

## Outpatient Rehabilitation

### Tips for requesting reviews through eviCore healthcare

- Providers make notifications for outpatient rehabilitation services through eviCore for members. A notification is the initial authorization request submitted to eviCore to inform Providence Health Plan that a member is starting care.
  - Generally, the first 12 visits will be automatically approved. Any requests beyond 12 visits will be subject to medical necessity review
- For additional information, including eviCore’s clinical guidelines and a complete list of services requiring medical necessity review, please visit:  
<https://www.evicore.com/resources/healthplan/providence-health-plan>.

### Outpatient rehabilitation codes

Check our code list (link to eviCore code list) to view outpatient rehabilitation codes. (Once in the list, use CTRL+F for PCs or Command+F for Macs, and type in the code. If no results are found, the code doesn't require review. We review non-specific codes when the claim is submitted.)

#### NEW 6.1.2024

**Special Announcement:** We are pleased to announce that Providence Health Plan, being true to ourselves of “Know me, Care for me, Ease my way”, has made the decision to ease the way for our members aged 18 and younger, by removing select pediatric diagnosis codes from requiring prior authorization review through eviCore for outpatient rehabilitation.

[Please see Excluded Pediatric Diagnosis Codes for a complete list.](#)

### More information

To create an account and/or initiate an authorization for dates of service on or after June 1, 2019

- The eviCore Provider Portal is the quickest, most efficient way to submit a request. Log on at [www.evicore.com/pages/ProviderLogin.aspx](http://www.evicore.com/pages/ProviderLogin.aspx)
- Call (866) 803-8052 from 7 a.m. to 7 p.m., weekdays. (Out-of-network providers: submit requests by calling this number.)

Visit eviCore healthcare for:

- Orientation/training sessions
- Quick reference guides
- Clinical guidelines
- Tutorials
- FAQ
- CPT code list
- Medical necessity review authorization request (available through the clinical certification online tool)

**Important Note!** Washington State RCW 48.43.016 changes what providers need to do for outpatient rehabilitation service.

- We’ll allow an initial evaluation and management visit, and up to 6 subsequent visits without a

treatment plan on file.

- After the initial evaluation and management visit and 6 consecutive visits, providers must submit a request for medical necessity review to eviCore healthcare for any on-going treatment.

eviCore healthcare (formerly known as CareCore National) is an independent company managing outpatient rehabilitation services for Providence Health Plan providers.