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| Service Area   | North Carolina  |   |   |  |
| Effective Date                                       | May 1, 2024   |   |   |  |
| Lines Of<br>Business<br>(LOB)                        | WellCare of North Carolina (Medicaid) Members 21 years of age and older   |   |   |  |
| Evolent<br>Interventional<br>Cardiovascular<br>Scope | <ul> <li>Services:</li> <li>Cardiac catheterization and intervention</li> <li>Electrophysiology         Vascular radiology and intervention         Cardiac surgery         Vascular surgery</li> </ul>   | Places of Treatment:  11 - Provider office 19 - Outpatient off-campus* 22 - Outpatient on-campus* 21 - Inpatient* 24 - Ambulatory*  *Professional component of elective services only | Authorization required for:  All planned/elective services listed, ordered by all specialties being performed in the covered places of treatment.  Evolent manages approvals and denials. Grievance |  |
|  |   |   | and appeals will remain a function of Wellcare.   |  |
| Authorization<br>Process &<br>Provider Support       | Ordering provider's office must submit treatment requests to Evolent for prior authorization.   |   |   |  |
|  | <ul> <li>Log on to the Evolent <u>RadMD</u> portal at <u>evolent.com/provider-portal</u></li> <li>Telephonic intake, physician discussions and auth status inquiries:         <ul> <li>1.866.249.1583</li> </ul> </li> <li>Dedicated Provider Engagement Manager can be located in <u>RadMD</u> in the Wellcare NC</li> </ul> |   |   |  |
|  | Medicaid section within Provider Resources  |   |   |  |
|  | HOURS OF OPERATION<br>Monday – Saturday, 6:00 AM – 7:00 PM CST<br>Sunday, 7:00 AM – 7 PM CST  |   |   |  |
|  | RadMD Support  RadMDSupport@Evolent.com   1.800.327.0641  |   |   |  |
| Evolent<br>Turnaround<br>Times<br>(TAT)              | Standard Request: 14 calendar days Expedited Request: 72 calendar hours   |   |   |  |





| Retro<br>Authorizations                                   | Retrospective authorizations are in-scope up to 3 business days from the date of service (Requests submitted through RadMd effective 11.1.2025)   |  |
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| Authorization<br>Validity Period                          | Authorizations are valid for 60 days from the date of service on the request. (Requests submitted through RadMd effective 11.1.2025)  |  |
| Evolent<br>Resources                                      | Program resources are available in the <i>Wellcare NC Medicaid</i> section within <b>Provider Resources</b> in RadMD.   |  |
| Post-<br>Determination                                    | Reconsideration may be initiated within 10 business days from the date of denial notification by uploading additional/new clinical documentation to the denied request.   |  |
| Appeals   | Grievances and appeals will be managed by the health plan.  |  |
| Interventional<br>cardiovascular<br>Program<br>Exclusions | <ul> <li>DME/equipment requests</li> <li>Emergency services</li> <li>Heart transplants</li> <li>Laboratory services</li> <li>Left Ventricular Assist Device (LVAD)</li> <li>Non-elective inpatient services</li> <li>Pediatric members under the age of 21</li> <li>Pharmacy services</li> <li>Places of treatment and services not specifically listed as in-scope</li> <li>Referrals for office visits/consultations</li> <li>Services outside of included CPT scope</li> </ul> |  |