



SERVICE AREA	Ohio					
LINES OF BUSINESS (LOB)	<u>Effective June 1, 2025</u> Wellcare by Allwell (Medicare) Members 18 years of age and older					
	SPECIALTIES	COVERAGE	AUTHORIZATION			
EVOLENT ONCOLOGY MEDICATION SCOPE	 Gynecologic Oncology Hematology Medical Oncology Neuro-Oncology Radiation Oncology Surgical Oncology Urology (Medications Only) 	Place of Treatment: 11 - Provider office 19 - Outpatient off-campus 22 - Outpatient on-campus 24 - Ambulatory Cancer Diagnoses = C00-D09, D37-D44, E34.0 Hematology Diagnoses = 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 N&V = R11	Authorization required for: Infused, injectable and oral chemotherapy, hormonal therapeutic treatment, supportive agents, and symptom management medications. <i>Pharmacy benefit orals</i> <i>and office administered</i> <i>(medical benefit)</i> <i>infused/injectable agents</i> <i>of the same medication</i> <i>type (i.e., both cancer</i> <i>agents) must be submitted</i> <i>via one combined request.</i>			





	SPECIALTIES	COVERAGE	AUTHORIZATION		
	Radiation Oncology	Place of Treatment:	Authorization required for:		
EVOLENT RADIATION ONCOLOGY SCOPE		 11-Provider office 19-Outpatient off-campus 22-Outpatient on-campus 24-Ambulatory Cancer Diagnosis = C00-D09, D37-D44, E34.0 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 N&V = R11 	 Brachytherapy Conformal 3D 2D, Electrons IMRT (Intensity- modulated radiation therapy) SBRT (Stereotactic body radiation therapy) IGRT (Image-guided radiation therapy) SRS (Stereotactic radiosurgery) 		
AUTHORIZATION PROCESS	Ordering provider's office must submit treatment requests to Evolent for prior authorization.				
	 Log on to the Evolent CarePro portal at <u>https://my.newcenturyhealth.com</u> Telephonic Intake: 888.999.7713 Medical Oncology - option 2 Radiation Oncology - option 3 				
	 Physician Discussions: 888.999.7713 Medical Oncology - option 2 Radiation Oncology – option 3 				
	HOURS OF OPERATION Monday – Friday, 800 AM – 8:00 PM EST (fully staffed) * Saturday, 8:00 AM – 8:00 PM EST (limited staff) * Sunday, 9:00 AM – 6:00 PM EST (limited staff) * *After hours call coverage available: Monday – Saturday, 9:00 PM EST – 8:00 AM EST* Sunday, 9:00 PM EST – 8:00 AM EST*				

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EVOLENT TURNAROUND TIMES (TAT)	Line of	Part B Medications		Part D Medications			
	Business	Standard	Expedite	Standard	Expedite		
	Medicare	72 calendar hours	24 calendar hours	72 calendar hours	24 calendar hours		
	Weulcale	Radiation Oncology Medical Services					
		Standard		Expedite			
		14 calendar days		72 calendar hours			
TRANSPLANT SERVICES	 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 in-scope for Evolent up to 5 business days after the treatment start date.						
EVOLENT PROVIDER ENGAGEMENT MANAGER	Please contact your Evolent Provider Engagement Manager with any questions or to request Evolent in-service/training: Nicole Bright Email: NBright@evolent.com Phone: 571.370.9803						
EVOLENT RESOURCES	 Resources available under "Useful Tool/Useful Documents" in Evolent's CarePro portal: 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 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: https://www.evolent.com/pathways Please share this link with your pharmacy and clinical team. 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	Von Nguyen, MD 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						
EXCLUSIONS	 Antibiotics Bone marrow, stem cell transplants and CAR-T cell therapy CKD/ESRD patients/medications Controlled substances (i.e., Morphine) 						





- Diagnostic imaging and diagnostic testing
- Diagnostic radioisotopes
- Equipment requests (infusion pumps)
- Genetic lab testing and laboratory services
- Hemophilia drugs
- Home health
- Inpatient radiation and chemotherapy treatments
- Non-participating providers
- Radiopharmaceuticals
- Soliris and Ultomiris
- Specialties, diagnoses, j-codes/ CPT codes, places of treatment, and lines of business outside defined scope
- Surgeries/surgical procedures