



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 Alliance Health members, Alliance Health has entered into an agreement with WellCare of North Carolina (WellCare) to perform Utilization Management administrative functions including Medical Necessity Reviews (Prior Authorization, Concurrent Review and Retrospective Reviews), member and provider notifications. WellCare has delegated the responsibility of the medical necessity reviews to Evolent (formerly National Imaging Associates, Inc.). Evolent has implemented a new Musculoskeletal Surgery (MSK) Management program.

The MSK Surgery program requires prior authorization for non-emergent inpatient and outpatient hip, knee, shoulder, lumbar, and cervical spine surgeries for Alliance Health members. The decision to implement this latest 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 Alliance Health and WellCare, WellCare will oversee the Evolent program and Alliance Health will continue to be responsible for claims adjudication and medical policies. Evolent will manage Musculoskeletal (MSK) surgeries through Alliance Health existing provider contractual relationships.

Based on a July 1, 2024, implementation, this correspondence serves as notice under your Alliance Health Provider Agreement of changes to the program.

Alliance Health, consistent with NC Medicaid guidance, is waiving prior authorization for the dates of service from July 1, 2024 through September 30, 2024. Prior authorization will be required for all dates of service October 1, 2024 and thereafter. Evolent will be available to begin providing prior authorizations for those services starting on September 1, 2024 for dates of service October 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 Alliance Health.

To ensure continuous care for members during the transition, Alliance Health is extending certain policy flexibilities originally scheduled to expire September 30, 2024.

Please note that Alliance Health, consistent with North Carolina Medicaid guidance, **is waiving prior authorization for Medical Specialty Solutions services for dates of service July 1, 2024 through January 31, 2025**. Prior authorization will be required for all dates of service February 1, 2025 and beyond.

Prior authorization will be required for the following non-emergent inpatient and outpatient MSK surgery procedures.

MSK Surgeries: Prior authorization will be required for the following non-emergent inpatient and outpatient MSK surgeries: hip, knee, shoulder, lumbar and cervical

Hip

- Revision/Conversion Hip Arthroplasty
- Total Hip Arthroplasty/Resurfacing
- Femoroacetabular Impingement (FAI) Hip Surgery (includes CAM/pincer & labral repair)
- Hip Surgery – Other (includes synovectomy, loose body removal, debridement, diagnostic hip arthroscopy, and extra-articular arthroscopy knee)

Knee

- Revision Knee Arthroplasty
- Total Knee Arthroplasty (TKA)
- Partial-Unicompartmental Knee Arthroplasty (UKA)
- Knee Manipulation under Anesthesia (MUA)
- Knee Ligament Reconstruction/Repair
- Knee Meniscectomy/Meniscal Repair/Meniscal Transplant
- Knee Surgery – Other (includes synovectomy, loose body removal, diagnostic knee arthroscopy, debridement with or without chondroplasty, lateral release/patellar realignment, articular cartilage restoration)

Shoulder

- Revision Shoulder Arthroplasty
- Total/Reverse Shoulder Arthroplasty or Resurfacing
- Partial Shoulder Arthroplasty/Hemiarthroplasty
- Shoulder Rotator Cuff Repair
- Shoulder Labral Repair
- Frozen Shoulder Repair/Adhesive Capsulitis
- Shoulder Surgery – Other (includes debridement, manipulation, decompression, tenotomy, tenodesis, synovectomy, claviclectomy, diagnostic shoulder arthroscopy)

Lumbar

- Lumbar Microdiscectomy
- Lumbar Decompression (Laminotomy, Laminectomy, Facetectomy & Foraminotomy)
- Lumbar Spine Fusion (Arthrodesis) With or Without Decompression – Single & Multiple Levels
- Sacroiliac Joint Fusion

Cervical

- Cervical Anterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression with Fusion –Single & Multiple Levels
- Cervical Posterior Decompression (without fusion)
- Cervical Artificial Disc Replacement
- Cervical Anterior Decompression (without fusion)

KEY PROVISIONS:

- It is the responsibility of the ordering physician to obtain prior authorization for all MSK surgeries managed by Evolent.
- Evolent does not manage prior authorization for emergency MSK surgery cases that are admitted through the emergency department or for MSK surgery procedures outside of those procedures listed above.
- Facility admissions do not require a separate prior authorization. However, the facility should ensure that an Evolent prior authorization has been obtained prior to scheduling the surgery/procedure.

MSK surgeries other than those outlined above will continue to follow Alliance Health prior authorization requirements for hospital admissions and elective surgeries.

We appreciate your support and look forward to your assistance in assuring that Alliance Health members receive MSK Surgery services delivered in a quality, clinically appropriate fashion.

We will provide additional information as we get closer to the implementation date. Should you have questions, please contact Alliance Health Provider Support at 1-855-759-9700.

Sincerely,

Name]

[Title]