

Lab Management

Provider Presentation for:

- **Carolina Complete Health**
- **Trillium Physical Health Tailored Plan programs.**

Agenda

- **Program Overview**
- **Submitting Requests**
- **Prior Authorization Outcomes, Special Considerations & Post-Decision Options**
- **EviCore Provider Portal**
- **Provider Resources**
- **Questions & Next Steps**



Program Overview

Prior Authorization Services

EviCore will begin accepting prior authorization for Medicaid membership requests on May 1, 2026 for dates of service May 1, 2026 and after.

Applicable Membership	Prior authorization applies to the following services	Prior authorization does NOT apply to services performed in
Medicaid	- Outpatient - Elective/Non-emergent	- Emergency Rooms - Observation Services - Inpatient Stays



It is the responsibility of the provider to request prior authorization approval for services. Providers should verify member eligibility and benefits by contacting the number listed on the back of the member’s ID card.

Lab Management Solution

Genetic Testing

- Hereditary Cancer Syndromes
- Carrier Screening Tests
- Tumor Marker / Molecular Profiling
- Immunohistochemistry (IHC)
- Hereditary Cardiac Disorders
- Cardiovascular Disease and Thrombosis Risk Variant Testing
- Pharmacogenomics Testing
- Neurologic Disorders
- Mitochondrial Disease Testing
- Intellectual Disability / Developmental Disorders

[Provider Resources](#) | [EviCore by Evernorth](#)

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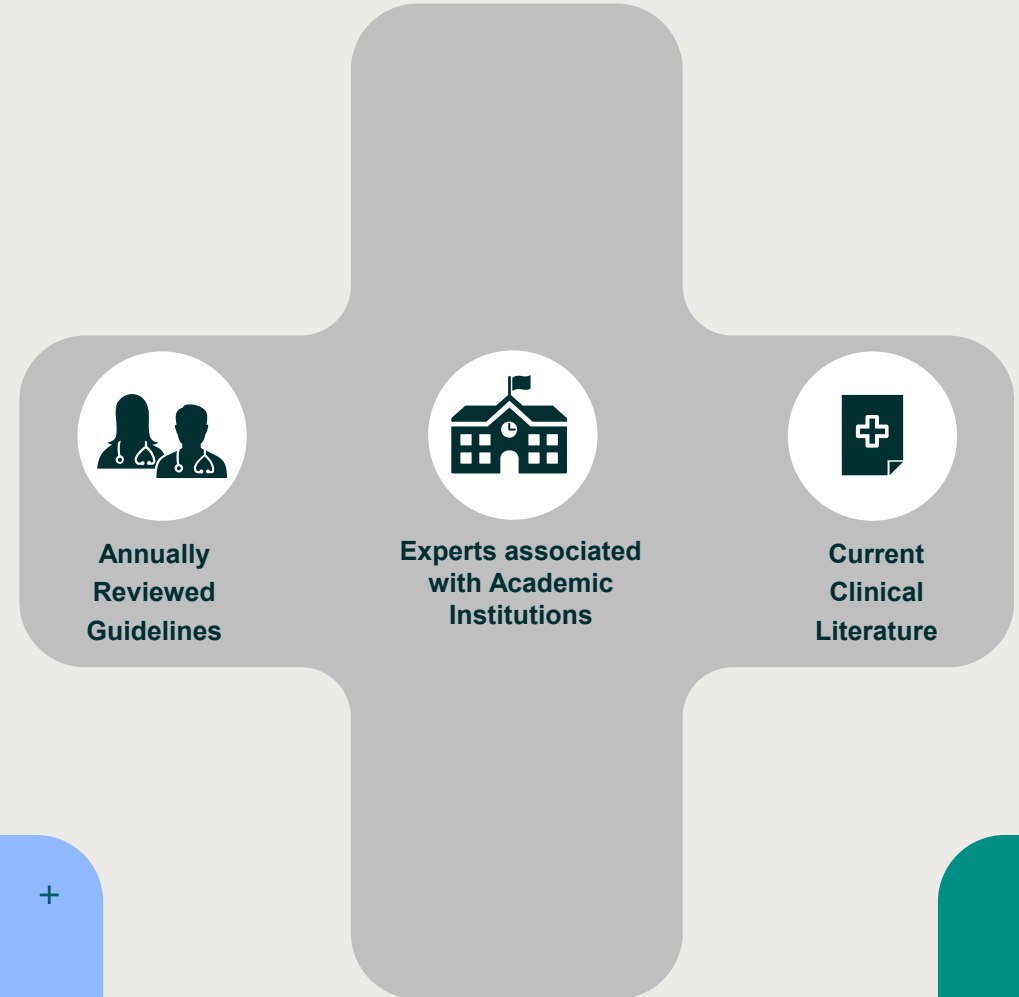


Evidence-Based Guidelines

The Foundation of Our Solutions

Evidence-based medical policy incorporating:

- Independent health technology assessments
- Annual review of current clinical literature
- Internal specialty expertise
- National society recommendations
- External academic institution subject matter experts
- Medical Advisory Board



Submitting Requests

How to Request Prior Authorization

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

- **Save time:** Quicker process than requests by phone.
- **Available 24/7.**
- **Save your progress:** If you need to step away, you can save your progress and resume later.
- **Upload additional clinical information:** No need to fax supporting clinical documentation; it can be uploaded on the portal.
- **View and print determination information:** Check case status in real time.
- **Dashboard:** View all recently submitted cases.
- **E-notification:** Opt to receive email notifications when there is a change to case status.
- **Duplication feature:** If you are submitting more than one request, you can duplicate information to expedite submissions.

To access the EviCore Provider Portal, visit www.EviCore.com

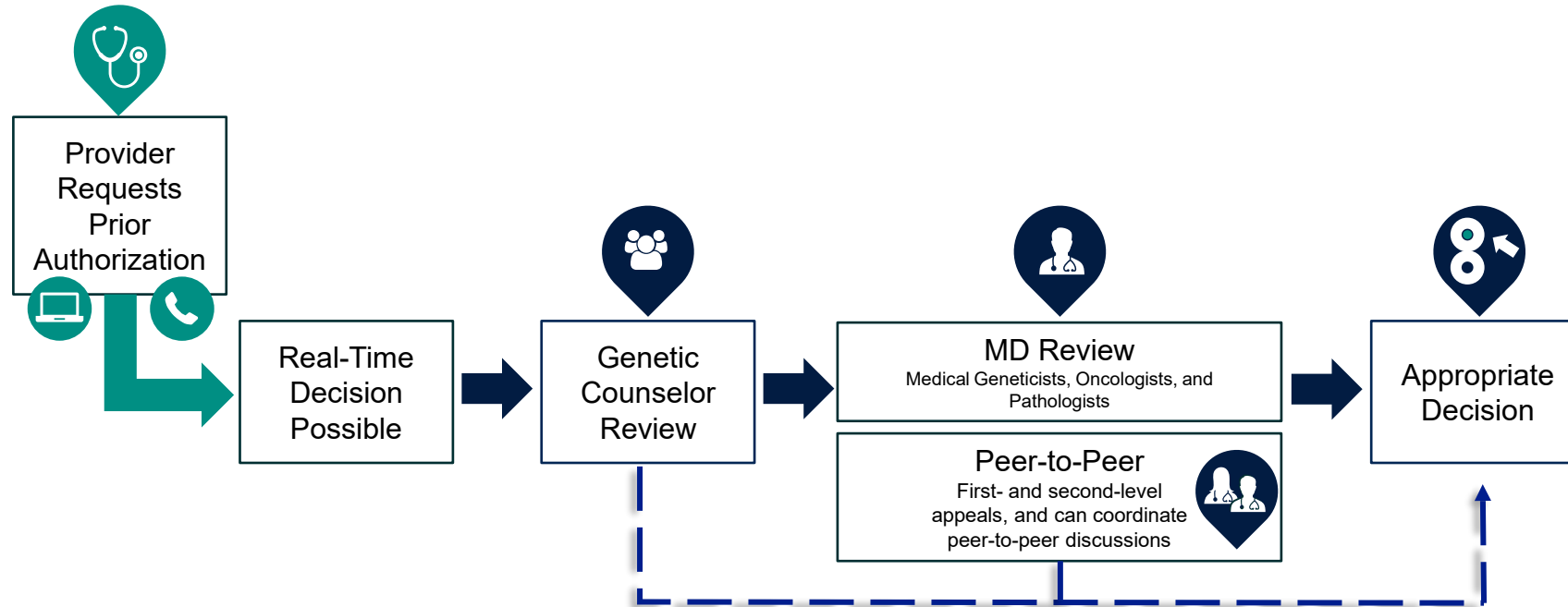


Phone: 855-252-1116
Monday – Friday
7 AM – 7 PM (local time)

Utilization Management | Prior Authorization Process

Prior Authorization for 400+ CPT Codes

Easy for Providers and Staff



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's Alphanumeric ID Number (including the alpha prefix and two-digit suffix)
- Phone Number (if applicable)

Rendering Laboratory Information

- Laboratory Name
- Street Address
- National Provider Identification Number (NPI)
- Tax Identification Number (TIN)
- Phone and Fax Numbers

Ordering Physician Information

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





Clinical Information Needed

If clinical information is needed, this may include, but is not limited to:

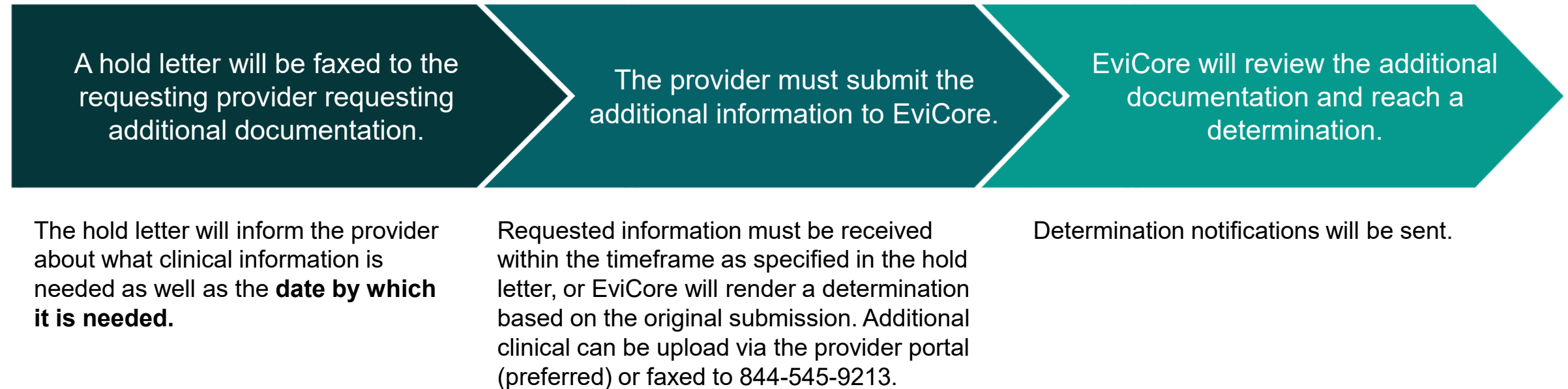
- Details about the test being performed (test name, description and/or unique identifier)
- All information required by applicable policy
- Test indication, including any applicable signs and symptoms or other reasons for testing
- Any applicable test results (laboratory, imaging, pathology, etc.)
- Any applicable family history
- How test results will impact patient care



All clinical information pages must include the member's first and last name and **two** additional patient identifiers, such as date of birth and health plan ID.

Insufficient Clinical | Additional Documentation Needed

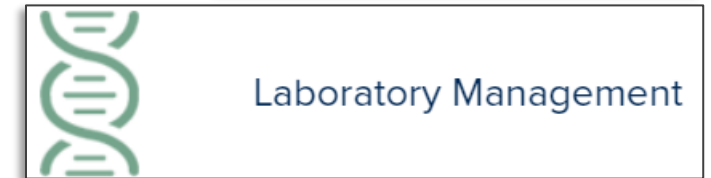
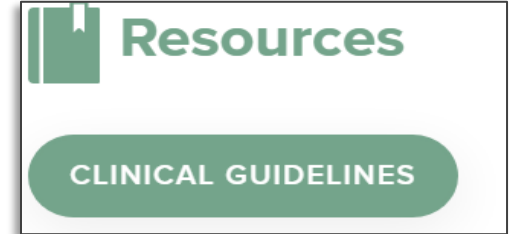
If during case build all required pieces of documentation are not received, or are insufficient for EviCore to reach a determination, the following will occur:



Clinical Guidelines

How to access our Guidelines:

1. Go to www.EviCore.com and select the “Resources” drop down menu on the far right hand side of your browser.
2. Then select the “Clinical Guidelines” button to be directed to the main clinical guidelines page.
3. Scroll down and select the **Laboratory Management** solution.
4. Type in desired health plan in the “Search Health Plan” search bar and press enter.
5. Select the appropriate guideline specific to the requested test(s).
6. Examples:
 - Molecular and genomic testing



Laboratory Management

Instructions for accessing the guidelines:

1. Search by health plan name to view clinical guidelines.
2. Locate the **reason for denial** section found in your letter. Identify the guideline title and then search by the provided guideline title. Select appropriate guideline document.

Example for **4Kscore for Prostate Cancer Risk Assessment**: *We based this decision on the guidelines listed below: **4Kscore for Prostate Cancer Risk Assessment** (MOL. TS. 120).*

Search Health Plan ...



Prior Authorization Outcomes, Special Considerations & Post-Decision Options

Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are valid for **60 calendar days**.
- **Partially Approved Requests:** In instances where multiple CPT codes are requested, some may be approved and some denied. In these instances, the determination letter will specify what has been approved as well as post decision options for denied codes.
- **Denied Requests:** Based on evidence-based guidelines, if a request is determined as inappropriate, a notification with the rationale for the decision and post decision/ appeal rights will be issued.

Notifications:

- Authorization letters will be faxed to the ordering providers.
- Web initiated cases will receive e-notifications when a user opts to receive.
- Members will receive a letter by mail.
- Approval information can be printed on demand from the EviCore portal: www.EviCore.com

Special Circumstances

Authorization Update

- If updates are needed on an existing authorization, please contact EviCore by phone at 855-252-1116.
- While EviCore needs to know if changes are made to the approved request, any change could result in the need for a separate clinical review and require a new request (and the original approved request would need to be withdrawn).
- If the authorization is not updated, it may result in a claim denial.



Post-Decision Options |

My case has been denied. What's next?

- Your **determination letter** is the best immediate source of information to assess what options exist on a case that has been denied. You may also call EviCore at **855-252-1116** to speak with an agent who can provide available option(s) and instruction on how to proceed.
- Alternatively, select **All Post Decisions** under the **Authorization Lookup** function on **EviCore.com** to see available options.

Reconsiderations

- Reconsiderations must be requested within 5 business days after the determination date.
- Reconsiderations can be requested in writing or verbally via a Clinical Consultation with an EviCore physician.

Appeals

- EviCore will not process first-level appeals.
- Appeals can be made by following the instructions provided in the determination letter.



Special Circumstances

Urgent Prior Authorization Requests

- EviCore uses the NCQA/URAC definition of **urgent**: when a delay in decision-making may seriously jeopardize the life or health of the member.
- Can be initiated on provider portal or by phone.
- Urgent cases are typically reviewed within 24 to 72 hours.



Retrospective requests are not permitted.

EviCore Provider Portal

EviCore Provider Portal | Access and Compatibility

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

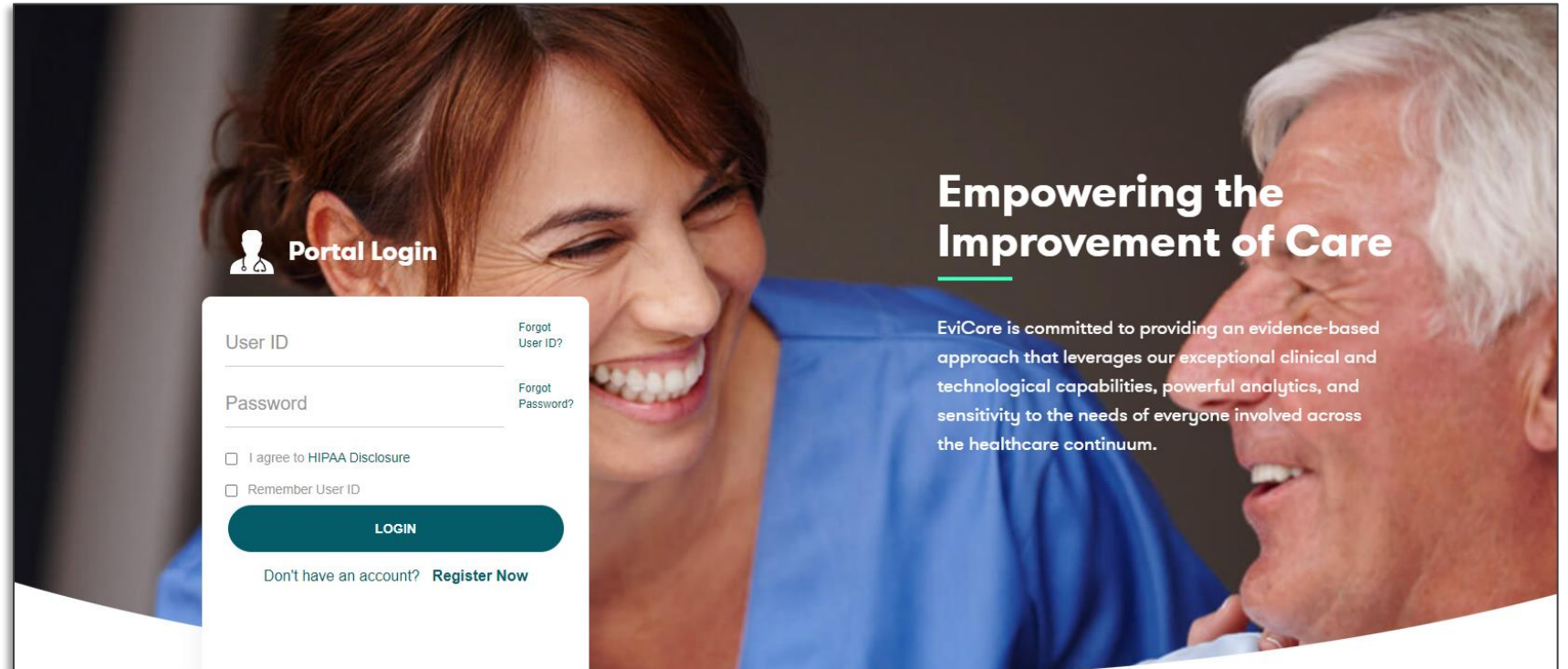
To access resources on the EviCore Provider Portal, visit EviCore.com/provider

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.

Creating an EviCore Provider Portal Account

- Select **CareCore National** as the Default Portal.
- Complete the User Information section in full and **Submit Registration**.
- You will immediately be sent an email with a link to create a password. Once you have created a password, you will be redirected to the login page.

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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*: --Select--

--Select--

CareCore National

Medsolutions

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*:

Email*:

Confirm Email*:

First Name*:

Last Name*:

Address*:

City*:

State*:

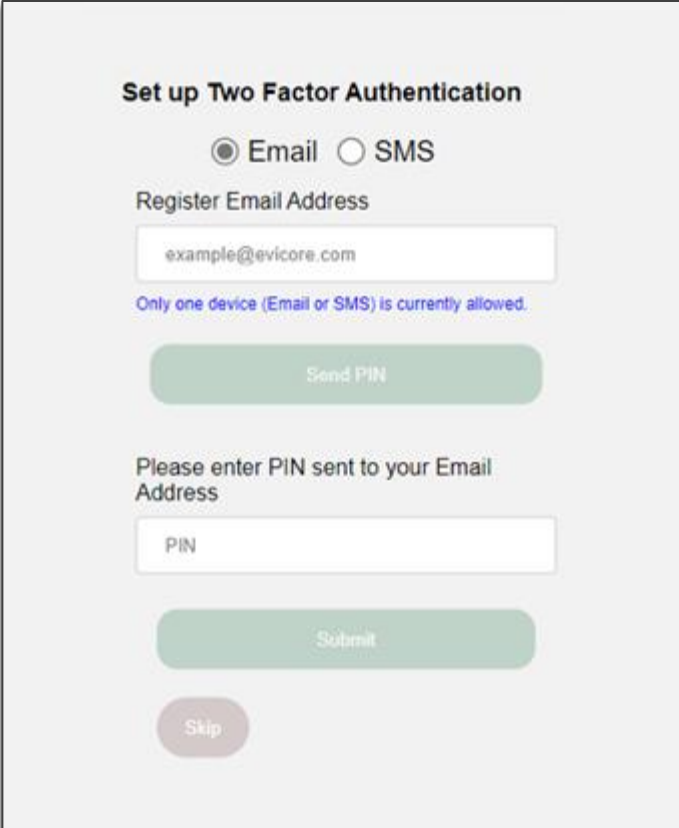
Zip*:

Office Name:

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.



The screenshot shows a web form titled "Set up Two Factor Authentication". At the top, there are two radio buttons: "Email" (which is selected) and "SMS". Below this is a label "Register Email Address" followed by a text input field containing "example@evicore.com". A small blue note below the field states "Only one device (Email or SMS) is currently allowed." Below the field is a green button labeled "Send PIN". Further down is another label "Please enter PIN sent to your Email Address" followed by a text input field labeled "PIN". Below this field is a green button labeled "Submit" and a smaller, greyed-out button labeled "Skip".

Add Providers

- + You can add providers and their NPI's to your account prior to case submission
- + Click the **Manage Your Account** tab to add provider information
- + Select **Add Provider**
- + Enter the NPI, state, and zip code to search for the provider
- + Select the matching record based upon your search criteria
- + You can also click **Add Another Practitioner** to add another provider to your account
- + You can access the **Manage Your Account** at any time to make any necessary updates or changes

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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

Tuesday, June 25, 2024 8:56 AM [Log Off](#)

Manage Your Account

Office Name: eviCore [CHANGE PASSWORD](#) [EDIT ACCOUNT](#)

Address: work at home

Primary Contact: [Redacted] [EDIT](#)

Email Address: [Redacted] [EDIT](#)

[ADD PROVIDER](#)

Click Column Headings to Sort

Name	NPI	
B	[Redacted]	REMOVE NPI
F	[Redacted]	REMOVE NPI
A	[Redacted]	REMOVE NPI
P	[Redacted]	REMOVE NPI
S	[Redacted]	REMOVE NPI
T	[Redacted]	REMOVE NPI
Y	[Redacted]	REMOVE NPI

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

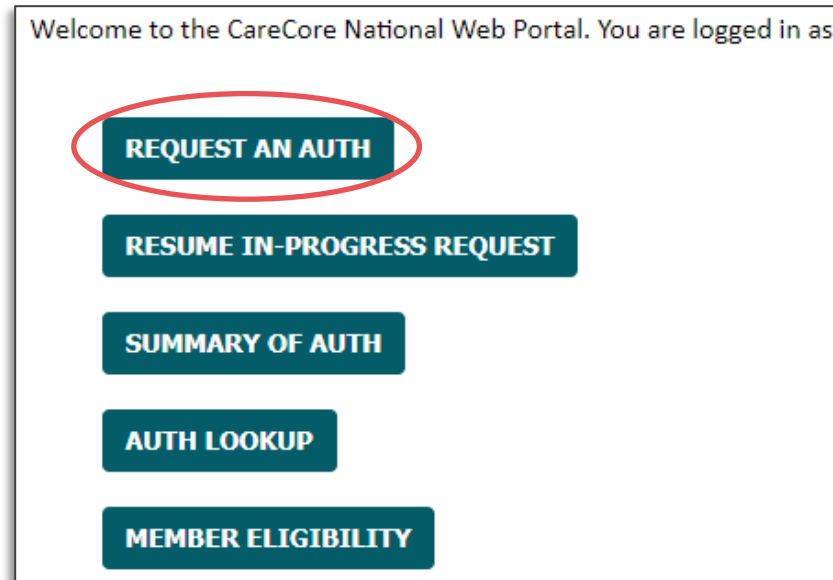
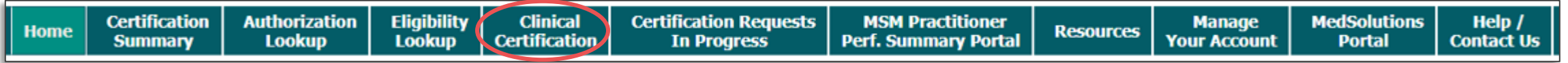
Practitioner Zip

[FIND MATCHES](#) [CANCEL](#)

[Feedback](#)

Portal Case Submission

Initiating a Case



- Click the **Clinical Certification** tab to get started.
- Choose **Request an Auth** 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	MedSolutions Portal	Help / Contact Us
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Request an Authorization

To begin, please select a program below:

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

Are you building a case as a referring provider or as a rendering lab?

Please Select ▼

CONTINUE

Are you building a case as a referring provider or as a rendering lab?

Please Select ▼

Please Select
Referring Provider
Rendering Lab

- Choose **Clinical Certification** to begin a new request.
- Select **Lab Management Program**.
- Select if you are the referring provider or rendering lab, then proceed to entering information.

Clinical Certification Request | Search and Select Provider

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

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH

CLEAR SEARCH

	Provider
SELECT	1598701070 - GORAYA, SHAZIA (Selected)

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

Search By NPI:

SEARCH

BACK

CONTINUE

[Click here for help](#)

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

Clinical Certification Request | Search and Select Provider

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

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH

CLEAR SEARCH

	Provider
SELECT	

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

Search By NPI:

SEARCH

	Practitioner Name	NPI	Address	City	State	ZipCode	Phone	Fax
SELECT								

BACK

CONTINUE

[Click here for help](#)

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

Attention!

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

YES

NO

Clinical Certification Request | Select Health Plan

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

Requesting Provider:

Please select the insurer for this authorization request.

Please Select a Health Plan ▼

BACK

CONTINUE

[Click here for help](#)

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

Clinical Certification Request | Enter Contact Information

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	MedSolutions Portal	Help / Contact Us
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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 enter email address in box above.

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

BACK

CONFIRM FAX AND CONTINUE

[Click here for help](#)

- Enter/Edit the **provider's name** and appropriate information for the point of contact.
- Practitioner name, fax, and phone will pre-populate; edit as necessary.

The e-notification box is checked by default to enable email notices for any updates on case status changes. Make sure to uncheck this box if you prefer to receive faxed notices.

Member & Request Information

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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Patient Eligibility Lookup

Patient ID:*

Date Of Birth:* MM/DD/YYYY

Patient Last Name Only:* [?]

ELIGIBILITY LOOKUP

BACK

- Enter the **member information**, including the patient ID number, date of birth, and last name.
- Click **Eligibility Lookup**.
- Next screen you can enter **LABST**.

Requested Service + Diagnosis

Lab Management Program Procedures

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

LABTST ▼ MOLECULAR GENETIC TEST ▼

Don't see your 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 Lab Management Program

LOOKUP

Verify Service Selection

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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Requested Service + Diagnosis

Confirm your service selection.

CPT Code: LABTST
Description: MOLECULAR GENETIC TEST
Primary Diagnosis Code: R97.1
Primary Diagnosis: Elevated cancer antigen 125 [CA 125]
Secondary Diagnosis Code:
Secondary Diagnosis:
[Change Procedure or Primary Diagnosis](#)
[Change Secondary Diagnosis](#)

BACK **CONTINUE**

[Click here for help](#)

- Verify requested service & diagnosis.
- Edit any information if needed by selecting change procedure or primary diagnosis.
- Click **CONTINUE** to confirm your selection.

Clinical Certification Request | Site Selection

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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Add Site of Service

Specific Site Search
Use the fields below to search for specific sites. For best results, search by NPI or TIN. Other search options are by name plus zip or name plus city. You may search a partial site name by entering some portion of the name and we will provide you the site names that most closely match your entry.

NPI:

Zip Code:

Site Name:

TIN:

City:

☐ Exact match

☒ Starts with

LOOKUP SITE

- Search for the **site of service** where the procedure will be performed (for best results, search with NPI, TIN, **or** zip code).
- **Select** the specific site where the procedure will be performed.

Proceed to Clinical Information | Example Questions

Proceed to Clinical Information

Some tests can be automatically authorized by responding to a set of specific clinical questions. In order to determine the right clinical questions to ask, we need to know exactly which test(s) and procedure code(s) are being considered. The next several questions will guide test and procedure code selection.

1 To the best of your knowledge, has a previous prior authorization request been made for this member and this test?

☐ Yes ☐ No ☐ Unknown

2 Has the specimen been collected?

☐ Yes ☐ No ☐ Unknown

SUBMIT

Proceed to Clinical Information

1 What is the specimen collection or retrieval from storage date? If the date is unknown, please use today's date.

SUBMIT

Proceed to Clinical Information

1 What kind of testing is being done?

☒ Testing related to cancer
☐ Testing related to pregnancy
☐ Other
☐ Unknown

2 What test is being requested? Please provide the test name or a short description.

3 Do you know the procedure codes that will be billed for this test?

☐ Yes ☐ No

SUBMIT

☐ Finish Later

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

- **Clinical Certification** questions will populate based upon the information provided
- You can save your request and **finish later** if needed:
 - Please complete the case before the **end of the day**.
 - When logged in, you can resume a saved request by going to **Certification Requests in Progress**.



Proceed to Clinical Information | More Examples

Proceed to Clinical Information

What is the name of the test you are requesting? A selection from the list below is REQUIRED in order to proceed with this request.

This is a list of commonly requested tests from the lab you selected. They are in alphabetic order by the lab's actual test name, which can usually be found on the test requisition.

1 Submitting your request will be much faster if the test name can be found.

Test Brand Name	Test Category
☐ None Of These	
☐ ATM Analysis	ATM Sequencing and Deletion/Duplication Analysis
☐ BRACAnalysis {Integrated BRACAnalysis; CPT 81162}	BRCA1/2 Sequencing and Deletion/Duplication Analysis
☐ BRACAnalysis {Integrated BRACAnalysis; CPT 81163, 81164}	BRCA1/2 Sequencing and Deletion/Duplication Analysis
☐ BRACAnalysis and myRisk {Integrated BRACAnalysis and myRisk; CPT 81162, 81479}	Hereditary Breast and Ovarian Cancer Panel Tests
☐ BRACAnalysis and myRisk {Integrated BRACAnalysis and myRisk; CPT 81163, 81164, 81479}	Hereditary Breast and Ovarian Cancer Panel Tests
☐ BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81162, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
☐ BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81163, 81164, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
☐ BRACAnalysis and PALB2 {2019 codes; Integrated BRACAnalysis and PALB2; 81163, 81164, 81406}	Hereditary Breast and Ovarian Cancer Panel Tests
☐ BRACAnalysis and PALB2 {2020 codes; Integrated BRACAnalysis and PALB2; 81162, 81307}	Hereditary Breast and Ovarian Cancer Panel Tests

1 2 3 4 5 6 7

All A B C E G M N P S T

** NOTE: If you know the name of the test, choose the first letter of the test name above. Otherwise, you can scroll through all tests using the page numbers. If you cannot find the test, please return to page 1 of the "All" tab and select "None of These".

***FOR LAB REPRESENTATIVES: If you would like to correct or add to this list, please email labmanagement@evicore.com.

Clinical Certification questions will populate based upon the information provided.

Proceed to Clinical Information | Free Text Questions

Proceed to Clinical Information

Answer the following questions in clinical detail:

1 Why is this test being requested and how will the results be used to change management?

2 Describe any applicable current or past medical history, lab testing, or procedure results.

3 If relevant to the testing, describe the family history, including the applicable clinical findings, diagnoses, and/or test results.



Free text answers allow for further explanation that may be needed.

Next Step | Criteria Not Met

If criteria is not met based on clinical questions, you will receive a similar request for additional info:

Is there any additional information specific to the member's condition you would like to provide?

☐ I would like to upload a document after the survey

☐ I would like to enter additional notes in the space provided

☐ I would like to upload a document and enter additional notes

☐ I have no additional information to provide at this time

SUBMIT

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 Medical Review.

Provider Name:		Contact:	
Provider Address:		Phone Number:	
		Fax Number:	
Patient Name:		Patient Id:	
Insurance Carrier:			
Site Name:		Site ID:	
Site Address:			
Primary Diagnosis Code:	R68.89	Description:	Other general symptoms and signs
Secondary Diagnosis Code:		Description:	
Date of Service:	Not provided	Description:	MOLECULAR GENETIC TEST
CPT Code:	LABTST		
Case Number:			
Review Date:	7/15/2020 5:27:45 PM		
Expiration Date:	N/A		
Status:	Your case has been sent to Medical Review.		

CANCEL PRINT CONTINUE

Tips:

- Upload clinical notes on the portal to avoid any delays by faxing
- Additional information uploaded to the case will be sent for clinical review
- Print out summary of request that includes the case number and indicates “Your case has been sent to clinical review.”

Criteria Met

If your request is authorized during the initial submission, you can print the summary of the request for your records.

Summary of Your Request

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

The following testing is approved: BRCA1 and/or 2 Gene Testing. Procedure code(s) approved: 81162.

Provider Name:		Contact:	
Provider Address:		Phone Number:	
		Fax Number:	
Patient Name:		Patient Id:	
Insurance Carrier:			
Site Name:		Site ID:	
Site Address:			
Primary Diagnosis Code:	Z01.419	Description:	Encounter for gynecological examination (general) (routine) without abnormal findings
Secondary Diagnosis Code:		Description:	
Date of Service:	Not provided	Description:	
CPT Code:	LABTST	Description:	MOLECULAR GENETIC TEST
Authorization Number:			
Review Date:	7/15/2020 5:21:21 PM		
Expiration Date:	1/9/2021		
Status:	The following testing is approved: BRCA1 and/or 2 Gene Testing. Procedure code(s) approved: 81162.		

CANCEL

PRINT

CONTINUE

Provider Resources

Contact EviCore's Dedicated Teams



Client and Provider Services

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

Web-Based Services and Portal Support

- Live chat
- Phone: 800-646-0418 (option 2)
- [ECRM Services](#)

Call Center/Intake Team

- Phone: 855-252-1116
- Representatives are available from 7 a.m. to 7 p.m. local time.

Provider Engagement

- Regional team that works directly with the provider community.
- **Provider Engagement Manager Territory List**

Provider Resource Website

Provider Resource Pages

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

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

To access these helpful resources, please visit:

<https://www.EviCore.com/resources>

(Choose specific health plan from the dropdown menu)

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

To access these helpful resources, visit EviCore's [Providers' Hub](#).



Ongoing sessions for Web Portal Training

- Provides step-by-step guidance on submitting requests through both the EviCore CareCore National platform and EviCore MedSolutions platform.
- Includes portal registration, authorization lookup, and scheduling Peer-to-Peer consultations.

Register for Provider Sessions:

Provider's Hub > Scroll 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 great for those new to Evicore.com and the prior authorization process.

EviCore's Provider Newsletter

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