



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 1-888-879-5922 for Medicaid and 1-800-642-2798 for Medicare.
- **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 (formerly National Imaging Associates, Inc.).
- 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).
- For Medicaid, the case will then be discussed, including any additional information that may be necessary for the case to meet medical necessity. For Medicare, this discussion may be for consultation purposes only if the re-review/ reconsideration/re-open timeframe has expired or case has a final determination and re-review/reconsideration/re-open is not available.
- 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.

- For Medicaid, any new information necessary to approve the request must be submitted in writing by uploading on our online portal <u>RadMD.com</u> or faxing to 1-800-784-6864 before a new determination can be made. For Medicare, reopen is not available.
- 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.

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