



FROM | magnolia health.



SERVICE AREA	Mississippi		
LINES OF BUSINESS (LOB)	<u>Effective December 1, 2021</u> Ambetter from Magnolia Health (Exchange) <u>Effective January 1, 2025</u> ICHRA Membership Members of all ages		
EVOLENT ONCOLOGY MEDICATION SCOPE	SPECIALTIES	COVERAGE	AUTHORIZATION
	<ul style="list-style-type: none"> • Gynecologic Oncology • Hematology • Medical Oncology • Neuro-Oncology • Pediatric Oncology • Radiation Oncology • Surgical Oncology • Urology <p style="text-align: center;">(Medications only)</p>	<p>Place of Treatment:</p> <ul style="list-style-type: none"> 11-Provider office 19-Outpatient off-campus 22-Outpatient on-campus 24-Ambulatory <p>Cancer Diagnosis = C00-D09, D37-D44, E34.0,</p> <p>Hematology Diagnosis = D45-D49, D61.81, D61.2, D63.0, D63.8, D64.2-D64.3, D64.81, D64.89, D64.9, D68.59, D69.41, D69.59, D69.6, D69.8, D69.9, D70, D72.8, D72.9, D73.81, D73.9, D75.1, D75.81, D75.82</p> <p>N&V = R11</p>	<p>Authorization required for:</p> <p>Infused, injectable and oral* chemotherapy, hormonal therapeutic treatment, supportive agents, and symptom management medications.</p> <p><i>*Pharmacy benefit orals and office administered (medical benefit) infused/injectable agents of the same medication type (i.e., both cancer agents) must be submitted via one combined request.</i></p>
EVOLENT	SPECIALTIES	COVERAGE	AUTHORIZATION



FROM | magnolia health.



<p>RADIATION ONCOLOGY SCOPE</p>	<ul style="list-style-type: none"> Radiation Oncology 		<p>Place of Treatment:</p> <p>11-Provider office 19-Outpatient off-campus 22-Outpatient on-campus 24-Ambulatory</p> <p>Cancer Diagnosis = C00-D09, D37-D44, E34.0</p> <p>Hematology Diagnosis = D45-D49, D61.81, D61.2, D63.0, D63.8, D64.2-D64.3, D64.81, D64.89, D64.9, D68.59, D69.41, D69.59, D69.6, D69.8, D69.9, D70, D72.8, D72.9, D73.81, D73.9, D75.1, D75.81, D75.82</p> <p>N&V = R11</p>		<p>Authorization required for:</p> <ul style="list-style-type: none"> Brachytherapy Conformal 3D 2D, Electrons IMRT (Intensity-modulated radiation therapy) SBRT (Stereotactic body radiation therapy) IGRT (Image-guided radiation therapy) SRS (Stereotactic radiosurgery) 	
<p>AUTHORIZATION PROCESS</p>	<p>Ordering provider's office must submit treatment requests to Evolent for prior authorization.</p> <ul style="list-style-type: none"> Log on to the Evolent Carepro portal at https://my.newcenturyhealth.com Telephonic Intake: 888.999.7713 <ul style="list-style-type: none"> Medical Oncology - option 1 Radiation Oncology – option 3 Physician Discussions: 888.999.7713 <ul style="list-style-type: none"> Medical Oncology - option 2, followed by option 5 Radiation Oncology – option 3, followed by option 5 <p>HOURS OF OPERATION</p> <p>Monday – Friday, 5:00 AM – 5:00 PM PST (fully staffed) *</p> <p>Saturday, 5:00 AM – 5:00 PM PST (limited staff) *</p> <p>Sunday, 5:00 AM – 2:00 PM PST (limited staff) *</p> <p>*After hours call coverage available:</p> <p>Monday – Saturday, 5:00 PM PST – 5:00 AM PST*</p> <p>Sunday, 2:00 PM PST – 5:00 AM PST*</p>					
<p>EVOLENT TURNAROUND TIMES (TAT)</p>	<p>Line of Business</p>	<p>Part B Medications</p>		<p>Part D Medications</p>		
		<p>Standard</p>	<p>Expedite</p>	<p>Standard</p>	<p>Expedite</p>	
		<p>7 Calendar Days</p>	<p>36 Hours</p>	<p>24 Hours</p>	<p>12 Hours</p>	



FROM | magnolia health.



	Exchange	Radiation Oncology Medical Services	
		Standard	Expedite
		7 Calendar Days	36 Hours
TRANSPLANT SERVICES	<ul style="list-style-type: none"> • Pre-Transplant: Send all chemotherapy regimen requests to Evolent for review. • Post-Transplant: Transplant related chemotherapy authorizations requests within 1-year post-transplant should be sent to the health plan for review. 		
RETRO AUTHORIZATIONS	Retrospective authorizations are out of scope for Evolent. Please follow the health plan's policies and procedures.		
EVOLENT PROVIDER SOLUTIONS	<p>Please contact your dedicated Sr. Provider Solutions Manager with any questions or to request Evolent in-service/training:</p> <p>Name: Brenda Bedford Email: bbedford@evolent.com Phone: 1.571.248.9297</p>		
EVOLENT RESOURCES	<p>Resources available under "Useful Tool/Useful Documents" in Evolent's Carepro portal:</p> <ul style="list-style-type: none"> • Clinical Data Elements: A resource tool to assist with answering the clinical questions presented during the prior authorization process. • Dose Optimization: As per the Hematology/Oncology Pharmacy Association (HOPA), rounding of biologic and cytotoxic agents within 10% of the standard dose is designated as acceptable for routine clinical care in both the curative and incurable settings; and changes less than or equal to 10% are not expected to reduce the safety or effectiveness of therapy. Evolent offers dose rounding for many chemotherapy drugs and encourages you to take advantage of the dose rounding opportunity by accepting the calculated dose. Neither accepting nor overriding the dose-rounded calculation has any impact on your authorization's potential for auto-approval. • Evolent Level 1 Pathways: http://pathways.newcenturyhealth.com. <i>Please share this link with your pharmacy and clinical team.</i> • Oncology Supporting Documentation Grid (SDG) • Radiation Oncology Coding Guide: A resource tool to assist providers on how to submit radiation oncology treatment requests using appropriate CPT codes and quantities based on the number of treatments ordered. 		
EVOLENT CLINICAL LEADERSHIP	<p>Andrew Hertler, MD, FACP Chief Medical Officer Juhee Sidhu Vice President of Oncology Hugh Wallace, MD Sr. Medical Director Stanley Rubin, MD Sr. Medical Director Joel Schwartz, DO Radiation Oncology</p>		



FROM | magnolia health.



EXCLUSIONS

- Antibiotics
- Bone marrow, stem cell transplants (Exception: mobilization in pre-transplant patients are included in Evolent scope and should be reviewed. (i.e., Mozobil)
- CAR-T cell therapy
- CKD/ESRD patients/medications
- Clinical trials
- Controlled substances (i.e., Morphine)
- Diagnostic radioisotopes
- Diagnostic imaging and diagnostic testing
- Equipment requests (infusion pumps)
- Genetic lab testing and laboratory services
- Hemophilia drugs
- Home health
- Inpatient radiation and chemotherapy treatments
- Members outside of service area
- Radiopharmaceuticals
- Retrospective Requests
- Soliris and Ultomiris
- Specialties, diagnoses, j-codes/ CPT codes, places of treatment, and lines of business outside defined scope
- Surgeries/surgical procedures