

Prior Authorization Quick Reference Guide

Authorization Required

All outpatient, non-emergent, elective procedures, including:

- **Advanced Imaging:**
 - Magnetic resonance imaging (MRI)
 - Magnetic resonance angiograms (MRAs)
 - Positron emission tomography (PET) scans
 - Positron emission tomography-computed tomography (PET-CT)
 - Computerized tomography (CT) scans
 - Computed tomography angiography (CTA) scans
 - Nuclear medicine
- **Cardiology Services:**
 - Myocardial perfusion imaging (SPECT and PET)
 - Stress echocardiography
 - Echocardiography: transthoracic and transesophageal
 - Diagnostic heart catheterization
 - Nuclear cardiac imaging

Authorization Not Required

- Emergency room imaging/services
 - Inpatient imaging/services
 - Observation stay imaging/services



Urgent Outpatient Requests

When a service is required due to a medically urgent condition, the provider or office must either call eviCore healthcare (eviCore) at 1-888-564-5492, or submit the request via NaviNet. If the request is submitted through NaviNet, the provider or office is required to upload all supporting clinical documentation during case initiation.

Urgent care is any request for medical care or treatment with respect to which the application of the time periods for making non-urgent care determinations could result in the following circumstances:

- Could seriously jeopardize the life or health of the member or the member's ability to regain maximum

function, based on a prudent layperson's judgment, or

- In the opinion of a practitioner with knowledge of the member's medical condition, would subject the member to severe pain that cannot be adequately managed without the care or treatment that is the subject of the request. (National Committee for Quality Assurance [NCQA] HUM8)

Authorization Requirements

To ensure the authorization process is as quick and efficient as possible, we highly recommend that the physician's office submitting requests have:

- Office notes related to the current diagnosis
- Patient's name, address, and member current ID
- Recent clinical information, including imaging studies and prior test results related to the diagnosis

Authorizations

An authorization number will be faxed to the provider upon approval. eviCore will approve the CPT or HCPCS code or codes for the requested procedure. **Contact eviCore for changes to the facility or service.**

It is the responsibility of the provider or facility to confirm that prior authorization has been requested and approved prior to the service(s) being performed. Verification may be obtained via the eviCore website or by calling **1-888-564-5492.**

Important! Authorization from eviCore does not guarantee claim payment. Services must be covered by the health plan, and the member must be eligible at the time services are rendered. **Claims submitted for unauthorized procedures are subject to denial, and the member must be held harmless.** Please verify the member's eligibility with the health plan.

Highmark Advanced Imaging and Cardiology Services Program



Prior Authorization Quick Reference Guide

Authorization Denials

eviCore notifies the provider and member in writing of a denial and provides a rationale for the determination within one working day of the decision. This communication sets forth the appeal options per current state policy. eviCore also offers the physician a consultation with an eviCore medical director on a peer-to-peer basis for Commercial members. In certain instances, additional information provided during the peer-to-peer consultation is sufficient to satisfy medical necessity criteria.

We offer three convenient methods to request authorizations:

Web Portal

Authorization requests can be submitted via NaviNet®.

You are able to initiate a case, check status, review guidelines, view authorizations or eligibility, and more. NaviNet remains the quickest, most efficient way to obtain information.

If you have questions or need assistance, please contact the Web Portal team via email at portal.support@evicore.com, or by phone at 1-800-646-0418, option 2.

Phone

Contact us toll-free at 1-888-564-5492 from 7 a.m. to 7 p.m. EST, Monday through Friday. For service, you'll need all pertinent clinical information before you call. Outside of normal business hours, you may call eviCore and leave a message for a return call the next business day.

eviCore's call center will be closed in observance of New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, and Christmas Day. **NaviNet and the eviCore web portal are available 24/7, 365 days a year.**

Fax

Fax requests can be submitted to 1-800-540-2406. You can obtain condition-specific forms on the eviCore website at evicore.com under the **Clinical Guidelines and Forms** section. Complete the appropriate fax form and fax to the number above. eviCore will respond by fax when the authorization decision is complete.

Guidelines on the Web

To access the eviCore Guidelines via the web, visit evicore.com.

From there you can access important information and these resources:

- Clinical guidelines and Quick Reference Guides
- Education tools
- Online forms
- Program overview

Need Clinical Support?

If your case requires further clinical discussion for approval, we welcome requests for clinical determination discussions from the provider. One of eviCore's physicians can assist in a consideration of radiology and cardiology options. To request a clinical discussion, call eviCore at 1-888-564-5492 and request a peer-to-peer discussion.

This is not where denials reconsiderations would be discussed. For claim denials, you must follow the appeal process.

Implementation Site

The eviCore implementation website contains web registration and submission information, a comprehensive CPT and HCPCS codes list, FAQ documents, and other important resources that are kept up-to-date for your convenience: evicore.com/healthplan/highmark.