

Evolent Peer-to-Peer Process

What to expect when calling in for a peer-to-peer discussion:

- A peer-to-peer discussion may be initiated at any time during the authorization process by calling 1-866-236-8717 *
- A peer-to-peer discussion may not be necessary if the requested clinical documentation is sent prior to contacting Evolent (formerly National Imaging Associates, Inc.)
- A peer-to-peer discussion may be initiated by the office staff (non-clinical), but the case discussion must be conducted by a licensed clinician from the provider's office
- Ad hoc peer-to-peer discussions are available for the Advanced Imaging and Cardiac programs. For these programs, plan to call a few minutes prior to the licensed clinician's availability to provide necessary member and case information
 - This information will need to be provided before the call is transferred to an appropriate clinical reviewer that is specific to the case and modality
- Peer-to-peer discussions must be scheduled for Spine Care program. At least two convenient callback times will need to be provided to accommodate the licensed clinician's schedule
- The case will then be discussed including any additional information that may be necessary for the case to meet medical necessity *
- Verbal clarification of clinical information from the medical records that were submitted may be discussed during the peer-to-peer discussion. Examples include clarification of conflicting information in the notes or typographical errors
- Any new information necessary to approve the request must be submitted in writing by uploading to RadMD.com or faxing to 1-800-784-6864 before a new determination can be made *
- If the case cannot be approved following the peer-to-peer discussion or with additional information, then the ordering/rendering provider is asked to follow the appeal instructions provided within the denial notification

If you would like to provide feedback regarding a peer-to-peer discussion, please contact your Evolent-dedicated Provider Relations manager.

* Re-open (Medicare), Re-review, (Medicaid) or Reconsideration (Exchange) is available for Presbyterian. If the re-open, re-review or reconsideration time frame has expired, then the discussion will be for consultation purposes only. Providers must then follow the appeal instructions in the denial notification.

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