



INFORMATION REQUIRED BY EVICORE FOR PROVIDER AUTHORIZATION COMPLETION

- Member Name
- Member Identification Number
- Member Date of Birth
- CPT Code for Service
- Diagnosis Code for Service
- Referring Provider's Full Name
- Referring Provider's NPI Number
- Referring Provider's Phone Number
- Referring Provider's Fax Number
- Referred to Provider Name (Provider, Site, or Facility)
- Referred to Provider NPI (Provider, Site, or Facility)
- Answer ALL questions in the Clinical Pathways correctly and provide ALL additional clinical information required.

Remember providing ALL correct clinical information and notes will provide eviCore with the information they need to make a correct determination. Incomplete submissions have the potential to cause delays up to 14 days.

*eviCore allows 7 calendar days from the date of service to update CPT codes after obtaining preauthorization. These changes must be made by phone with eviCore at (855) 252-1117.

EVICORE CUSTOMER SERVICE – (800) 918-8924