

# INTEGRATED ONCOLOGY MANAGEMENT PROGRAM



## Provider quick reference guide

Cigna works with eviCore healthcare to administer a precertification program for Cigna customers using oncology drugs on an outpatient basis during a cancer treatment program. The following information outlines the highlights of this relationship.

### eviCore's role in the Integrated Oncology Management Program

#### Delegated services

eviCore is delegated to provide utilization management, including precertification as follows:

- ▶ Beginning February 20, 2017, providers will be required to request precertification from eviCore for medical oncology medications, which include primary chemotherapy and supportive drugs.
- ▶ Beginning July 1, 2017, providers will be required to request precertification from eviCore for pharmacy oncology drugs.

#### Precertification

During precertification, eviCore will review the entire treatment plan – rather than each medication individually – for consistency with National Comprehensive Cancer Network (NCCN)<sup>®</sup> practice guidelines in oncology for categories 1, 2A, or 2B recommendations, or is an approved drug or biologic indication by the Food and Drug Administration (FDA).

Our precertification program helps ensure that customers receive coverage for cost-effective care based on established evidence-based guidelines. Precertification is required for:

- ▶ Cigna customers receiving these services in the outpatient setting and whose Cigna ID card identifies that precertification is required for outpatient procedures.

For these customers, eviCore performs precertification for oncology management services as part of this program. For a list of the affected medications included in this program (and that require precertification to be requested through eviCore), please go to our dedicated site: <https://www.evicore.com/Cigna/Pages/MedicalOncology.aspx>.

#### Important notes

- ▶ It is the responsibility of the performing facility or provider to confirm precertification has been requested and approved prior to service(s) being performed.
- ▶ Decisions for non-urgent precertification requests are typically made within two business days of receipt of all necessary clinical information. All decisions are made within five business days.\*
- ▶ If additional information is needed from the provider, eviCore will fax the request to the provider at the number provided by the provider.

#### Precertification for urgent services

- ▶ When oncology management services are required in less than 48 hours due to a medically urgent condition, the ordering provider must call eviCore for precertification approval.
- ▶ Urgent treatment requests can only be made by phone.\*\*
- ▶ The provider must clearly indicate that the treatment is for medically urgent care.
- ▶ Once all necessary clinical information is received, eviCore will make a coverage decision within 24 hours.

Together, all the way.<sup>®</sup>



## Value to providers and customers

- › eviCore reviews the entire treatment plan – rather than each medication individually.
- › eviCore ensures the entire treatment plan is consistent with National Comprehensive Cancer Network (NCCN)<sup>®</sup> practice guidelines in oncology, for categories 1, 2A, or 2B recommendation or is an approved drug or biologic indication by the Food and Drug Administration (FDA).
- › eviCore applies evidence-based clinical guidelines to help determine coverage and to confirm the physician in delivering medically necessary care that is safe and effective.
- › eviCore’s case determination software platform supports providers by conducting an individualized evidence-based care analysis tailored to the customer’s condition.
- › eviCore’s unique education approach includes the only “predictive intelligence” technology in the industry, which provides nearly instant precertification approval in areas where a physician consistently practices within evidence-based guidelines.
- › Providers have access to licensed, board-certified clinicians to assist in helping providers to consider oncology management options. These clinicians have same specialty expertise as the treating physician.

## Contact information

### How to request precertification

Providers can request precertification through a dedicated website or telephone number

- › Website: Available 24 hours a day and the quickest way to create prior authorizations and check the status of existing cases <https://www.evicore.com/pages/providerlogin.aspx>.
- › Phone: 1.866.668.9250 (7:00 am–7:00 pm EST)

To request precertification for urgent services, providers must call eviCore at 1.866.668.9250.

## Dedicated website support

Contact the eviCore website support team by phone or email:

- › Phone: 1.800.575.4594 (8:00 am–7:00 pm EST)
- › Email: [portal.support@evicore.com](mailto:portal.support@evicore.com)

## Clinical support

eviCore welcomes requests for clinical discussions from rendering providers. One of eviCore’s physicians can assist treating providers in considering all oncology management options. To request a clinical discussion, call eviCore at 1.866.668.9250.

## Oncology Management guidelines

Oncology Management coverage guidelines are available at <https://www.evicore.com/solution/pages/medicaloncology.aspx>.

## Submitting claims

All providers should submit claims directly to Cigna at the address on the back of the patient’s Cigna ID card.

## Submitting clinical appeals

Providers should refer to the denial notification for instructions on where to submit appeals.

## Tools and resources

Providers can visit our dedicated program website at <https://www.evicore.com/Cigna/Pages/MedicalOncology.aspx> for helpful information on the following topics:

- › Utilization management and precertification
- › Clinical quick reference guides
- › Frequently asked questions



\* Obtaining an medical necessity approval from eviCore isn’t a guarantee that Cigna will pay for services rendered. The customer must be enrolled in the plan and eligible for benefits on the date you requested the service. Please see plan documents for details about coverage.

\*\* Requests received online will be treated as standard cases.