Provider Memorandum

eviCore New Prior Authorization Requirements Effective January 1, 2020

Molina Healthcare of Illinois (Molina) is contracted with eviCore to provide outpatient utilization management services. Effective January 1, 2020 eviCore began managing prior authorizations for:

- Imaging and Special Tests
  - Advanced Imaging (MRI, CT, PET, non-OB Ultrasounds)
  - Cardiac Imaging
- Radiation Therapy
- Sleep Covered Services and Related Equipment
- Molecular and Genomic Testing

Based on recent feedback, we would like to share the following frequently asked questions (FAQs) with our provider network.

Do Obstetric (OB) ultrasounds require prior authorization?
No, OB ultrasounds do not require prior authorization. Please refer to the Prior Authorization Codification List located on under the Forms tab on www.MolinaHealthcare.com for a full list of codes which require prior authorization. At this time, all non-OB ultrasounds do require prior authorization.

Do I have to submit prior authorization request if Molina is a secondary payer?
No. Molina only requires prior authorization for services if we are the primary payer.

Where do I send my prior authorization requests for: imaging and special tests, radiation therapy, sleep covered services and related equipment, and molecular and genomic testing?
These services are authorized by eviCore, and prior authorization requests must be directed to eviCore. Requests can be submitted via:

- eviCore's Portal https://www.evicore.com/resources/healthplan/molina/illinois
- eviCore dedicated Molina Call Center: (888) 333-8144
- eviCore will accept faxes for imaging and cardiology services only. Prior authorizations can be faxed to (800) 540-2406

What happens if I request prior authorization for a non-covered service?
eviCore will review all prior authorization requests for medical necessity regardless of whether or not the service is a covered benefit. To verify if a service is a covered benefit please consult member benefit documents located on the Molina Member website and the Molina Portal; or refer to the applicable regulatory agency for benefit coverage and non-covered codes.

Important Reminder: Authorization is not a guarantee of payment for services. Payment is based on member's eligibility, benefit limitation/exclusions, evidence of medical necessity, and other applicable standards during the claim review.

Questions
Providers who have questions, concerns, or would like additional information about eviCore may contact eviCore Client & Provider Services at (800) 646-0418 or go to www.evicore.com.

Providers can also or contact their provider network managers or email the Provider Network Management Department at MHILProviderNetworkManagement@MolinaHealthcare.com. Providers who need help identifying their assigned provider network manager may visit Molina's Service Area page at www.MolinaHealthcare.com/providers/il/medicaid/contacts/Pages/servicearea.aspx.

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