

SERVICE AREA	Texas		
LINES OF BUSINESS (LOB)	<u>Effective July 1, 2025</u>  <b>Superior HealthPlan (Medicaid)</b> – Members 21 years of age and older <b>Ambetter from Superior HealthPlan</b> – Members 18 years of age and older <b>Wellcare By Allwell (Medicare)</b> – Members 21 years of age and older		
INTERVENTIONAL CARDIOLOGY SCOPE	SERVICES	COVERAGE	AUTHORIZATION
	<ul style="list-style-type: none"><li>Cardiac Catheterization and Intervention</li><li>Electrophysiology</li><li>Vascular Radiology and Intervention</li><li>Cardiac Surgery</li><li>Vascular Surgery</li></ul>	<b>Places of Service:</b> 11 - Provider office 19 - Outpatient off-campus* 22 - Outpatient on-campus* 21 - Inpatient* 24 - Ambulatory*  *Professional component of planned services only	<b>Required for:</b>  All planned/elective services listed, ordered by all specialties being performed in the covered places of treatment.
AUTHORIZATION PROCESS	<b>Ordering provider’s office must submit prior authorization requests to Evolent.</b> <ul style="list-style-type: none"><li>Evolent <a href="#">RadMD</a> portal at <a href="http://www.evolent.com/provider-portal">www.evolent.com/provider-portal</a><ul style="list-style-type: none"><li><b>Medicaid</b> Telephonic Intake: 1.800.642.7554</li><li><b>Ambetter</b> Telephonic Intake: 1.866.424.4916</li><li><b>Medicare</b> Telephonic Intake: 1.866.214.1703</li></ul></li></ul> <b>Hours of Operation</b> Monday – Friday, 7:00 a.m. – 7:00 p.m. CST Weekends and Holidays – 9 a.m. 12 p.m. CST  <b>RadMD Support</b> <a href="mailto:RadMDSupport@Evolent.com">RadMDSupport@Evolent.com</a>   1.800.327.0641		
TURNAROUND TIMES (TAT)	Line of Business	Medical Services Benefit	
		Standard Request	Expedited Request
	Superior Medicaid (STAR, STAR+PLUS, STAR Health)	3 Business Days	72 hours
	Ambetter	3 Calendar Days	72 hours
	Wellcare By Allwell (Medicare)	14 Calendar Days	72 hours
RETROSPECTIVE AUTHORIZATIONS	Retroactive requests for <b>Medicaid</b> members can be initiated within one (1) business day and will be considered urgent/emergent. Retroactive requests for <b>Ambetter</b> members are allowed within one (1) business day of date of service. Retro requests for are not allowed for <b>Wellcare By Allwell</b> members.		

POST-DETERMINATION	Reconsideration, re-review, and re-opens are not allowed. Please refer to the provider appeals section below for post-determination options.									
PROVIDER APPEALS	<table><tr><th>Line of Business</th><th>Timeframe to Submit</th></tr><tr><td>Superior Medicaid (STAR, STAR+PLUS, STAR Health)</td><td>Within 60 Calendar Days</td></tr><tr><td>Ambetter</td><td>Within 180 Calendar Days</td></tr><tr><td>Wellcare By Allwell (Medicare)</td><td>Contact Wellcare By Allwell to appeal</td></tr></table>	Line of Business	Timeframe to Submit	Superior Medicaid (STAR, STAR+PLUS, STAR Health)	Within 60 Calendar Days	Ambetter	Within 180 Calendar Days	Wellcare By Allwell (Medicare)	Contact Wellcare By Allwell to appeal	
	Line of Business	Timeframe to Submit								
	Superior Medicaid (STAR, STAR+PLUS, STAR Health)	Within 60 Calendar Days								
	Ambetter	Within 180 Calendar Days								
	Wellcare By Allwell (Medicare)	Contact Wellcare By Allwell to appeal								
NOTE: The “Initiate Appeal” option is located on the exam request verification details screen in RadMD. You will be prompted to answer clinical questions and upload additional clinical information.										
VALIDITY PERIODS	Authorizations are valid for thirty (30) Calendar Days from the date of service.									
EVOLENT PROVIDER SOLUTIONS	Please contact your Evolent Provider Engagement Manager with any questions and click the link below to learn more about the interventional cardiology program and to RSVP for an upcoming Evolent provider training: <a href="http://www.evolent.com/july-1-2025-cardiology-program-changes">www.evolent.com/july-1-2025-cardiology-program-changes</a>  Priscilla Singleton   <a href="mailto:psingleton@evolent.com">psingleton@evolent.com</a>   1.314.387.5023									
SUPERIOR PROVIDER SOLUTIONS	Please contact your <a href="#">Superior Provider Representative</a> for questions related to Superior’s processes, including but not limited to: <ul style="list-style-type: none"><li>• Claims</li><li>• Complaints or Grievances about Superior</li></ul>									
EVOLENT RESOURCES	Additional provider resources available on the Superior and Ambetter health plan pages in Evolent’s <a href="#">RadMD</a> portal: <ul style="list-style-type: none"><li>• Program Details</li><li>• Notification Letter</li><li>• Frequently Asked Questions</li><li>• Clinical Guidelines</li><li>• ICD-HCPCS</li></ul>									
EXCLUSIONS	<ul style="list-style-type: none"><li>• Clinical trials</li><li>• Claims management</li><li>• Emergent services</li><li>• Non-elective inpatient services</li><li>• Places of treatment and services not specifically listed as in-scope</li><li>• Provider contracting</li><li>• Services and CPT codes outside of defined scope</li></ul>									