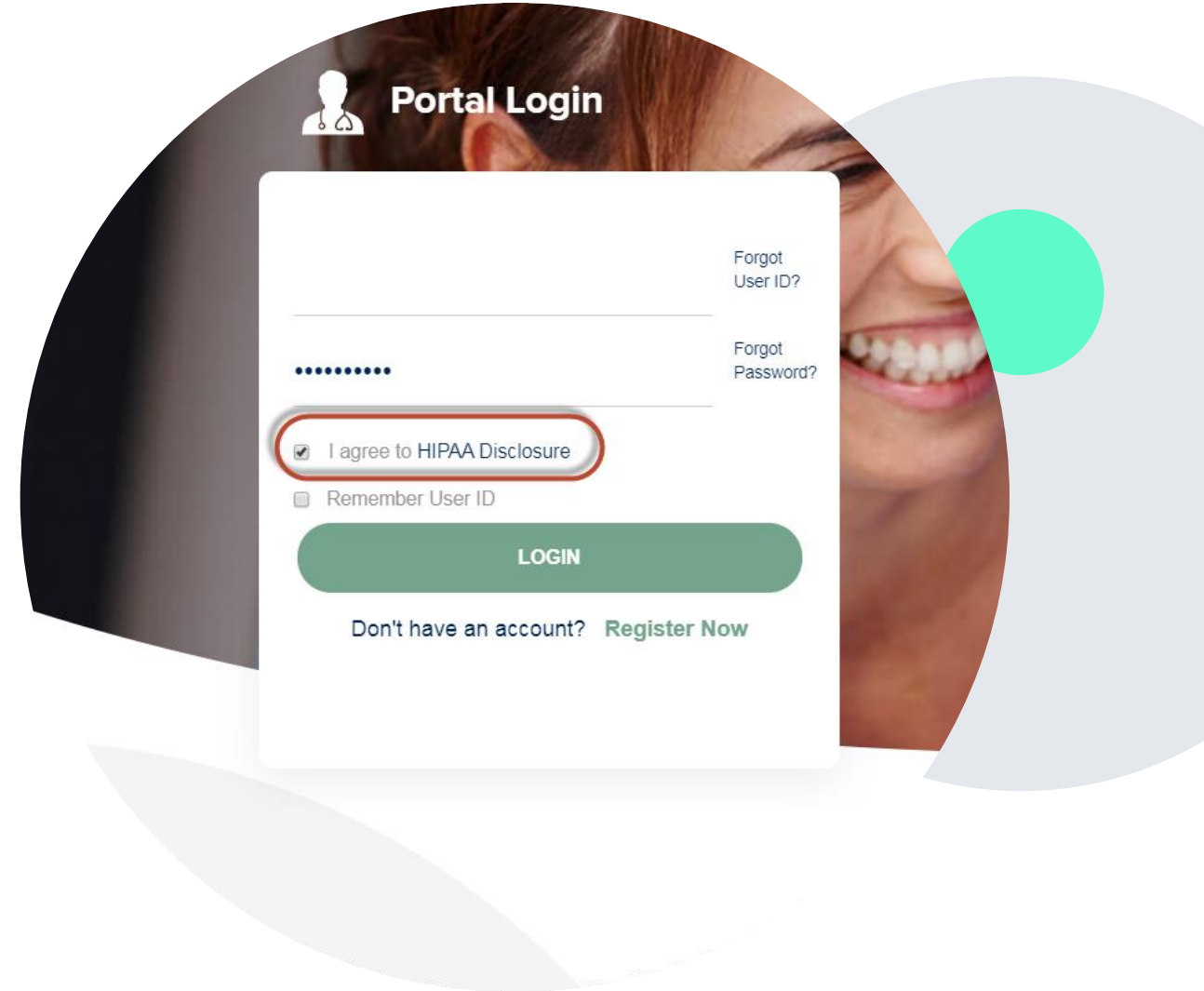
Save

- ✓ Uppercase letters
- ✓ Lowercase letters
- ✓ Numbers
- ✓ Characters (e.g., ! ? *)

+Account Login

To log-in to your account, enter your **User ID** and **Password**.

Agree to the HIPAA Disclosure, and click “**Login**.”



The screenshot shows the 'Portal Login' interface. At the top, there is a doctor icon and the title 'Portal Login'. Below this are two input fields: the first is for the 'User ID' and the second is for the 'Password', which is masked with dots. To the right of these fields are links for 'Forgot User ID?' and 'Forgot Password?'. Below the password field is a checkbox labeled 'I agree to HIPAA Disclosure', which is checked and highlighted with a red rounded rectangle. Below this is another checkbox labeled 'Remember User ID'. A large green 'LOGIN' button is positioned below the checkboxes. At the bottom of the form, it says 'Don't have an account? Register Now'. The background of the login form is a circular image of a smiling woman's face, with a teal circle partially visible on the right edge.

Provider Portal Overview

Adding Providers

+Welcome Screen



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

MedSolutions Portal

Help / Contact Us

Monday, March 29, 2021 2:14 PM

[Log Off](#)

Welcome to the CareCore National Web Portal. You are logged in as

- REQUEST AN AUTH
- RESUME IN-PROGRESS REQUEST
- SUMMARY OF AUTH
- AUTH LOOKUP
- MEMBER ELIGIBILITY

Your provider will need to be added to your account prior to case submission.
Click the “Manage Your Account” tab to add provider information.

+Adding Providers



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
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Monday, March 29, 2021 2:29 PM

[Log Off](#)

Manage Your Account

Office Name: CHANGE PA: EDIT ACCOU

Address:

Primary Contact:

Email Address:

ADD PROVIDER

Click Column Headings to Sort

No providers on file

CANCEL

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Under the “Manage Your Account” tab Click the “Add Provider” button.

+Adding Providers



	Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us	
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Monday, March 29, 2021 2:47 PM

[Log Off](#)

Add Practitioner

Enter Practitioner information and find matches.
*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip

Practitioner NPI

Practitioner State

▼

Practitioner Zip

FIND MATCH

CANCEL

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Enter the **Provider’s NPI**, **State**, and **Zip Code** to search for the provider record to add to your account.

You are able to add multiple Providers to your account.



+Adding Providers



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

MedSolutions Portal

Help / Contact Us

Monday, March 29, 2021 2:51 PM

Log Off

Add Practitioner

This following practitioner record(s) were found to match the requested NPI. Is this the practitioner you would like to register?

Practitioner Name	NPI	Address	City	State	Zip	Phone	Fax
-------------------	-----	---------	------	-------	-----	-------	-----

Last, First

12345678

123 Test RD

City

AB

12345

(123)456-7890

ADD THIS PF

CANCEL

Select the matching record based upon your search criteria

+Adding Providers and/or Laboratories



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us	
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Monday, March 29, 2021 3:06 PM

[Log Off](#)

Add Practitioner

Thank you for registering on the CareCore National website. If you wish to add an additional practitioner, click the "Add Another Practitioner" button. If you are finished, click the "Continue" button to complete the registration process.

ADD ANOTH

CONTINUE

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Once you have selected a practitioner, your registration will be completed. You can then access the “Manage Your Account” tab to make any necessary updates or changes.

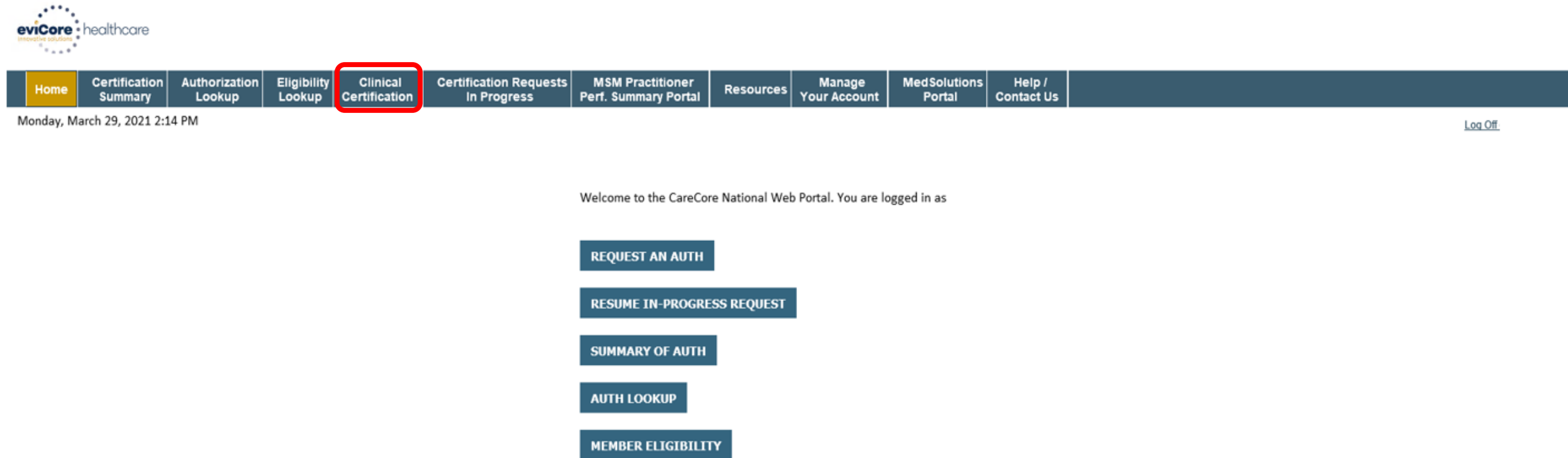
You can also click “Add Another Practitioner” to add another provider to your account.



Provider Portal Overview

Submitting Online Prior Authorization Requests

+Initiating A Request



eviCore healthcare

Home Certification Summary Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Practitioner Perf. Summary Portal Resources Manage Your Account MedSolutions Portal Help / Contact Us

Monday, March 29, 2021 2:14 PM [Log Off](#)

Welcome to the CareCore National Web Portal. You are logged in as

REQUEST AN AUTH

RESUME IN-PROGRESS REQUEST

SUMMARY OF AUTH

AUTH LOOKUP

MEMBER ELIGIBILITY

Choose “request a clinical certification/procedure” to begin a new case request.

+Select Program



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Med Solutions Portal	Help / Contact Us	
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Monday, March 29, 2021 3:15 PM

[Log Off](#)

Request an Authorization

To begin, please select a program below:

- ☐ Durable Medical Equipment(DME)
- ☒ Gastroenterology
- ☐ Lab Management Program
- ☐ Medical Oncology Pathways
- ☐ Musculoskeletal Management
- ☐ Radiation Therapy Management Program (RTMP)
- ☐ Radiology and Cardiology
- ☐ Sleep Management
- ☐ Specialty Drugs

CONTINUE

[Click here for help](#)

Select the Program for your certification and indicate if you are requesting as a referring provider or rendering lab.

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+Select Provider



Requesting Provider Information

10% Complete

Select the provider for whom you want to submit an authorization request. If you don't see them listed, click [Manage Your Account](#) to add them.

Filter Last Name
or NPI:

SEARCHCLEAR SEARCH

	Provider
SELECT	12345678 – Last, First (Selected)

BACKCONTINUE

[Click here for help](#)

Select the Practitioner/Group for whom you want to build a case.

+Select Health Plan



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

MedSolutions Portal

Help / Contact Us

Monday, March 29, 2021 3:28 PM

Log Off

Choose Your Insurer

Requesting Provider: Last, First, NPI 12345678

Please select the insurer for this authorization request.

Network Health

123 Network Health RD

BACK

CONTINUE

[Click here for help](#)

Urgent Request? You will be required to upload relevant clinical info at the end of this process. [Learn More.](#)

Don't see the insurer you're looking for? Please call the number on the back of the member's card to determine if an authorization through eviCore is required.

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Choose the appropriate Health Plan for the case request. If the health plan does not populate, please contact the plan at the number found on the member’s identification card.



+Contact Information

Add Your Contact Info

Provider's Name:*

Last, First

Who to Contact:*

Fax:*

(123) 456-7890

Phone:*

(987) 654-3210

Ext.:

Cell Phone:

Email:

email@test.com

BACK

CONTINUE

30% Complete

Provider and NPI

Last, First
1234567890
(Network Health)

Message from webpage

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

OK

+Member Information



Home

Authorization Lookup

MedSolutions Portal

CareCore National Portal

Help / Contact Us

Tuesday, March 30, 2021 11:07 AM

[Log Off](#)

Patient Eligibility Lookup

Patient ID:*

Date Of Birth:*

MM/DD/YYYY

Patient Last Name Only:*

[2]

ELIGIBILITY LOOKUP

BACK

[Click here for help](#)

40% Complete

Provider and NPI

Last, First
1234567890
(Network Health)

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Enter the member information including the Patient ID number, date of birth, and patient’s last name. Click “Eligibility Lookup.”

+Clinical Details

eviCore

healthcare

Home

Authorization Lookup

MedSolutions Portal

CareCore National Portal

Help / Contact Us

Tuesday, March 30, 2021 11:10 AM

Log Off

Requested Service + Diagnosis

This procedure has not been performed.

CHANGE

Gastroenterology Procedures

Select a Procedure by CPT Code or Description

GECAP

GEEGD

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

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 Gastroenterology

LOOKUP

BACK

[Click here for help](#)

60% Complete

Provider and NPI

Last, First
1234567890
(Network Health)

Patient

Last, First
98765432
1/1/2001

Enter the CPT Code and Diagnosis relevant to the requested test(s)

+Verify Service Selection



Home	Authorization Lookup	MedSolutions Portal	CareCore National Portal	Help / Contact Us	
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Tuesday, March 30, 2021 11:16 AM

[Log Off](#)

Requested Service + Diagnosis

Confirm your service selection.

Procedure Date: TBD
CPT Code: GECAP
Description: Capsule Endoscopy
Primary Diagnosis Code: R10.0
Primary Diagnosis: Acute abdomen
Secondary Diagnosis Code:
Secondary Diagnosis:
[Change Procedure or Primary Diagnosis](#)
[Change Secondary Diagnosis](#)

BACK

CONTINUE

[Click here for help](#)

Confirm the correct diagnosis has been selected.

60% Complete

Provider and NPI

Last, First
1234567890
(Network Health)

Patient

Last, First
98765432
1/1/2001

[EDIT](#)

Service

GECAP Capsule Endoscopy
F98.5 Adult onset fluency
disorder

+Site Selection

eviCore

healthcare

Home

Authorization
Lookup

MedSolutions
Portal

CareCore National
Portal

Help /
Contact Us

Tuesday, March 30, 2021 11:17 AM

Log Off

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: 123456789

Zip Code: 12345

Site Name:

TIN:

City:

Exact match

Starts with

LOOKUP SITE

BACK

Click here for help

80% Complete

Provider and NPI

Last, First
1234567890
(Network Health)

Patient

Last, First
98765432
1/1/2001

EDIT

Service

GECAP Capsule Endoscopy
R10.0 Acute abdomen

EDIT

Site

Last, First

Select the specific site where the testing/treatment will be performed.

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+Clinical Collection Process



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

Tuesday, March 30, 2021 11:23 AM

Proceed to Clinical Information

You are about to enter the clinical information collection phase of the authorization process.

Once you have clicked "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 on-line request, be sure to click SUBMIT CASE before exiting the system. This final step in the on-line process is required even if you will be submitting additional information at a later time. Failure to formally submit your request by clicking the SUBMIT CASE button will cause the case record to expire with no additional correspondence from eviCore.



[Click here for help](#)

Verify all information entered and make any needed changes prior to moving into the clinical collection phase of the prior authorization process

+Urgency Indicator

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Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

Tuesday, March 30, 2021 11:24 AM

Proceed to Clinical Information

Is this case Routine/Standard?

YES

NO

Select an Urgency Indicator and Upload your patient’s relevant medical records that support your request.

+Clinical Collection Process - Pathway Questions



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

Tuesday, March 30, 2021 11:46 AM

[Log Off \(t](#)

Proceed to Clinical Information

i Please select the CPT code you plan to perform.

- ☐ 91110
- ☐ 91111
- ☐ 0355T

SUBMIT

BACK

CONTINUE

[Click here for help](#)

A few preliminary questions will be asked to direct to the right set of clinical questions.

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+Clinical Pathway Questions



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

Tuesday, March 30, 2021 11:47 AM

Proceed to Clinical Information

 What is the date of the most recent contact with the requesting provider for this problem? (Enter an approximate date if the exact date is not known)

 Enter the type of contact.

SUBMIT

☐ Finish Later

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

BACK

CONTINUE

[Click here for help](#)

If additional information is required, you will have the option to either free hand text in the additional information box, or you can mark Yes to additional info and click submit to bring you to the upload documentation page.

+Clinical Pathway Questions



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

Tuesday, March 30, 2021 11:47 AM

Proceed to Clinical Information

Please select the PRIMARY reason for Capsule Endoscopy.

Screening and Surveillance of individuals with a Genetic Syndrome (Polyposis, Peutz-Jehger's, etc.)

Individual is unable to tolerate endoscopic procedure

GI bleeding

Known Celiac Disease

Suspected or Known Crohn's Disease

Small Bowel Tumors

Other not listed

Did you know?

You can save a certification request to finish later.

BACK

CONTINUE

Select the primary reason for the requested capsule endoscopy.

+Clinical Pathway Questions



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

Tuesday, March 30, 2021 11:47 AM

Proceed to Clinical Information

Please select the PRIMARY reason for Capsule Endoscopy.

Screening and Surveillance of individuals with a Genetic Syndrome (Polyposis, Peutz-Jehger's, etc.)

Individual is unable to tolerate endoscopic procedure

GI bleeding

Known Celiac Disease

Suspected or Known Crohn's Disease

Small Bowel Tumors

Other not listed

Did you know?

You can save a certification request to finish later.

BACK

CONTINUE

[Click here for help](#)

If you need to confirm information you are entering or need to add additional data check “finish later” and then the submit button. You will have 48 hours to complete the case.

+Clinical Pathway Questions +

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Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

Tuesday, March 30, 2021 11:48 AM

Proceed to Clinical Information

Has the individual had a previous Capsule Endoscopy for this reason?

☒ Yes

☐ No

☐ Unknown

SUBMIT

☐ Finish Later

Did you know?

You can save a certification request to finish later.

BACK

CONTINUE

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eviCore

healthcare

Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

Tuesday, March 30, 2021 11:49 AM

Proceed to Clinical Information

Are any of the following signs or symptoms present?

SUBMIT

☐ Finish Later

Did you know?

You can save a certification request to finish later.

BACK

CONTINUE

[Click here for help](#)

+Clinical Pathway Questions +



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress
------	-----------------------	----------------------	--------------------	------------------------	------------------------------------

Tuesday, March 30, 2021 11:49 AM

Proceed to Clinical Information

Are any of the following signs or symptoms present?

Rectal bleeding observed
Melena (Black tarry stool)
Obscure bleeding
Iron deficiency anemia
None of the above
Unknown

☐ Finish Later

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

BACKCONTINUE

[Click here for help](#)

+Clinical Pathway Questions +



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

Tuesday, March 30, 2021 11:50 AM

Proceed to Clinical Information

 Has the individual had an EGD?

☒ Yes ☐ No ☐ Unknown

SUBMIT

☐ Finish Later

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

BACK

CONTINUE

[Click here for help](#)

+Clinical Pathway Questions +



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress
------	-----------------------	----------------------	--------------------	------------------------	------------------------------------

Tuesday, March 30, 2021 11:54 AM

Proceed to Clinical Information

i Please select the appropriate result.

- ☒ Negative/Normal
- ☐ Identified cause of GI bleed
- ☐ None of the above
- ☐ Unknown

SUBMIT

☐ Finish Later

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

BACK

CONTINUE

[Click here for help](#)

+Clinical Pathway Questions +



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

Tuesday, March 30, 2021 11:55 AM

Proceed to Clinical Information

 Has the individual had a Colonoscopy?

☒ Yes ☐ No ☐ Unknown

SUBMIT

☐ Finish Later

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

BACK

CONTINUE

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+Clinical Pathway Questions +

eviCore

healthcare

Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

Tuesday, March 30, 2021 11:55 AM

Proceed to Clinical Information

Please select the appropriate result.

☒ Negative/Normal

☐ Identified cause of GI bleed

☐ None of the above

☐ Unknown

SUBMIT

☐ Finish Later

Did you know?

You can save a certification request to finish later.

BACK

CONTINUE

[Click here for help](#)

+Clinical Collection Process – Clinical Upload

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Home

Authorization
Lookup

MedSolutions
Portal

CareCore National
Portal

Help /
Contact Us

Tuesday, March 30, 2021 3:49 PM

Proceed to Clinical Information

?

Are you ready to upload documentation now?

☐

Yes, I am ready to upload the record. (If Urgent/Expedited case, upload is required)

☐

No, I will upload at a later time

SUBMIT

☐ Finish Later

Did you know?

You can save a certification request to finish later.

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Providing clinical information via the web is the quickest, most efficient method.

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+Clinical Collection Process – Clinical Upload +



	Home	Authorization Lookup	MedSolutions Portal	CareCore National Portal	Help / Contact Us	
--	------	-------------------------	------------------------	-----------------------------	----------------------	--

Tuesday, March 30, 2021 3:49 PM

[Log Off](#)

Proceed to Clinical Information

You may have noticed the removal of clinical surveys in the workflow or been requested to upload clinical at the beginning of the case submission process. This has been done in an effort to streamline your case submission process.

Want to learn more?

[Click here](#) for more details.

SUBMIT

☐ Finish Later

Did you know?

You can save a certification request to finish later.

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+Clinical Collection Process – Clinical Upload +



Home

Authorization Lookup

MedSolutions Portal

CareCore National Portal

Help / Contact Us

Tuesday, March 30, 2021 3:50 PM

Proceed to Clinical Information

Clinical Upload

Please upload any additional clinical information that justifies the medical necessity of this request.

Browse for file to upload (max size 5MB, allowable extensions .DOC,.DOCX,.PDF,.PNG):

Browse...

Browse...

Browse...

Browse...

Browse...

UPLOAD

SKIP UPLOAD

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+Clinical Certification Statements



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Tuesday, March 30, 2021 11:57 AM

Proceed to Clinical Information

☐ I acknowledge that the clinical information submitted to support this authorization request is accurate and specific to this member, and that all information has been provided. I have no further information to provide at this time.

Is this case Routine/Standard?

YES

NO

SUBMIT CASE

[Click here for help](#)

+Clinical Certification – Approval Case Summary



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

Tuesday, March 30, 2021 11:57 AM

[Log Off](#)

Summary of Your Request

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

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:	R10.0	Description:	Acute abdomen
Secondary Diagnosis Code:		Description:	
Date of Service:	4/5/2021		
CPT Code:	91111	Description:	GI imaging; esophagus
Authorization Number:	A150405554		
Review Date:	3/30/2021 11:46:22 AM		
Expiration Date:	9/26/2021		
Status:	Your case has been Approved.		

CANCEL	PRINT	CONTINUE
--------	-------	----------

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, a “Real Time” approval will be issued.

Print the screen and store in the patient’s file.

+Clinical Certification – Pending Case Summary



Home	Authorization Lookup	MedSolutions Portal	CareCore National Portal	Help / Contact Us	
------	----------------------	---------------------	--------------------------	-------------------	--

Tuesday, March 30, 2021 3:51 PM

[Log Off](#)

Summary of Your Request

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

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 1-800-420-3471.

Provider Name:	Contact:
Provider Address:	Phone Number:
	Fax Number:
Patient Name:	Patient Id:
Insurance Carrier:	
Site Name:	Site ID:
Site Address:	
Primary Diagnosis Code:	Description:
Secondary Diagnosis Code:	Description:
Date of Service:	
CPT Code:	Description:
Case Number:	
Review Date:	
Expiration Date:	
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 1-800-420-3471.

CANCEL	PRINT	CONTINUE
--------	-------	----------



Once the clinical pathway questions are completed and if the case has not met clinical criteria, the status will reflect pending. At the bottom, there will be a note stating “Your case has been sent to clinical review”.

Print the screen and store in the patient’s file.

+Certification Summary



Certification Summary

Single Status

Show All

Filter By Multiple Statuses

Show All

Date

7 days

Submit

Close

	Ordering Provider Last Name	Ordering Provider NPI	Status	Case Initiation Date	Procedure Code	Service Description	Site Name	Expiration Date	Correspondence

No records to display

- CareCore National Portal now includes a Certification Summary tab, to better track your recently submitted cases.
- The work list can also be filtered - as seen above.

+Building Additional Cases



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

Friday, April 02, 2021 2:53 PM

Log Off

Success

Thank you for submitting a request for clinical certification. Would you like to:

- [Return to the main menu](#)
- [Start a new request](#)
- [Resume an in-progress request](#)

You can also start a new request using some of the same information.

- Start a new request using the same:
- ☐ Program (Gastroenterology)
 - ☐ Provider
 - ☐ Program and Provider (Gastroenterology and
 - ☐ Program and Health Plan (Gastroenterology and

GO

CANCEL PRINT

Return to the main menu, resume an in-progress request, or start a new request. You can indicate if any of the previous case information will be needed for the new request.

+Eligibility Lookup Tool



Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

Tuesday, March 30, 2021 12:20 PM

Eligibility Lookup

☐ OnePA: Prior Authorization Portal for Providers

All fields required

Healthplan:

PRINT

[Click here for help](#)

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+Authorization Lookup Tool



Home

Authorization Lookup

MedSolutions Portal

CareCore National Portal

Help / Contact Us

Tuesday, March 30, 2021 3:34 PM

Authorization Lookup

Required Fields

Healthplan:

NETWORK HEALTH - WISCONSIN

Patient ID:

Patient Date of Birth:

MM/DD/YYYY

Optional Fields

Case Number:

or

Authorization Number:

PRINT

SEARCH

[Click here for help](#)

Select Search by Authorization Number/NPI. Enter the provider’s NPI and authorization or case number. Select Search.

You can also search for an authorization by Member Information, and enter the health plan, Provider NPI, patient’s ID number, and patient’s date of birth.

+Authorization Lookup Tool (Continued)



	Home	Authorization Lookup	MedSolutions Portal	CareCore National Portal	Help / Contact Us
--	------	----------------------	---------------------	--------------------------	-------------------

Tuesday, March 30, 2021 3:45 PM

Authorization Lookup

Authorization Number:

Case Number:

Status: Approved

P2P Status:

Approval Date: 3/30/2021 11:58:21 AM

Service Code: GECAP

CHANGE SERVICE CODE

Service Description: Capsule Endoscopy

Site Name:

Expiration Date: 9/26/2021

Date Last Updated: 3/30/2021 11:58:21 AM

Correspondence:

P2P AVAILABILITY

UPLOADS & FAXES

The authorization will then be accessible to review. To print authorization correspondence, select View Correspondence.

+How to schedule a Peer to Peer 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:
- 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.

Authorization Lookup

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



P2P AVAILABILITY

P2P AVAILABILITY

[Request Peer to Peer Consultation](#)

+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.

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:	

[Request Peer to Peer Consultation](#)

ALL POST DECISION OPTIONS

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

+How to Schedule a Peer to Peer Request

New P2P Request

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

Member Date of Birth

+ Add Another Case

Lookup Cases >

- +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.

New P2P Request

Case Ref #: Remove ✓ P2P Eligible

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

Member Information	Case P2P Information
Name	Episode ID
DOB	P2P Valid Until 2020-11-11
State	Modality MSK Spine Surgery
Health Plan	Level of Review Reconsideration P2P
Member ID	System Name ImageOne

Continue

+How to Schedule a Peer to Peer Request

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 >

+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.

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 3:45 pm EDT 4:00 pm EDT 4:15 pm EDT Show more...	2:00 pm EDT 2:15 pm EDT 2:30 pm EDT 2:45 pm EDT Show more...	4:15 pm EDT 4:30 pm EDT 4:45 pm EDT 5:00 pm EDT Show more...	3:15 pm EDT 3:30 pm EDT 3:45 pm EDT 4:00 pm EDT Show more...	-	-	-

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+How to Schedule a Peer to Peer

+Confirm Contact Details

- Contact Person Name and Email Address will auto-populate per your user credentials

Case Info

Questions

Schedule

Confirmation

P2P Info

Date Mon 5/18/20

Time 6:30 pm EDT

Reviewing Provider

Case Info

1st Case

Case #

Episode ID

Member Name

Member DOB

Member State

Health Plan

Member ID

Case Type MSK Spine Surgery

Level of Review Reconsideration P2P

P2P Contact Details

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

Contact Instructions

Select option 4, ask for Dr. Doe

Submit

- Be sure to update the following fields so that we can reach the right person for the Peer to Peer appointment:
 - + Name of Provider Requesting P2P
 - + Phone Number for P2P
 - + Contact Instructions
- Click submit to schedule appointment. You will be presented with a summary page containing the details of your scheduled appointment.

Scheduling

Scheduled

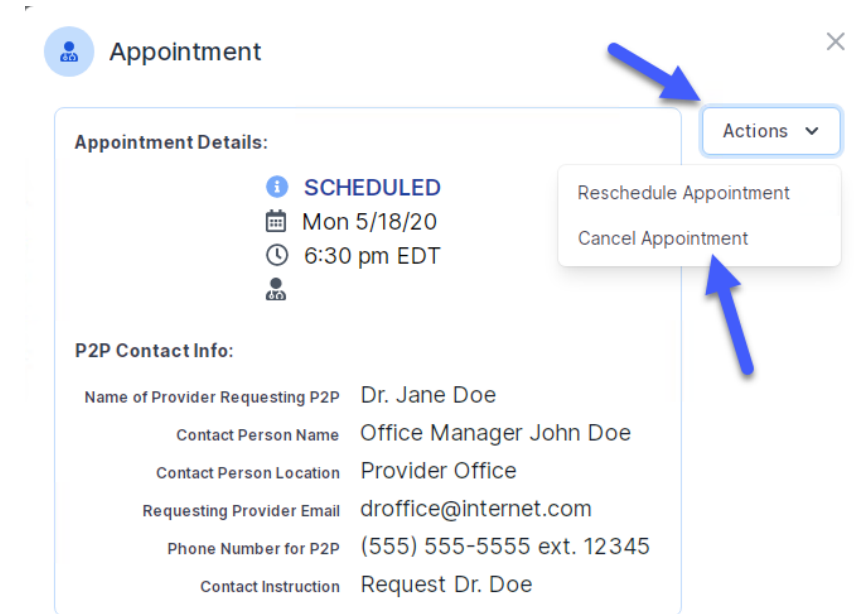
Mon 5/18/20 - 6:30 pm EDT

SCHEDULED

+Canceling or Rescheduling a Peer to Peer Appointment

+To cancel or reschedule an appointment

- Access the scheduling software per the instructions above
 - Go to “My P2P Requests” on the left pane navigation.
 - Select the request you would like to modify from the list of available appointments
 - Once opened, 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, you will have the opportunity to select a new date or time as you did initially.
- +If choosing to cancel, you will be prompted to input a cancellation reason



- Close browser once done

Provider Resources

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's provider portal
 - You can also call a Web Support Specialist at 800-646-0418 (option 2)
 - Chat with web support on the [EviCore Provider Resource page](#)

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

Additional Information about ECRM can be found on the **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 find a list of Regional Provider Engagement Managers at [EviCore.com](#) → Provider's Hub → Training Resources

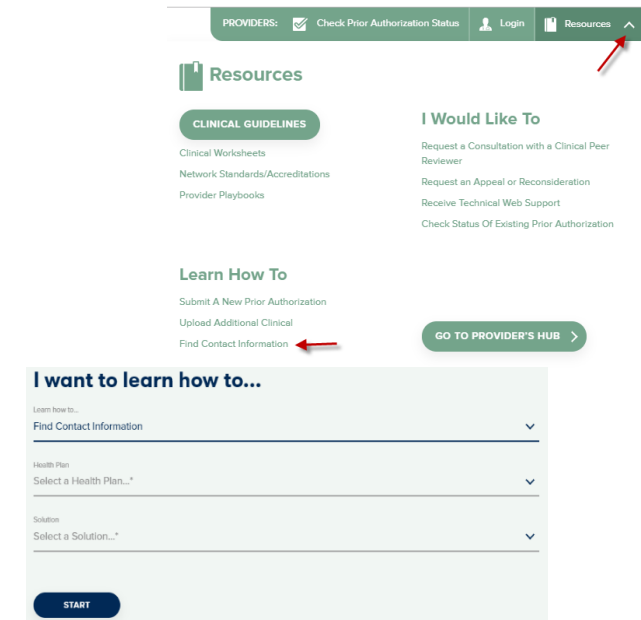
Call Center/Intake Center

Call 855-727-7444. Representatives are available from 7 a.m. to 7 p.m. local time.

+Online Provider Resources

Web Based Services and Online Resources

- You can access important tools, health plan specific contact information and resources at www.EviCore.com
- Select the Resources to view Clinical Guidelines, Online Forms, and more.
- The Quick Reference Tool can be found by clicking the resources tab then select Find Contact Information, under the Learn How to section. Simply select Network Health and Solution to populate the contact phone and fax numbers as well as the appropriate legacy portal to utilize for case requests.
- Provider forums and portal training are offered weekly, you can find a session on www.EviCore.WebEx.com, select WebEx Training, and search upcoming for a “EviCore Portal Training” or “Provider Resource Review Forum”



+More online Provider Resources

Client Specific Provider Resource Pages

+EviCore's Provider Experience team maintains provider resource pages that contain client and solution specific 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:

- Frequently Asked Questions
- Quick Reference Guides
- Solution PowerPoint Overview
- Announcements
- Detailed list of procedure codes that require prior authorization
- To access these helpful resources, please visit:
<https://www.EviCore.com/resources/healthplan/network-health-wisconsin>

Network Health Wisconsin Provider Services: 800-207-5769

TTY/TDD# 800-947-3529

Fax 920-720-1918



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+Provider Newsletter

Stay Updated With Our Free Provider Newsletter

+EviCore's provider newsletter is sent out to the provider community with important updates and tips. If you are interested in staying current, feel free to subscribe:

- Go to EviCore.com
- Scroll down and add a valid email to subscribe
- You will begin receiving email provider newsletters with updates



Thank You!
