

# Radiology and Cardiology

*Migration from the MedSolutions portal to the eviCore (CareCorenational) portal for prior authorizations*

Provider Orientation Session for:  
Blue Cross and Blue Shield (BCBSRI)



Empowering  
the Improvement  
of Care

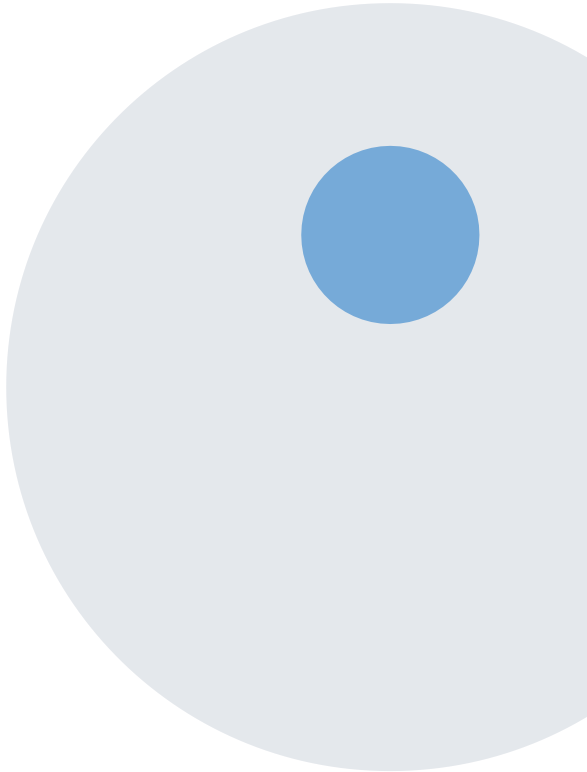
# From MedSolutions to CareCorenational

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Effective 3/5/2024, Blue Cross/Blue Shield of Rhode Island (BCBSRI) prior authorization requests for radiology and cardiology procedures will be initiated through eviCore healthcare (CareCorenational portal) for dates of service 3/5/2024 and beyond, as outlined below.

Services performed without authorization may be denied for payment, and you may not seek reimbursement from members.

BCBSRI Prior Authorization Case Initiation Methods	
Web Portal:	<a href="https://bcbsri.com">bcbsri.com</a>
Phone:	888-233-8158
Fax:	800-540-2406



# Applicable Memberships

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**Prior Authorization is required for BCBSRI members who are enrolled in the following lines of business/programs:**

- **Medicare Advance/Medicare Advantage**
- **Commercial**

# Radiology Prior Authorization Services

eviCore healthcare will begin accepting prior authorization requests for **Radiology** services on 3/5/2024 for dates of service 3/5/2024 and beyond

## Prior Authorization applies to the following services:

- Cat Scan
- Magnetic Imaging
- Pet Scan
- NCM

## Prior Authorization does NOT apply to services that are preformed during:

- Emergency Room Services
- 23 Hour Observations
- Inpatient Stays

## Provider Resource Page:

Providers and/or staff can utilize the page to access a list of covered CPT codes, FAQs, and additional educational materials by visiting:

[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)

# Cardiology Prior Authorization Services

eviCore healthcare will begin accepting prior authorization requests for **Cardiology** on 3/5/2024 for dates of service 3/5/2024 and beyond

## Prior Authorization applies to the following services:

- Cardiac MR
- Cardiac CT
- Cardiac Pet Scan
- Nuclear Stress
- Echo
- Stress Echo
- Diagnostic Heart Catheter

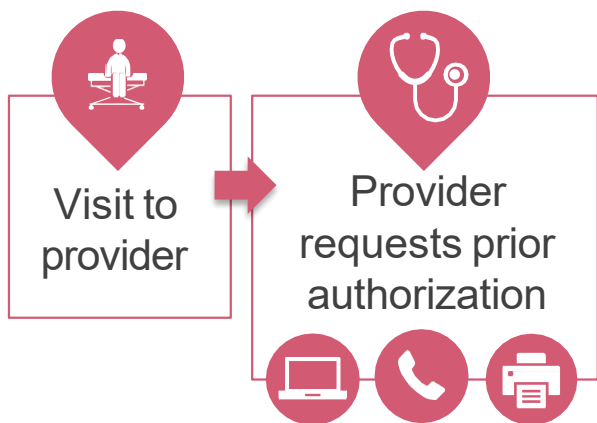
## Prior Authorization does NOT apply to services that are preformed during:

- Emergency Room Services
- 23 Hour Observations
- Inpatient Stays

## Provider Resource Page:

Providers and/or staff can utilize the page to access a list of covered CPT codes, FAQs, and additional educational materials by visiting:

[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)



Based on evidence-based guidelines, request is **Approved**.

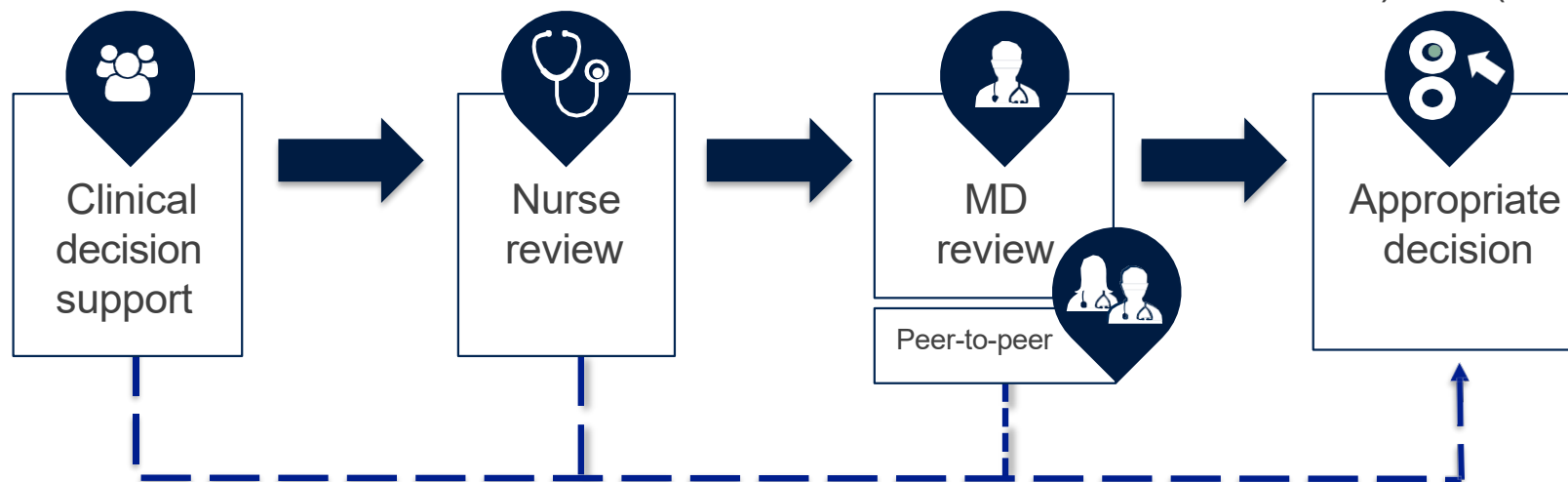
An **Approval Letter** will be issued with authorization information to the provider (written), site (written) and member (written and verbal).



Based on evidence-based guidelines, request is **Denied**.

A denial letter with clinical rationale for the decision and appeal rights will be issued to the provider (written and verbal) and member (written and verbal), site (written)

Easy for Providers and staff



# Non-Clinical Information Needed

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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
- Individual National Provider Identification (NPI) Number
- Tax Identification Number (TIN)
- Phone and Fax Numbers

## Rendering Facility Information

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



# Prior Authorization Outcomes

## Approvals and Denials

### Approved Requests

- All requests are processed in within 14 calendar days for Medicare and 2 business days for commercial after receipt of all necessary clinical information. Urgent requests have a 72 hour turn around time.
- Authorizations are typically valid for 180 days from the date of the final determination.

### Denied Requests

- Communication of the denial determination and rationale.
- Letter contains reconsideration options based on the members health plan and line of business.
- Instructions on how to request a Clinical Consultation.

### Authorization Letter

- The letter will be faxed or emailed to the ordering physician and performing facility.
- The member will receive notification verbally and in writing.
- Approval information can be printed on demand from the eviCore portal.

### Denial Letter

- The letter will be faxed or emailed to the ordering site: the physician will receive written and verbal notification.
- The member will receive both written and verbal notification.
- The letter will contain the denial rationale and reconsideration options and instructions.





# Post- Service Options: Commercial Members

## My case has been denied. What's next?

- eviCore will process first level appeals for Commercial Members. All clinical information and the prior authorization request will be reviewed by a physician other than the physician who made the initial determination
- A written notice of the appeal decision will be mailed to the member and faxed/emailed to the ordering provider
- Peer to Peer clinical considerations are allowed at any time.
- eviCore is delegated 1<sup>st</sup> level appeals



# Pre-Decision Options: Medicare Members

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I've received a request for additional clinical information. What next?

## **Submission of Additional Clinical**

- eviCore will notify Providers telephonically and in writing before a denial decision is issued on Medicare cases
- You may submit additional clinical to eviCore for consideration per the instructions received
- Additional clinical must be submitted to eviCore in advance of the due date referenced

## **Pre-Decision Clinical Consultation**

- Providers may choose to request a Pre-Decision Clinical Consultation instead of submitting additional clinical information
- The Pre-Decision Clinical Consultation must occur before the due date referenced
- If additional information was submitted, we will proceed with our determination and are not obligated to hold the case for a Pre-Decision Clinical Consultation, even if the due date has not yet lapsed



# Post-Decision Options: Medicare Members

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## My case has been denied. What next?

### Clinical Consultation

- Providers may request a Clinical Consultation with an eviCore physician to understand the reason for denial
- Once a denial decision has been made, however, the decision cannot be overturned via Clinical Consultation

### Reconsideration

- Medicare cases do not have a Reconsideration option

### Appeals

- Submit to BCBSRI Grievance and Appeals Unit
- By Mail: 500 Exchange St. Providence, RI 020903
- BY e-mail: GAU Complaints [Appeals@bcbsri.org](mailto:Appeals@bcbsri.org)
- By fax: 401-459-5668



# Special Circumstances

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- **Retrospective (Retro) Authorization Requests**

- Retrospective authorization requests are reviewed for clinical urgency and medical necessity. eviCore has 30 calendar days for commercial and 14 calendar days for Medicare to provide a final determination for retrospective authorization requests. Retrospective requests that are submitted beyond the timeframe will be administratively denied.
- **Urgent Prior Authorization Requests**
  - Urgent requests can now be submitted on eviCore's website using bcbsri.com, following the request procedure will bring you to the eviCore portal. When asked "Is this request standard/routine?" simply answer no and the case will be sent to the urgent work list. Or you can call 888-233-8158 and advise the case is urgent.
  - 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 72 hours upon receiving the prior authorization request.



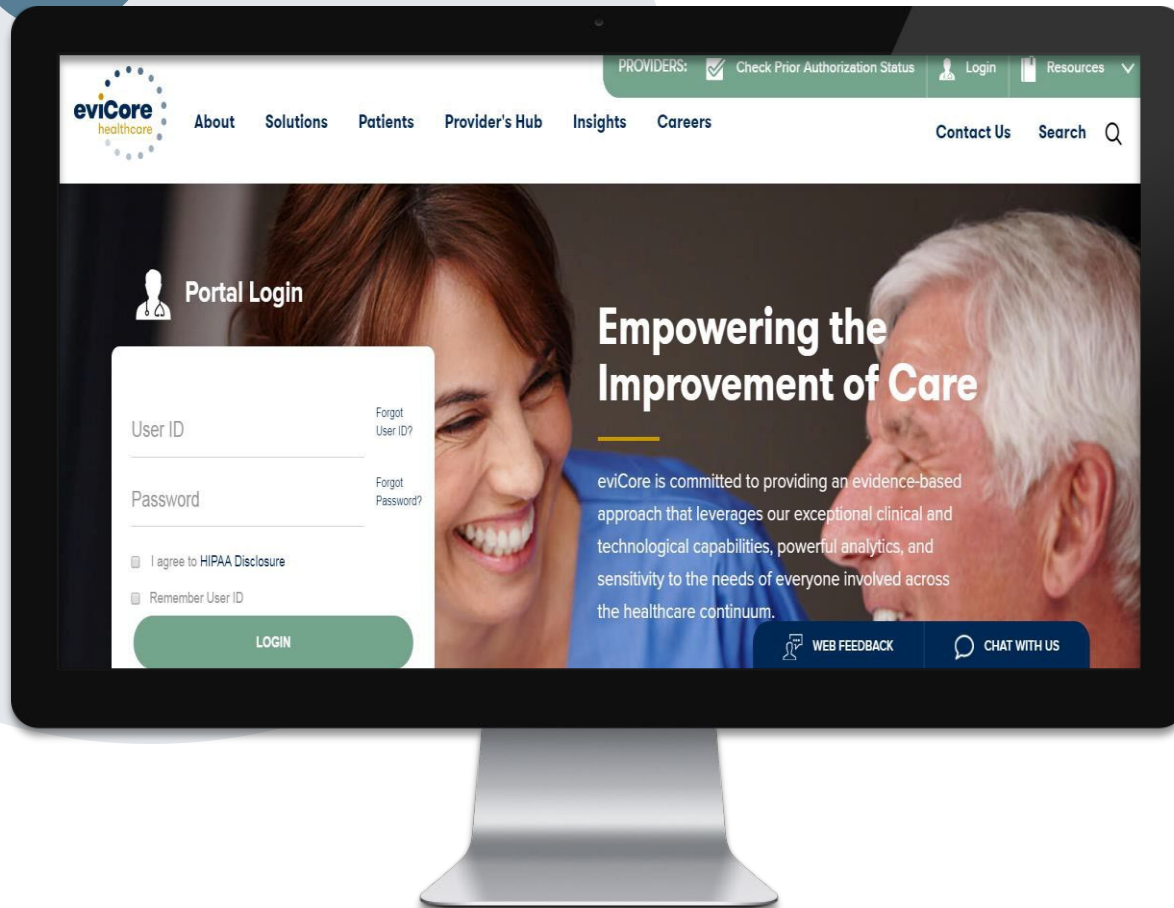
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# Provider Portal Overview

Submitting Online Prior Authorization Requests

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# eviCore Provider Portal



The eviCore online portal is the quickest, most efficient way to obtain resource information and to check prior authorization. It is available 24/7. You must register for a User ID and Password.

To request a prior authorization you access your account at [bcbsri.com](http://bcbsri.com) which will link you to the evicore portal to start the request.

Or by phone:

**Phone Number:**

888-233-8158

7:00 a.m. to 7:00p.m.

Monday – Friday

By fax: 800-540-2406



[Claims & Billing](#)[Preauthorization](#)[Patient Eligibility](#)[Cost Estimator](#)[Tools & Resources](#)[Referrals](#)[Quality](#)[HIPAA](#)[Update Web Account](#)[Secure Messaging](#)[Contact Us](#)[FAQs](#)

## Preauthorization Requests Need Help?

Is this a Prospect member? Not sure? Enter member information here to check.

Member ID

Member DOB

[SUBMIT](#)

To create a new request, select a request type below.

### Guides

Click on the corresponding guide to learn more on specific authorizations.

- [Home Health Authorizations through MHK Provider Portal](#)
- [Inpatient Authorizations through MHK Provider Portal](#)
- [Service Authorizations through MHK Provider Portal](#)
- [Behavioral Health Inpatient Authorizations](#)
- [Behavioral Health Outpatient Authorizations](#)

### BCBSRI Requests

#### MHK

- Inpatient authorizations (elective, emergency and maternity)
- Long-Term Acute Care & Acute Rehabilitation
- Genetic Testing
- Durable Medical Equipment
- Procedures
- Medical drugs (for Medicare Advantage and HOST membership)
- Behavioral Health Inpatient and Outpatient services
- Infertility services for Commercial, self-insured groups, FEP, and Medicare
- Spinal surgeries for Commercial members

#### eviCore

- Cardiology
- High-tech Radiology
- Spinal surgeries for Medicare Advantage members

#### Prime(Cover my Meds)

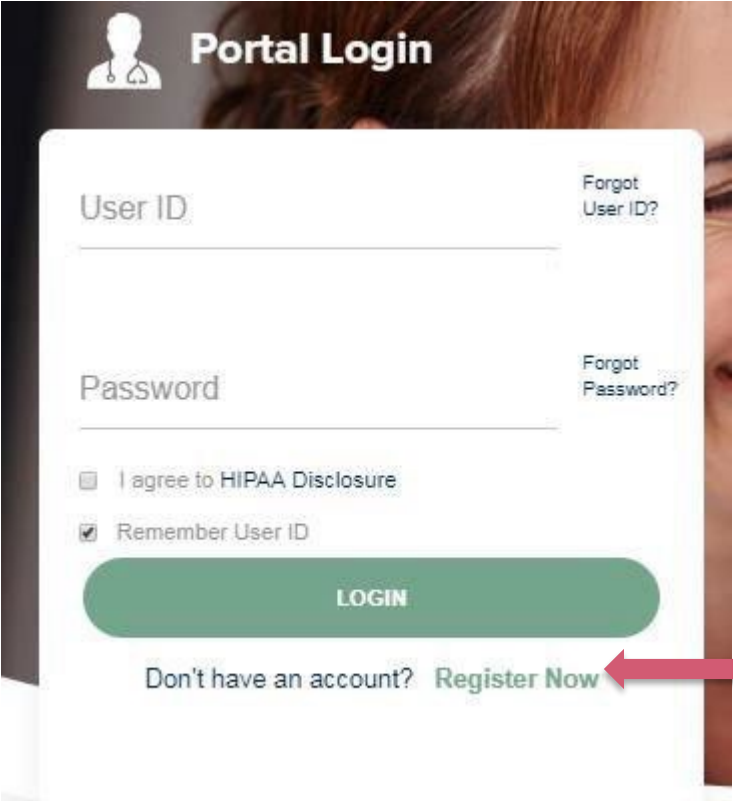
- Medications
- Medical drugs for Medicare and Commercial members


#### WinFertility IVF Services

- Infertility services for Commercial, fully-insured members

#### NEHP Cross Border Request

# Creating An Account



 **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](#)

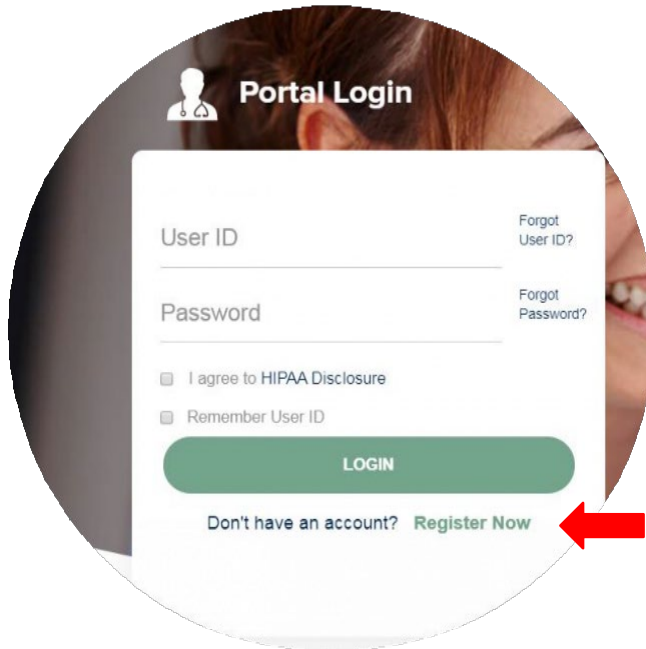


To create a new account, click **Register**.



# Registering for an account

[www.eviCore.com](http://www.eviCore.com)

A screenshot of the 'User Registration' form on the eviCore website. The form is divided into two main sections: 'Web Portal Preference' and 'User Information'. In the 'Web Portal Preference' section, there is a dropdown menu for 'Default Portal' set to 'CareCore National'. A red arrow points to this dropdown. Below it, a note states: 'If you are a health plan representative, please contact web support at 1-800-646-0418 option 2 for your account to be created.' The 'User Information' section contains various input fields for personal and professional details, including 'User Name', 'Email', 'Confirm Email', 'First Name', 'Last Name', 'Address', 'City', 'State', 'Zip', 'Phone', 'Ext', and 'Fax'. A 'Next' button is located at the bottom right of the form.

Select a **Default Portal**, and complete

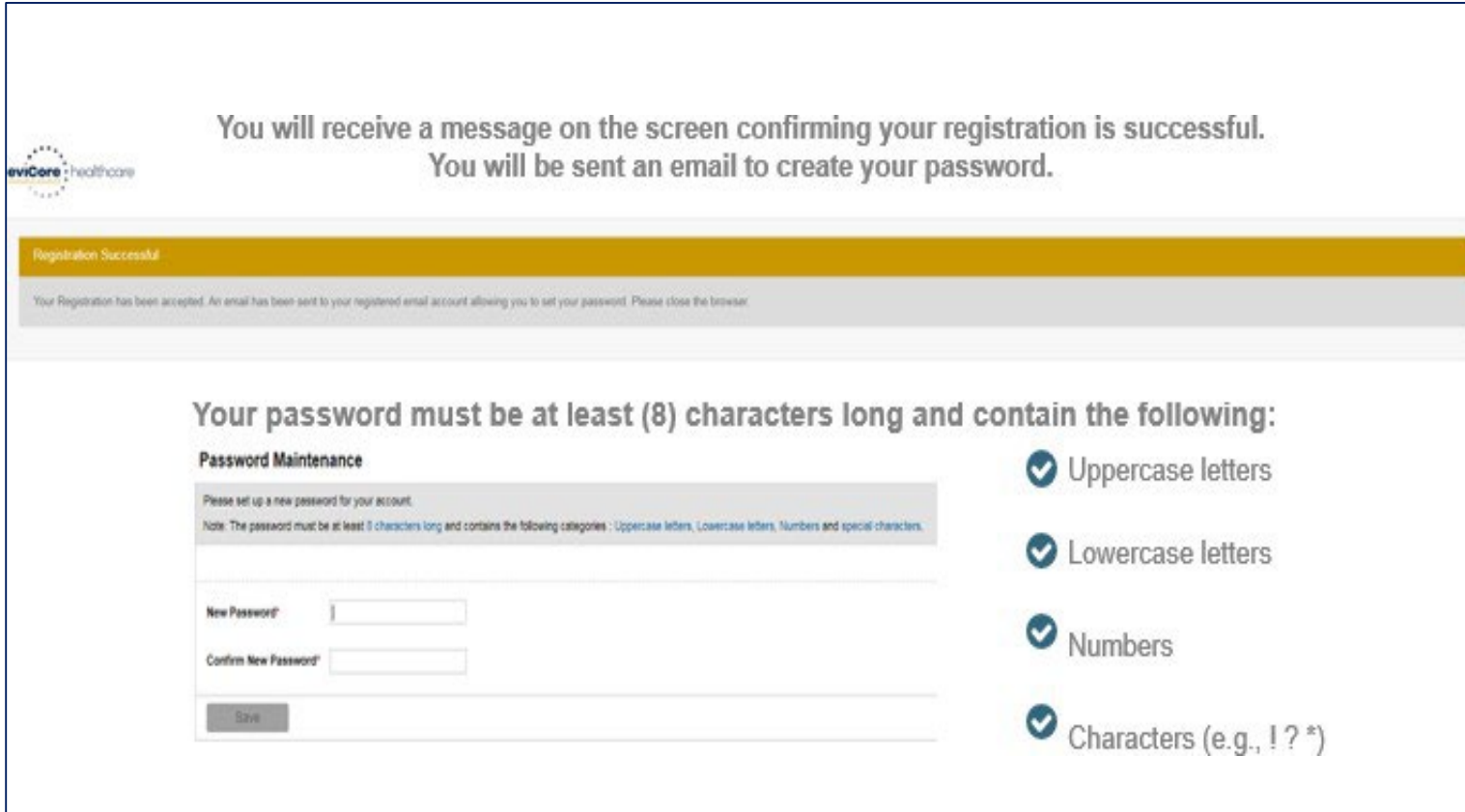
- the registration form.

A screenshot of the 'User Registration' form, showing the same fields as the previous image. A red circle highlights the top section of the form, which includes a warning: 'Please review the information before you submit this registration. An Email will be sent to your registered email address to set your password.' At the bottom right of the form, there are two buttons: 'Back' and 'Submit Registration'. A red arrow points to the 'Submit Registration' button.

Review information provided, and click

**“Submit Registration”**

# Create a password



**eVivoCore** healthcare

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:**

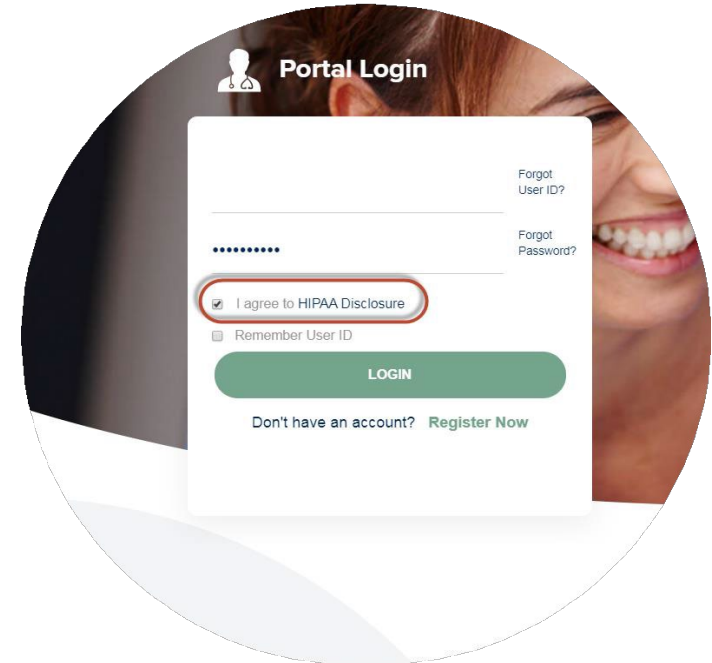
**Password Maintenance**

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\***

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



**Portal Login**

☒ I agree to HIPAA Disclosure

☐ Remember User ID

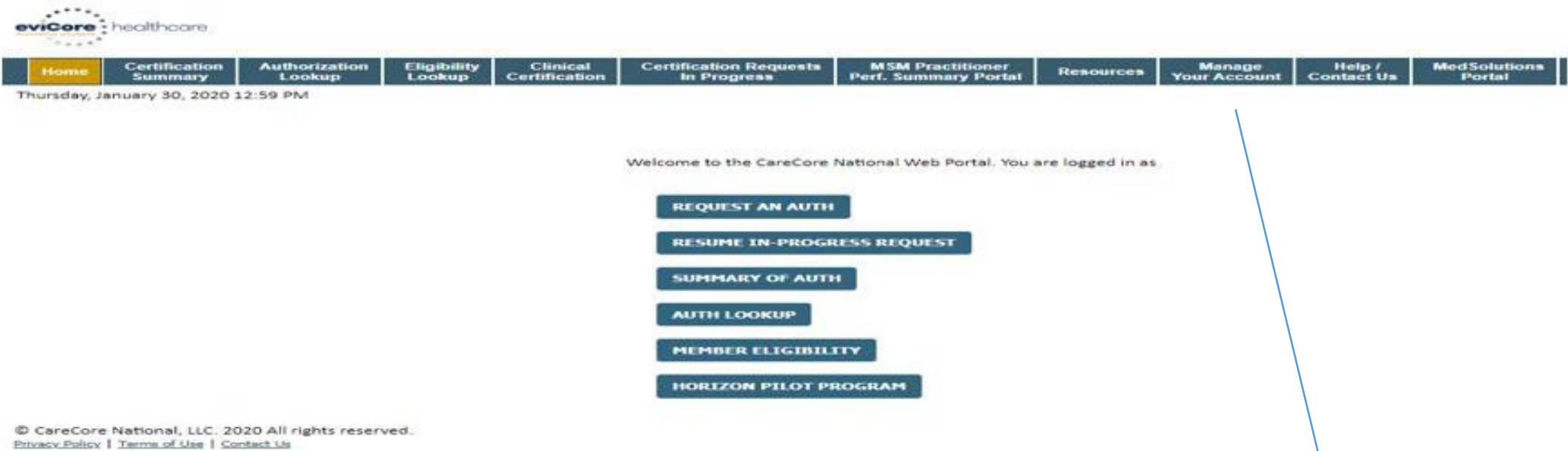
Don't have an account? [Register Now](#)

[Forgot User ID?](#)

[Forgot Password?](#)

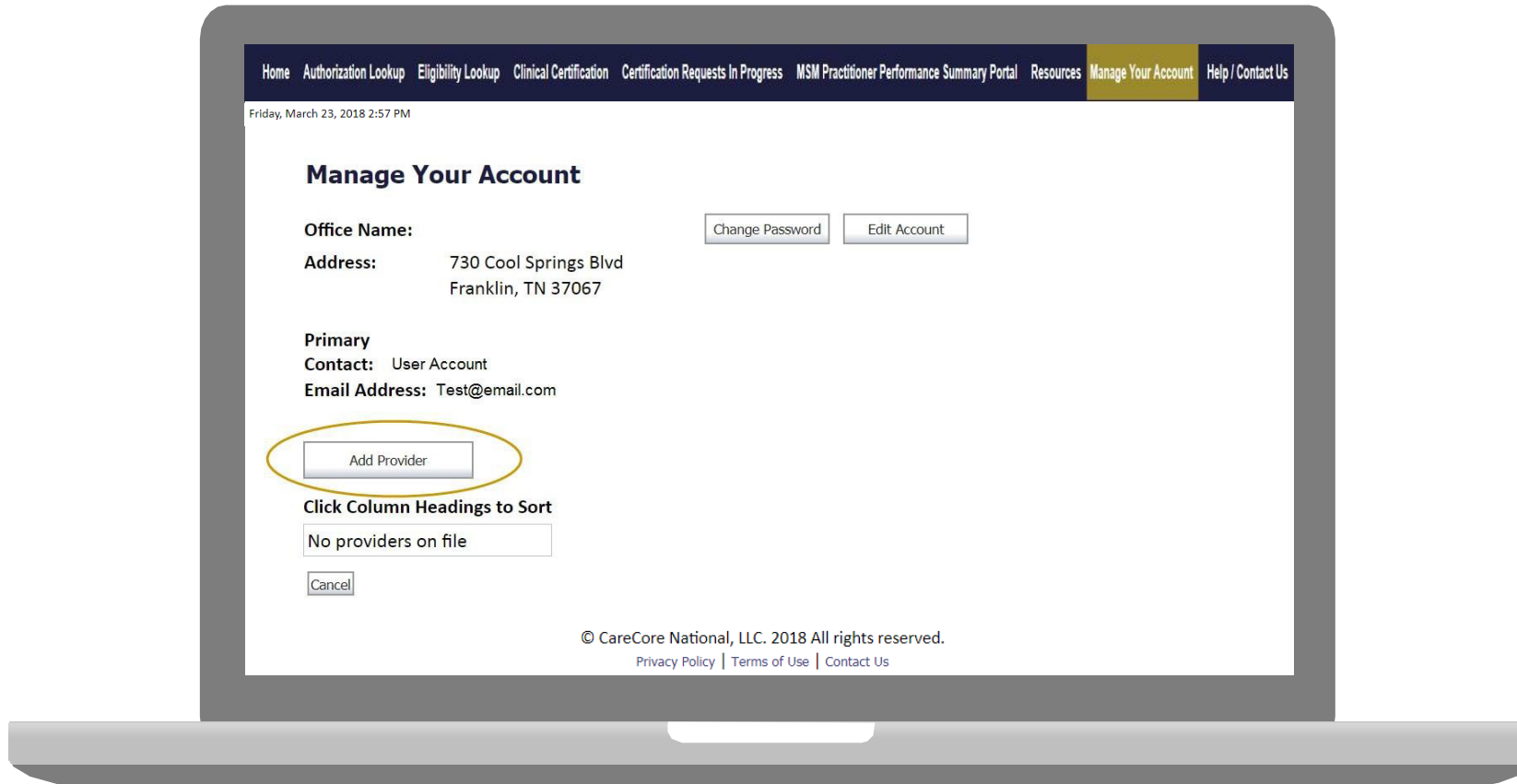
- To log-in to your account, enter your **User ID** and **Password**.
- Agree to the HIPAA Disclosure, and click “**Login**.”

# Welcome Screen



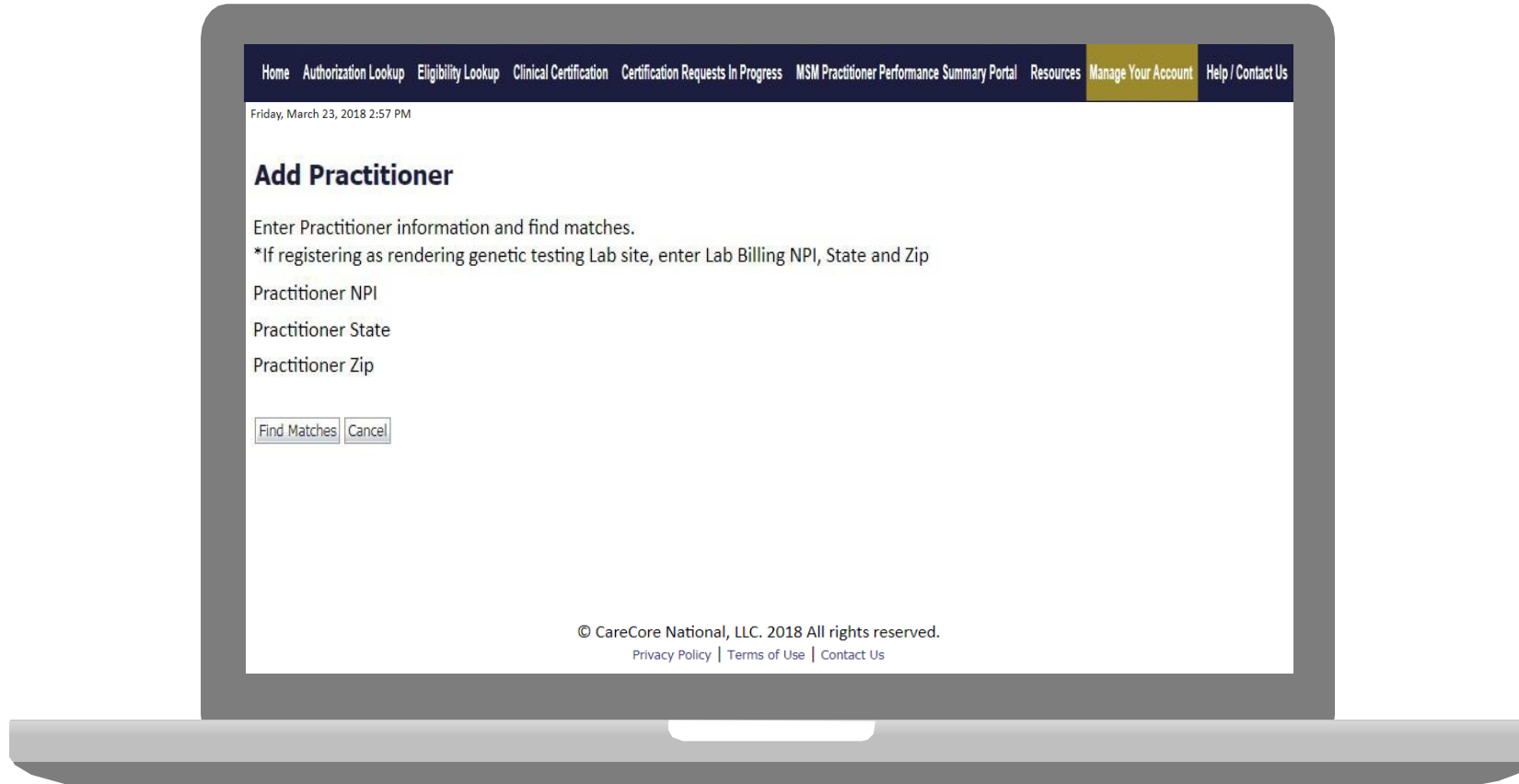
**Your provider will need to be added to your account prior to case submission.  
Click the “Manage Your Account” tab to add provider information.**

# Add Practitioners



Click the “**Add Provider**” button.

# Add Practitioners



The image shows a laptop screen displaying a web application interface for adding practitioners. The interface has a dark blue header with navigation links: Home, Authorization Lookup, Eligibility Lookup, Clinical Certification, Certification Requests In Progress, MSM Practitioner Performance Summary Portal, Resources, Manage Your Account (highlighted in yellow), and Help / Contact Us. Below the header, the date and time 'Friday, March 23, 2018 2:57 PM' are displayed. The main content area is titled 'Add Practitioner' and contains the following text: 'Enter Practitioner information and find matches.' and '\*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip'. Below this text are three input fields labeled 'Practitioner NPI', 'Practitioner State', and 'Practitioner Zip'. At the bottom of the form are two buttons: 'Find Matches' and 'Cancel'. The footer of the page contains the copyright notice '© CareCore National, LLC. 2018 All rights reserved.' and links for 'Privacy Policy', 'Terms of Use', and 'Contact Us'.

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

Friday, March 23, 2018 2:57 PM

## Add Practitioner

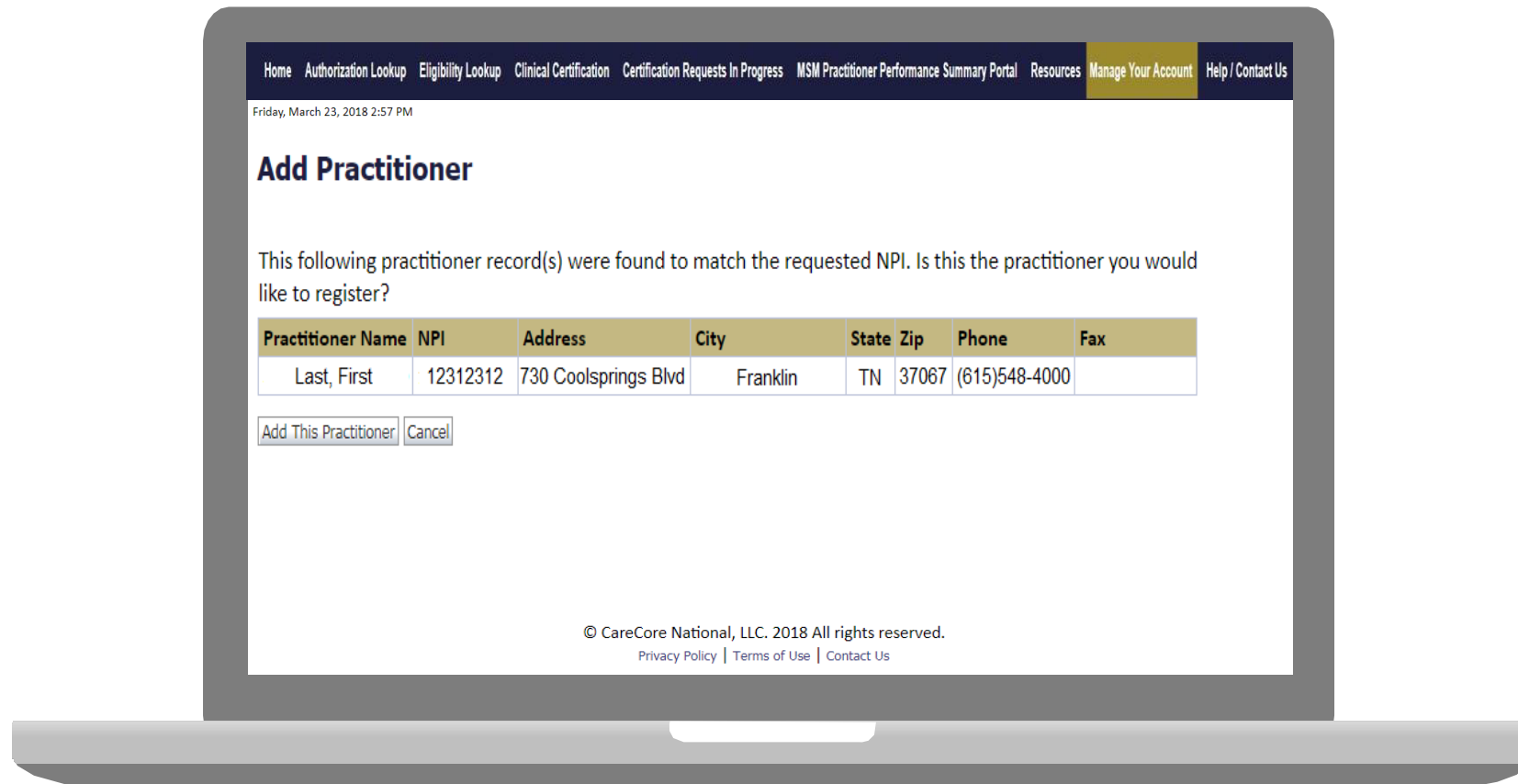
Enter Practitioner information and find matches.  
\*If registering as rendering genetic testing Lab site, enter Lab Billing NPI, State and Zip

Practitioner NPI  
Practitioner State  
Practitioner Zip

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[Privacy Policy](#) | [Terms of Use](#) | [Contact Us](#)

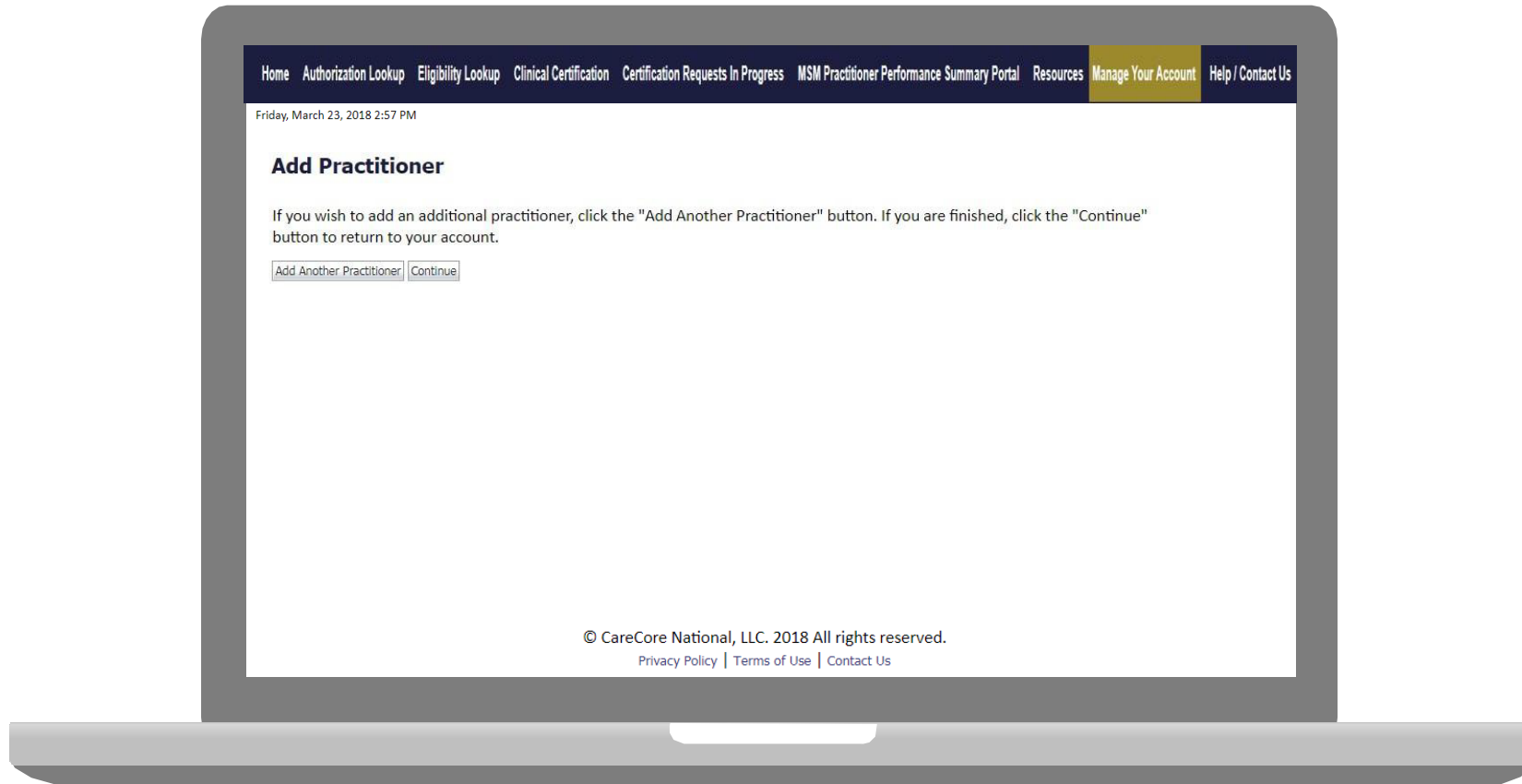
Enter the **Provider's NPI**, **State**, and **Zip Code** to search for the provider record to add to your account. You are able to add multiple Providers to your account.

# Adding Practitioners




Select the matching record based upon your search criteria

# Manage Your Account



- 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.

# •NPI- Global Look-up Feature



[Home](#) [Authorization Lookup](#) [MedSolutions Portal](#) [CareCore National Portal](#) [Unified Worklist](#) [Help / Contact Us](#)

Wednesday, December 20, 2023 12:06 PM [Log Off \(PCHODANKAR\)](#)

## Requesting Provider Information

Select the ordering provider for this authorization request.

Filter Last Name or NPI:

SEARCH

CLEAR SEARCH

	Provider
<div>SELECT</div>	1588621692 - ABATE, NICOLA
<div>SELECT</div>	1740262013 - ABAYA, BERNARDINO
<div>SELECT</div>	1750314217 - ABBARA, MAHER
<div>SELECT</div>	1659374890 - HOLZ, ALAN
<div>SELECT</div>	1639198880 - PEREIRA-RICO, ALVARO
<div>SELECT</div>	1013044304 - SPECIAL PEOPLE IN NORTHEAST, INC.

If the requested NPI is not listed above, search for it below.  
Please note, you will also be given the option to add this NPI to your account for future requests.


Search By NPI:

SEARCH

BACK

CONTINUE

[Click here for help](#)

 Confidential Information

Feedback

10% Complete

- Provider can search for existing NPI in highlighted green box. If Provider wants to search for any NPI which is not added in their Managed List, they can use red highlighted box. As shown to the left



# •Initiating A Case

Home

Certification Summary

Authorization Lookup

Eligibility Lookup

Clinical Certification

Certification Requests In Progress

MSM Practitioner Perf. Summary Portal

Resources

Manage Your Account

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

Requesting Provider Information

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:

SEARCH

CLEAR SEARCH

Provider

SELECT

SELECTED NAME, NPI, PHONE, ADDRESS

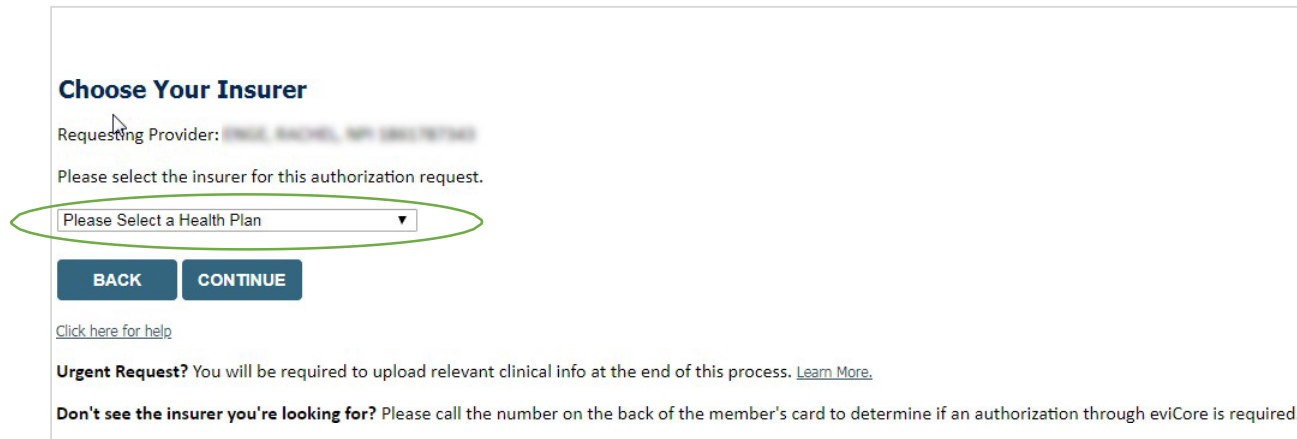
BACK

CONTINUE

- Choose **Clinical Certification** to begin a new request
- Select the appropriate program
- Select “Requesting Provider Information”

## •Select Health Plan

---



**Choose Your Insurer**

Requesting Provider: JENSE, RACHHEL, NPW 0000787840

Please select the insurer for this authorization request.

Please Select a Health Plan ▼

**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.

- Choose BCBSRI for the request
- Once the plan is chosen, select the provider address in the next drop-down box
- Select CONTINUE and on the next screen **Add your contact info**
- Provider name, fax and phone will pre-populate, you can **edit** as necessary

# Add Your Contact Information

---

Provider's Name:\*  [?]

Who to Contact:\*  [?]

Fax:\*  [?]

Phone:\*  [?]

Ext.:  [?]

Cell Phone:

Email:

☒ Receive notification of case status changes

BACK

CONTINUE

[Click here for help](#)

If the email address is provided, you will receive e-notifications

# Member & Request Information

Eligibility

## Patient Eligibility Lookup

Patient ID:\*

Date Of Birth:\*  MM/DD/YYYY

Patient Last Name Only:\*  [?]

ELIGIBILITY LOOKUP

BACK

•Eligibility Lookup

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, June 13, 2022 9:10 AM

Patient Eligibility Lookup

Patient ID:\*

Date Of Birth:\*MM/DD/YYYY

Patient Last Name Only:\*[?]

Do not include prefix. Enter numeric digits only.

LOOKUP AGAIN

Search Results

	Patient ID	Member Code	Name	DOB	Gender	Address
SELECT						

BACK

[Click here for help](#)

40% Complete

Provider and NPI

•Clinical Details

Requested Service + Diagnosis

This procedure has not been performed.

CHANGE

Radiology Procedures

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

73721

MRI LOWER EXTREMITY JOINT W/O

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 Radiology

LOOKUP

- Enter CPT and Diagnosis code

Public Information

# Site Selection



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal	
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Thursday, January 30, 2020 2:21 PM

[Log Off \(JENNIFERMASO\)](#)

## 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:

TIN:

Zip Code:

City:

Site Name:

Exact match

Starts with

LOOKUP SITE

There are no sites associated with referer.

BACK

[Click here for help](#)

Search and select the specific site where the treatment will be performed.

Public Information

## •Clinical Certification

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### 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.**

BACK

CONTINUE

- Verify that all information is entered and make any changes needed
- You will not have the opportunity to make changes after this point



## •Standard or Urgent Request?

- If your request is **urgent** select **No**
- When a request is submitted as Urgent, you will be required to upload relevant clinical information
- If the case is **standard** select **Yes**
- You can upload up to FIVE documents in .doc, .docx, or .pdf format – max 5MB document size
- Your case will only be considered Urgent if there is a successful upload

**Proceed to Clinical Information**

Is this case Routine/Standard?

**YES** **NO**

Home Certification Summary Authorization Lookup Eligibility Lookup **Clinical Certification** Certification Requests In Progress MSM Practice Perf. Summary F

Thursday, May 14, 2020 3:04 PM

**Proceed to Clinical Information**

**Urgency Indicator**

If the case you are submitting is found NOT to meet one of the two conditions below, your case will be processed as a standards/routine, non Urgent request. If you have clinical information and this request meets the criteria for urgent, please indicate below.

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case. If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

Please indicate if any of the following criteria are true regarding urgency of this request :

- ☐ A delay in care could seriously jeopardize the life or health of the patient or patient's ability to regain maximum function.
- ☐ A delay in care would subject the member to severe pain that cannot be adequately managed without the care or treatment requested in the prior authorization.
- ☐ None of the above

**Clinical Upload**

In order for eviCore to process this case as clinically urgent you must upload clinical documentation relevant to this case.

If you are unable to upload clinical documentation at this time contact eviCore to process this case as urgent.

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

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

**UPLOAD**

# Clinical Upload



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal
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Thursday, January 30, 2020 2:47 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):

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

UPLOAD

SKIP UPLOAD

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

# Clinical Certification Statement



Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress	MSM Practitioner Perf. Summary Portal	Resources	Manage Your Account	Help / Contact Us	MedSolutions Portal
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Thursday, January 30, 2020 2:48 PM

## 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.

SUBMIT CASE

[Click here for help](#)

Acknowledge the Clinical Certification statements, and hit “Submit Case.”

# Approval

## Clinical Certification

Your case has been Approved.

Provider Name:  
Provider Address:

Contact:  
Phone Number:  
Fax Number:

Patient Name:  
Insurance Carrier:

Patient ID:

Site Name:

Site ID:

Site Address:

Primary Diagnosis Code:

M25.562

Description: Pain in left knee

Secondary Diagnosis Code:

Description:

Date of Service: Not provided

CPT Code: 73721

Description: MRI LOWER EXTREMITY JOINT W/O

Authorization Number:

Review Date: 2:12:39 PM

Expiration Date:

Status: Your case has been Approved.

Print Continue

Once the clinical pathway questions are completed and if the answers have met the clinical criteria, an **approval** will be issued.

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

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# Additional Provider Portal Features

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# Duplication Feature

**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 (Radiation Therapy Management Program)
- ☐ Provider ( [REDACTED] )
- ☐ Program and Provider (Radiation Therapy Management Program and [REDACTED] )
- ☐ Program and Health Plan (Radiation Therapy Management Program and CIGNA)

**GO**

- Duplicate feature allows you to start a new request using same information
- Eliminates entering duplicate information
- Time saver!

# Patient Eligibility Lookup

---

Patient ID:\*

Date Of Birth:\*

MM/DD/YYYY

Patient Last Name Only:\*

[?]

ELIGIBILITY LOOKUP

BACK

[Click here for help](#)

# Authorization look up



## Authorization Lookup

### New Security Features Implemented

#### ☒ Search by Member Information

##### REQUIRED FIELDS

Healthplan:

Provider NPI:

Patient ID:

Patient Date of Birth:

MM/DD/YYYY

##### OPTIONAL FIELDS

Case Number:

or

Authorization Number:

#### ☒ Search by Authorization Number/ NPI

##### REQUIRED FIELDS

Provider NPI:

Auth/Case Number:

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.

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



# How to schedule a Peer to Peer Request

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- Log into your account at [www.evicore.com](http://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



# How to schedule a Peer to Peer Request

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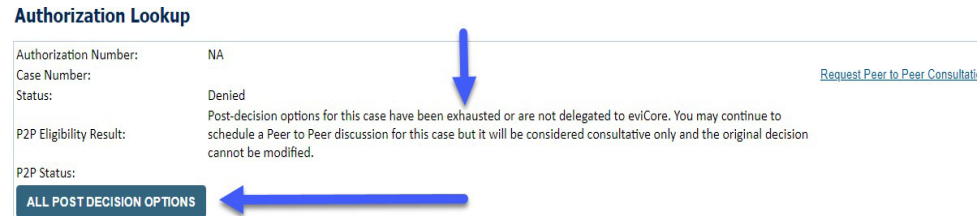
Pay attention to any messaging that displays. In some instances, a Peer to Peer conversation is allowed, but the case decision cannot be changed. When this happens, you can still request a Consultative Only Peer to Peer. You may also click on the “All Post Decision Options” button to learn what other 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

The screenshot shows the 'New P2P Request' form. At the top, there are four tabs: 'Case Info', 'Questions', 'Schedule', and 'Confirmation'. The 'Case Info' tab is active. The form contains two input fields: 'Case Reference Number' (with a red note 'Case information will auto-populate from prior lookup') and 'Member Date of Birth'. Below these is a '+ Add Another Case' button. At the bottom right is a 'Lookup Cases >' button. Two blue arrows are present: one pointing to the '+ Add Another Case' button and another pointing to the 'Lookup Cases >' button.

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.

The screenshot shows the confirmation screen for a 'New P2P Request'. It displays a 'Case Ref #' with a blue arrow pointing to it. Below this is a message: 'Reconsideration allowed through eviCore until 11/11/2020 12:00:00 AM.' To the right of this message are 'Remove' and 'P2P Eligible' links, with a blue arrow pointing to 'P2P Eligible'. The screen is divided into two sections: 'Member Information' and 'Case P2P Information'. The 'Member Information' section lists Name, DOB, State, Health Plan, and Member ID. The 'Case P2P Information' section lists Episode ID, P2P Valid Until (2020-11-11), Modality (MSK Spine Surgery), Level of Review (Reconsideration P2P), and System Name (ImageOne). A blue arrow points to the 'Level of Review' field. At the bottom is a 'Continue' button with a blue arrow pointing to it.

# 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: MSK Spine Surgery  
Level of Review: 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 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

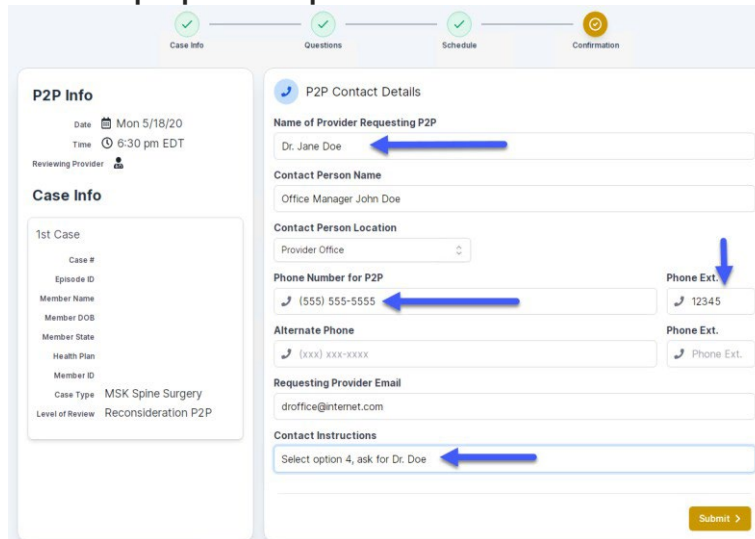
Mon 5/18/20	Tue 5/19/20	Wed 5/20/20	Thu 5/21/20	Fri 5/22/20	Sat 5/23/20	Sun 5/24/20
3:30 pm EDT 3:45 pm EDT 4:00 pm EDT 4:15 pm EDT Show more...	2:00 pm EDT 2:15 pm EDT 2:30 pm EDT 2:45 pm EDT Show more...	4:15 pm EDT 4:30 pm EDT 4:45 pm EDT 5:00 pm EDT Show more...	3:15 pm EDT 4:30 pm EDT 3:45 pm EDT 4:00 pm EDT Show more...	-	-	-

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.

# How to Schedule a Peer to Peer

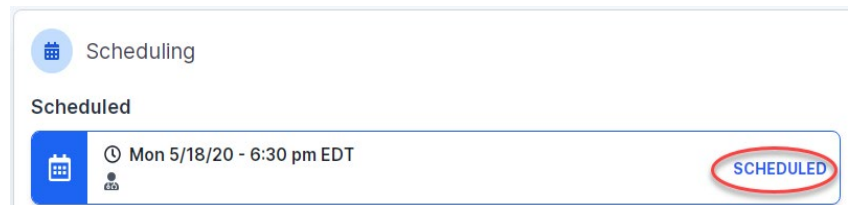
## Confirm Contact Details

- Contact Person Name and Email Address will auto-populate per



The screenshot shows a multi-step scheduling form. The 'P2P Contact Details' section includes fields for 'Name of Provider Requesting P2P' (filled with 'Dr. Jane Doe'), 'Contact Person Name' (filled with 'Office Manager John Doe'), 'Contact Person Location' (a dropdown menu), 'Phone Number for P2P' (filled with '(555) 555-5555'), 'Alternate Phone' (filled with '(xxx) xxx-xxxx'), 'Requesting Provider Email' (filled with 'droffice@internet.com'), and 'Contact Instructions' (filled with 'Select option 4, ask for Dr. Doe'). Blue arrows point to the 'Name of Provider Requesting P2P', 'Phone Number for P2P', and 'Contact Instructions' fields. A 'Submit' button is at the bottom right.

- 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.



The screenshot shows a 'Scheduling' summary page. It includes a 'Scheduled' section with a calendar icon, a clock icon, and the text 'Mon 5/18/20 - 6:30 pm EDT'. A red circle highlights the word 'SCHEDULED' in a blue box.

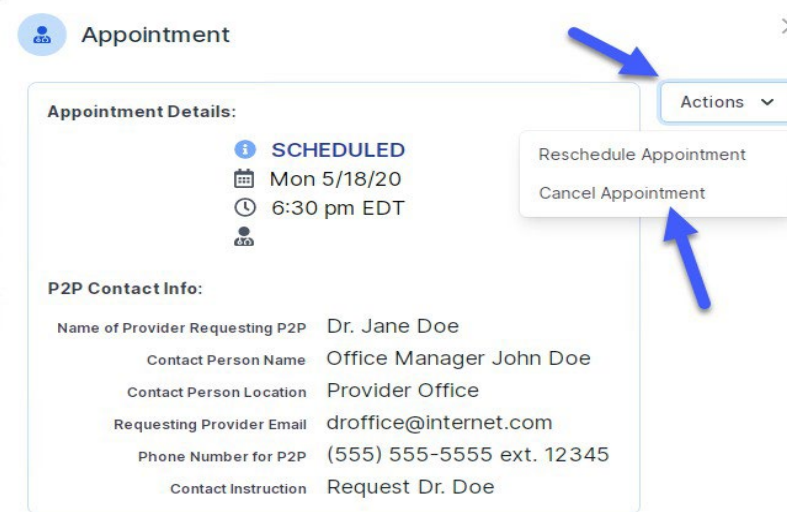
# Canceling or Rescheduling a Peer to Peer Appointment

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.



The screenshot shows a window titled "Appointment" with a close button (X) in the top right corner. The window is divided into two main sections. The top section, "Appointment Details:", includes an information icon, the status "SCHEDULED", the date "Mon 5/18/20", the time "6:30 pm EDT", and a person icon. The bottom section, "P2P Contact Info:", contains a table with the following data:

Name of Provider Requesting P2P	Dr. Jane Doe
Contact Person Name	Office Manager John Doe
Contact Person Location	Provider Office
Requesting Provider Email	droffice@internet.com
Phone Number for P2P	(555) 555-5555 ext. 12345
Contact Instruction	Request Dr. Doe

On the right side of the window, there is an "Actions" drop-down menu. A blue arrow points to this menu, and another blue arrow points to the "Cancel Appointment" option in the expanded list, which also includes "Reschedule Appointment".

Close browser once done

# Provider Newsletter

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## 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](https://eviCore.com)
- Scroll down and add a valid email to subscribe
- You will begin receiving email provider newsletters with updates





# Provider Resource Review Forums

The eviCore website contains multiple tools and resources to assist providers and their staff during the prior authorization process.

We invite you to attend a **Provider Prior Authorization Online Portal Tips and Tools** session, to navigate [www.eviCore.com](http://www.eviCore.com) and understand all the resources available on the Provider's Hub. Learn how to access:

- eviCore's evidence-based clinical guidelines
- Clinical worksheets
- Check-status function of existing prior authorization
- Search for contact information
- Podcasts & Insights
- Training resources

## How to register for a Provider Resource Review Forum?

You can find a list of scheduled **Provider Prior Authorization Online Portal Tips and Tools** session on [www.eviCore.com](http://www.eviCore.com) → Provider's Hub → Scroll down to eviCore Provider Orientation Session Registrations → Upcoming





# For Eligibility and Benefits:

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For benefits and eligibility questions, please contact the Physician & Provider Service Center at BCBSRI: 401-274-4848 or 1-800-230-9050 for out-of-state callers or visit [bcbsri.com](https://bcbsri.com) on the Provider Portal

# Provider Resources

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**Portal Support Team** - If you should encounter an issue when initiating a request on the website you may contact the eviCore Portal Support Team for assistance.

Contact Info: Phone: 800-646-0418 Option 2; Email: [portal.support@evicore.com](mailto:portal.support@evicore.com)

**Client & Provider Services Team** - Client & Provider Services is an escalation team consisting of specially trained agents that are responsible for BCBSRI inquiries. They are an eviCore first line resource available to research and resolve concerns that may occur.

Contact Info: Phone: 800-646-0418 Option 4; Email: [clientservices@evicore.com](mailto:clientservices@evicore.com)

Patricia Allen, Regional Provider Engagement Manager- [pallen@evicore.com](mailto:pallen@evicore.com) 800-918- 8924 ex.24176

**BCBSRI Resource Page** – The resource page contains educational materials, such as a list of designated CPT Codes, Frequently Asked Questions, Announcement Letter with training schedule and a copy of this presentation.

[Blue Cross and Blue Shield of Rhode Island Implementation Resources | eviCore healthcare](#)

# Resource Links

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- Worksheets: <https://www.evicore.com/provider/online-forms>
- Clinical Guidelines: <https://www.evicore.com/provider/clinical-guidelines>
- Request a Clinical Consultation: <https://www.evicore.com>

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# Thank you

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