

Service Area	South Carolina
Health Plan	Blue Cross Blue Shield of South Carolina
Lines of Business (LOB)	<ul style="list-style-type: none"> • Commercial • Exchange
Evolut Musculoskeletal Surgery (MSK) Prior Authorization Scope	<p>Services:</p> <ul style="list-style-type: none"> • Lumbar and cervical spine surgery • Hip, knee and shoulder surgery <p>Places of Service:</p> <p>19 - Outpatient off-campus 21 - Inpatient hospital (Elective professional services only) 22 - Outpatient on-campus 24 - Ambulatory surgical center</p> <p>Authorization Required for: All planned/elective services listed, ordered by all provider specialties performed in the covered places of service.</p> <p><i>Evolut is delegated approvals and adverse determinations (denials).</i></p>
Evolut Interventional Pain Management Prior Authorization Scope	<p>Services:</p> <ul style="list-style-type: none"> • Spinal Epidural Injections • Paravertebral Facet Joint Injections or Blocks • Paravertebral Facet Joint Denervation (Radiofrequency (RF) Neurolysis) <p>A separate prior authorization number is required for each procedure ordered. A series of injections will not be approved.</p> <p>Places of Service:</p> <p>11 – Provider Office 19 - Outpatient off-campus 24 - Ambulatory surgical center</p> <p><i>Evolut is delegated approvals and adverse determinations (denials).</i></p>
Authorization Process and Provider Support	<p>Ordering provider’s office must submit prior authorization requests to Evolut.</p> <ul style="list-style-type: none"> • Via the Evolut RadMD provider portal at evolent.com/provider-portal • Telephonic intake, physician discussions and authorization status inquiries: <ul style="list-style-type: none"> • Fully Insured and State Health Plan: 1-866-500-7664 • Publix members: 1-888-642-4810

	<ul style="list-style-type: none"> Contact information for the Evolent Provider Engagement Team can be located within RADMD in the BCBS of South Carolina section within Provider Resources. <p style="text-align: center;">RadMD Support RadMDSupport@Evolent.com 1.800.327.0641</p>
<p style="text-align: center;">Evolent Turnaround Time (TAT)</p>	<p>Exchange and Commercial:</p> <ul style="list-style-type: none"> Standard Request: 2 business days Expedited Request: 2 business days
<p style="text-align: center;">Expedited Requests</p>	<p>The Evolent website RadMD.com cannot be used for medically urgent or expedited prior authorization requests during business hours. Expedited requests must be submitted by calling the Evolent call center.</p>
<p style="text-align: center;">Retrospective Authorizations</p>	<p>Retrospective requests are in scope for Evolent within 3 business days from the date of service.</p>
<p style="text-align: center;">Post Adverse Determination</p>	<p>Once a denial determination has been made, if the office has new or additional information to provide, a reconsideration can be initiated by uploading via RadMD or faxing (using the case specific fax cover sheet) additional clinical information to support the request. A reconsideration must be initiated within 180 calendar days from the date of denial and prior to submitting a formal appeal through the health plan.</p>
<p style="text-align: center;">Authorization Validity Period</p>	<p>Outpatient authorizations are valid for 30 days from the date of service. Inpatient authorizations are valid for 3 calendar days from date of service.</p>
<p style="text-align: center;">Claims and Appeals</p>	<ul style="list-style-type: none"> Providers should continue to submit their claims to BCBS of South Carolina including Evolent’s authorization number. Evolent is not delegated appeals. Appeals should be initiated through BCBS of South Carolina.
<p style="text-align: center;">Evolent Resources</p>	<p>Resources available under the BCBS of South Carolina health plan page in Evolent’s RadMD portal:</p> <ul style="list-style-type: none"> Clinical Guidelines Scope of Service Tip Sheets and Checklists Utilization Review Matrix

Exclusions

- All places of service not specifically listed in defined scope
- Claims management/provider contracting
- CPT codes, places of treatment, and lines of business outside defined scope
- Emergent/non-elective services