







## **Evolent's 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 prior-authorization process by calling the Evolent (formerly National Imaging Associates, Inc.) as follows: Sunshine Health: 1-866-214-2569; Children's Medical Services Health Plan: 1-866-249-1586; WellCare: 1-800-424-5388
- **Medicare plans:** Effective 8/5/2024, peer-to-peer discussions must be performed before a final determination has been made on the request.
- Medicare re-opens are only allowed if the request complies with the CMS definition of a re-open. Providers will continue to have the option to submit an appeal utilizing the health plan's process.
- A peer-to-peer discussion may not be necessary if the requested clinical documentation is sent prior to contacting Evolent.
- A peer-to-peer 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.
- Plan to call a few minutes prior to licensed clinician's availability to provide necessary case information.
- Identifying member information will need to be provided before the call is transferred to an appropriate clinical reviewer that is specific to the case and modality (for RBM/Cardiac/IPM).
- If the office needs to schedule the peer-to-peer discussion, at least two convenient callback times will need to be provided to accommodate the licensed clinician's schedule (for Physical Medicine/MSK).
- 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. 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 <u>RadMD.com</u> or faxing to 1-800-784-6864 before a new determination can be made. \*

 If the case cannot be approved at the time of the peer-to-peer; the ordering/rendering provider is asked to follow the appeal instructions provided within the denial notification.

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

\* This discussion may be for consultation purposes only if the re-review/ reconsideration/ has expired or the case has a final determination and re-review/reconsideration/ is not available. If re-review/reconsideration/ is not available, providers must follow appeal instructions in the denial notification. Please confirm with the health plan if re-review/reconsideration/ is available.