

Musculoskeletal Program (MSK) Frequently Asked Questions (FAQ)

Who is EviCore by Evernorth?

EviCore by Evernorth (EviCore) is an independent specialty medical benefits management company that provides utilization management services for Security Health Plan.

Which members will EviCore by Evernorth (EviCore) manage for the Musculoskeletal Program?

EviCore manages services for the Security Health Plan members.

How can I initiate a prior authorization request?

The quickest, most efficient way to obtain prior authorization is through the 24/7 self-service web portal at [Provider's Hub | EviCore by Evernorth](#). Prior authorization can also be obtained via phone at 1-888-444-6185.

What are the hours of operation for the prior authorization department?

EviCore healthcare's prior authorization call center is available from 7 a.m. to 7 p.m. Eastern Standard Time, Monday through Friday. The phone number is 1-888-444-6185. The web portal is available for access 24/7.

What procedures will require prior authorization?

- + Joint Surgery (Shoulder, Hip, Knee)
- + Spine Surgery
- + Interventional Pain Management

Note: Procedure code list of services requiring prior authorization can be found by visiting: [Security Health Plan Provider Resources | EviCore by Evernorth](#)

What information will be required to obtain prior authorization?

- + Member or Patient's Name, Date of Birth, and health plan ID number
- + Ordering Physician's name, NPI number Telephone and Fax number
- + Service being requested (CPT codes and diagnosis codes)
- + Rendering facility's name, NPI, TIN, street address, fax number
- + Medical records related to the current diagnosis, results of diagnostic imaging studies and the duration/type/outcome of prior treatment related to the current diagnosis. All clinical information related to the Prior Authorization request should be submitted to support medical necessity.

How to avoid inappropriate denials when services are appropriate?

Services that are deemed appropriate are those that follow clinical and/or medical necessity guidelines. You can find those **guidelines** at [Clinical Guidelines | EviCore by Evernorth](#). Click the resources drop down button at the top right side of the web page to find the link to those guidelines. If a provider follows guidelines that govern clinical and/or medical necessity criteria, but still experiences high denial rates, the reason may be due to clinical information missing from the case request.

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Please share the necessary information required:

Information usually required for Spine surgery:

- + Date of first office visit related to this condition and/or after symptoms began
- + Signs/Symptoms
- + Last office visit including re-evaluation
- + Physical exam findings
- + Previous medical history
- + Duration and type of physician-directed treatment
- + Outcomes of prior surgical/non-surgical physician-directed treatment and prior surgical/non-surgical interventions
- + Results of relevant prior imaging related to the request including the radiologists report of advanced diagnostic imaging studies

Information usually required for Joint surgery:

- + Date of most recent physical exam along with physical exam findings and patient complaints
- + Medical history/duration of complaints
- + Dates/duration/response to conservative treatment such as medication and various therapies (please specify)
- + Other pertinent medical history/comorbidities
- + Prior imaging films/reports with date of service (MRI, CT, X-ray or bone scan)
- + Severity of pain and details of functional disabilities interfering with activities of daily living
- + Physician's treatment plan
- + Date of most recent physical exam along with physical exam findings and patient complaints

Information usually required for Pain Management:

- + CPT codes and specific levels of injection and/or specific muscle groups to be injected. Specific prior injection history with dates/level/side/response to injection, especially if it is an injection into the same vertebral region (e.g. cervical, thoracic or lumbar spine)
- + Total number of injections/procedures in the past 12 months for the diagnoses (to include all prior doctors)
- + Date of most recent physical exam along with physical exam findings and patient complaints
- + Medical history/duration of complaints
- + Other pertinent medical history/comorbidities
- + Name of injectant
- + Type or method of radiofrequency ablation and/or percutaneous decompression
- + Dates/duration/response to conservative treatment such as medication and various therapies (please specify)

Who needs to request prior authorization through EviCore?

All ordering (requesting) physicians are required to obtain prior authorization for services prior to the service being rendered in an office, inpatient or outpatient setting.

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Does a patient have to have objective symptoms to qualify for an injection?

Yes. For an epidural injection, a patient must have a radiculopathy or radicular pattern confirmed on imaging or EMG/NCS. For a facet procedure, loading of the joint in extension and lateral rotation is needed. For sacroiliac joint injections, a patient must have three (3) of five (5) positive stress maneuvers of the sacroiliac joint.

How much conservative care is needed prior to an injection?

Six (6) weeks of conservative care is needed prior to an epidural steroid injection. Four (4) weeks of conservative care is needed prior to facet/medial branch nerve blocks and sacroiliac joint injections.

Is advanced imaging required prior to an epidural steroid injection?

Yes. For cervical and thoracic epidural injections, advanced imaging must be performed within the last 12 months.

Is imaging guidance needed for chronic pain procedures?

Yes. Fluoroscopic or CT scan image guidance is required for all interventional pain injections.

Will EviCore grant approval for a series of injections?

No. A series of injections will not be preservice authorized. EviCore requires a separate pre-service authorization request for an Interventional Pain procedure for each date of service. The patient's response to prior interventional pain injections will determine if a subsequent injection is appropriate. Including the response to the prior interventional pain injection in the office notes will help avoid processing delays.

Will EviCore grant approval for multiple injections on the same date of service?

No, an epidural injection and facet joint injection in the same region is not allowed, except when there is a facet joint cyst is compressing the exiting nerve root.

Will EviCore grant approval of more than 1 level interlaminar epidural, 2 levels transforaminal epidural, 3 level facet/medial branch nerve blocks in a single session?

No. No more than one (1) level interlaminar epidural, one (1) nerve root selective nerve root block, two (2) level therapeutic transforaminal epidural, three (3) level facet/medial branch nerve blocks are indicated in a single session.

Will EviCore grant approval of "Series of Three" injections (one a week)?

Not permitted, as deemed medically unnecessary (see prior question(s) for additional information).

Is there an annual limit on injections?

Yes. The limit of diagnostic facet/medial branch nerve blocks is two (2) prior to possible radiofrequency ablation. The limit of epidural steroid injections is three (3) per episode and four (4) per 12-month period.

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How should I space my procedures?

Epidural injections require a two (2) week outcome prior to preauthorization of a subsequent epidural. Radiofrequency ablation of the medial branch nerves from C2-3 to L5-S1 require a six (6) month interval. Therapeutic sacroiliac joint injections require a two (2) month interval

Are there thresholds for outcome from a prior procedure to obtain certification for a subsequent procedure?

Yes. An epidural steroid injection must have at least two (2) of the following: 1) 50% or greater relief of radicular pain, 2) increased level of function / physical activity, 3) and/or decreased use of medication and/or additional medical services such as Physical Therapy / Chiropractic care. A diagnostic facet/medial branch nerve block must have at least 80 % relief from the anesthetic. Two (2) facet/medial branch nerve blocks with at least 80% relief are needed for radiofrequency ablation. A therapeutic sacroiliac joint injection following a diagnostic injection must have $\geq 75\%$ pain relief. A repeat therapeutic sacroiliac joint injection must have $\geq 75\%$ pain relief and either an increase in level of function or reduction in use of pain medication and/or medical services such as PT/chiropractic care.

Are there cases which use the interlaminar epidural CPT 62323 which are not part of the delegated EviCore preauthorization program?

Yes. EviCore manages CPT 62323 when the injectate includes a steroid, local anesthetic, or contrast for interventional pain injections. Requests for injectates other than steroids, local anesthetics, or contrast will be directed to the health plan for management.

Does urgent care require Prior Authorization?

The services managed under EviCore's Interventional Pain Management, Joint and Spine surgery programs are unlikely to be required on an urgent basis. Procedures done in an Emergency Department (ED) do not require prior authorization. Urgent requests can be made via the web portal or by calling intake. If you call intake, please inform the agent that the case is urgent. EviCore will decide within 24 hours (four hours is the EviCore standard).

How will all parties be notified if the prior authorization has been approved or denied?

Providers will be notified of the prior authorization via email notification of an update on the case, fax or by phone when necessary. Providers can validate prior authorization by using the EviCore web portal or by calling EviCore Customer Service. Members will be notified by mail and via phone.

For how long are Prior Authorizations approved?

Outpatient authorizations are typically good for 60 days. Inpatient authorizations are based on the date of service and length of stay.

Are there any Medicaid specific considerations?

Please refer to ForwardHealth interactive fee schedule for payable services, provider types, specialties and place of service: [ForwardHealth Procedure License Agreement](#)

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What is the process if a member is receiving a procedure where Prior Authorization is required by EviCore healthcare for an inpatient stay?

EviCore will review the request for an inpatient admission related to joint/spine surgeries for medical necessity and provide prior authorization for an initial length of stay. Any extensions to the initially approved length of stay will be managed by Security Health Plan staff via the Plan's concurrent review process. Please contact the SecurityHealth Plan Utilization Management Department at 1-800-991-8109 for any extensions to the initially approved length of stay.

Will EviCore conduct concurrent review of the patient's inpatient hospital stay?

EviCore **will NOT** perform concurrent review services for delegated joint/spine procedures requested to be performed in an inpatient setting. Please contact Security Health Plan for information.

Will EviCore review delegated joint/spine procedures for medical necessity if the provider indicates that the procedure will be performed in an inpatient setting?

EviCore **will** review all delegated joint/spine procedures regardless of the treatment setting.

Will EviCore conduct a medical necessity review on the inpatient admission for delegated joint/spine procedures?

EviCore **will** conduct a medical necessity review on the inpatient admission for delegated joint/spine procedures indicated to be performed in an inpatient setting.

Will EviCore assign an Initial Length of Stay for approved inpatient Joint/Spine cases?

EviCore **will** assign an initial length of stay based on InterQual clinical criteria.

Will EviCore present scripting in advance of clinical review advising the ordering provider of the need to obtain inpatient authorization from SHP?

EviCore will present the following script for all joint/spine cases regardless of indicated place of service.

Please note: If EviCore approves the procedure(s), the inpatient hospital admission and your patient requires an extension to the originally approved length of stay, you will need to obtain an extension from Security Health Plan. Please call the number on the back of the member's ID card and provide the EviCore case number to submit your extension request. Unapproved bed days billed could be denied for lack of prior authorization

Where can I access EviCore healthcare's clinical worksheets and guidelines?

EviCore's clinical worksheets and guidelines are available online 24/7 and can be found by visiting one of the following links:

Clinical Worksheets

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

Clinical Guidelines

[Clinical Guidelines | EviCore by Evernorth](#)

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What if I don't agree with EviCore clinical determination on the requested authorization?

All appeals for prior authorizations should be directed to the Security Health Plan. To better understand the denial rationale, you are free to schedule a clinical consultation. However, please understand that the clinical consultation cannot result in a case approval / overturn of a Medicare denial.

What if I do not obtain prior authorization?

Claims may be denied if you do not obtain prior authorization or approval.

Where should I send claims once I provide services?

Send all claims as you would normally to Security Health Plan.

For assistance with membership, claims, provider network issues, etc., submit the issue to our dedicated teams via EviCore Communication Relationship Management (ECRM):

- + **Access:** [ECRM Services](#)
- + **ECRM educational resources:** [ECRM Resources](#) | EviCore by Evernorth
- + **Trouble using ECRM? Send an email to:** ECRMSupport@EviCore.com

Phone: 800-646-0418, option 4, and option 2 for web support

Live chat at www.EviCore.com