

Program	Interventional Cardiovascular Program
Service Area	Louisiana
Lines of Business (LOB)	Louisiana Healthcare Connections Ambetter (Exchange) Members 18 years of age and older
Effective Date	February 1, 2026
Evolent Interventional Cardiovascular Scope	<p>Services:</p> <ul style="list-style-type: none"> • Cardiac catheterization and intervention • Electrophysiology • Vascular radiology and intervention • Cardiac surgery • Vascular surgery <p>Places of Service:</p> <p>11 - Provider office 19 - Outpatient off-campus 21 - Inpatient hospital (elective professional services only) 22 - Outpatient on-campus 24 - Ambulatory surgical center</p> <p>Authorization Required for:</p> <p>All planned/elective services listed, ordered by all provider specialties performed in the covered places of service.</p> <p><i>Evolent is delegated approvals and adverse determinations (denials).</i></p>
Authorization Process and Provider Support	<p>Ordering provider's office must submit prior authorization requests to Evolent.</p> <ul style="list-style-type: none"> • Via the Evolent RadMD provider portal at evolent.com/provider-portal • Telephonic intake, physician discussions and authorization status inquiries: <ul style="list-style-type: none"> ○ 1.800.424.9231 • Contact information for the Evolent Provider Engagement Manager can be located within RADMD on the Health Plan section within Provider Resources. <p>Hours of Operation Monday – Friday, 7:00 a.m. – 7:00 p.m. CST</p> <p>RadMD Support RadMDSupport@Evolent.com 1.800.327.0641</p>

Turnaround Time (TAT)	Standard: 5 business days Expedite: 2 business days
Expedited Requests	The Evolent website RadMD.com cannot be used for medically urgent or expedited prior authorization requests during business hours. Expedited requests must be submitted by calling the Evolent call center.
Retrospective Authorizations	<ul style="list-style-type: none"> Retrospective requests, with treatment start date of 02.01.2026, are in scope for Evolent and must be submitted within 5 business days from the date of service.
Post Adverse Determinations	<ul style="list-style-type: none"> Reconsideration is allowed within 5 business days from the initial denial date.
Authorization Validity Period	Authorizations are valid for 90 calendar days from the request date.
Claims and Appeals	<ul style="list-style-type: none"> Providers should continue to submit their claims to the Health Plan, including Evolent's authorization number. Evolent is delegated appeal management. Providers can initiate appeals verbally or in writing within 180 calendar days from the date of the denial.
Evolent Resources	<p>Resources available under the {Add Health Plan Name}'s health plan page in Evolent's RadMD portal:</p> <ul style="list-style-type: none"> Evolent Clinical Guidelines Evolent Scope of Service Tip Sheets and Checklists Utilization Review Matrix
Exclusions	<ul style="list-style-type: none"> Claims management/provider contracting CPT codes, places of treatment, and lines of business outside defined scope Emergent/non-elective services Pediatric members aged 17 and under Transplants