



July 1, 2024

<Recipient Name>
<Recipient Company>
<Company Address>
<Company Address>

Dear Provider,

In keeping with our commitment of promoting continuous quality improvement for services provided to Partners Health Management members, Partners Health Management has entered into an agreement with Evolent (formerly National Imaging Associates, Inc.), to implement a Medical Specialty Solutions program. This program includes prior authorization of non-emergent, advanced, outpatient imaging and cardiac services for Partners Health Management members. The decision to implement this program is consistent with industry-wide efforts to ensure clinically appropriate quality of care and to manage the increasing utilization of these services.

Under terms of the agreement between Partners Health Management and Evolent, Partners Health Management will oversee the Evolent program and continue to be responsible for claims adjudication. Evolent will manage the Medical Specialty Solutions services listed below through Partners Health Management existing contractual relationships.

Based on a July 1, 2024, implementation, this correspondence serves as notice under your Provider Agreement of changes to the program. Evolent will be available to begin providing prior authorizations for those services starting on Sept 23, 2024 for dates of service Oct. 1, 2024 and after.

North Carolina Medicaid implemented several policy flexibilities at the launch of Tailored Plans to ease the administrative burden on providers and to ensure members receive uninterrupted care during the transition to Partners.

To ensure continuous care for members during the transition, Partners is extending certain policy flexibilities originally scheduled to expire Sept. 30, 2024. The transition period for these flexibilities will continue until Jan. 31, 2025.

In alignment with NC Medicaid, between July 1, 2024, and Jan. 31, 2025, Partners will cover services if a prior authorization request meets medical necessity criteria in the following situations:

1. A provider fails to submit a prior authorization prior to the service being provided and submits prior authorization after the date of service; or
2. A provider submits for retroactive prior authorization.

Additionally, Partners will initiate a no prior authorization required period for physical and behavioral health services to ensure Providers with contracts will be able to file claims for dates of service from July 1, 2024 through Jan. 31, 2025 without authorization. The No Prior Auth period does not apply to concurrent reviews for inpatient admission. Those should still occur during this time.

Prior authorization will be required for the following outpatient procedures beginning Feb. 1, 2025:

- CT/CTA
- MRI/MRA
- PET Scan
- MUGA Scan
- Nuclear Stress Test
- Echocardiography

Please note the following:

- The ordering physician is responsible for obtaining authorization prior to rendering the above-listed services.
- Providers rendering the services listed above should verify that the necessary authorization has been obtained by visiting www.RadMD.com, or by calling Evolent at 1-800-327-0639. Failure to do so may result in nonpayment of your claim.
- Emergency department, observation and inpatient procedures do not require authorization.

We appreciate your support and look forward to working with you to ensure that Partners Health Management members receive quality, clinically appropriate care.

We will provide additional information as we get closer to the implementation date. If you have questions, please contact Partners Health Management Provider Services department at 1-877-398-4145.

Sincerely,

[Name]

[Title]

