Frequently Asked Questions (FAQ)

Cardiology Pathway Solutions Molina Healthcare of Iowa, Inc.



Q: Who is Evolent?

A: Evolent, formerly known as New Century Health (NCH) is a comprehensive cardiology quality management (OQM) company. Its platform optimizes the application of evidence-based medicine to the delivery of cardiology care.

Q: What is the Molina Healthcare Pathway Solutions program?

A: Molina Healthcare's Pathway Solutions program provides prior authorization management for the entire regimen. Cardiology is included in the program. The program emphasizes and supports the selection of preferred pathways for patient care and is administered by Evolent. Precertification, preauthorization, and notification requirements all refer to the same process of prior authorization.

Q: Is this for all Molina Healthcare members?

A: The Molina Healthcare Pathway Solutions program is for Molina Healthcare Medicaid members 18 years of age and older.

Q: When will the Molina Healthcare Pathway Solutions program begin?

A: The program will begin on September 1, 2025.

Q: What services are in-scope for Evolent?

A: Included Services:

- Cardiology Services:
 - o Non-Invasive Cardiology
 - o Non-Invasive Vascular
 - o Cardiac Cath and Interventional Cardiology
 - Vascular Radiology and Intervention
 - o Vascular Surgery
 - o Thoracic Surgery
 - o Cardiac Surgery
 - o Electrophysiology
 - Non-Invasive Cardiology
 - Non-Invasive Vascular
 - o Cardiac Cath and Interventional Cardiology
 - o Vascular Radiology and Intervention
 - Vascular Surgery
 - o Thoracic Surgery
 - o Cardiac Surgery
 - o Electrophysiology

Note: Program applies to "ALL SPECIALTIES" participating with Medicaid only. Non-participating providers may submit requests if the servicing provider is a Molina participating provider.

Prior authorization

Q: Who should obtain prior authorization?

A: The physician organization ordering the cardiology services must request prior authorization through Evolent.

Q: How can a physician's office request training for this program?

A: An Evolent Provider Network Manager will contact you soon to schedule an introductory meeting and training. Should you have any questions prior to the introductory meeting, you may contact Evolent at 1-888-999-7713, Option 6 or self-register online at <u>https://www.evolent.com/provider-portal</u>

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Q: How do I obtain prior authorization?

A: Submit cardiology requests to Evolent via the following method:

Log into Evolent provider web portal at <u>https://www.evolent.com/provider-portal</u> Contact Evolent's Utilization Management Intake Department at 1-888-999-7713 Cardiology – Option 1 Monday through Friday (8 a.m. - 8 p.m. CST)

Q: What are some key features of the program?

A: The online provider portal is always available, offering:

- Real-time authorizations for treatment care pathways
- Reduced documentation requirements
- View of real-time status of authorization requests
- Eligibility verification
- Supportive telephonic authorization staff available at 1-888-999-7713
- Quick turnaround time on authorization requests submitted via portal or phone
- Physician discussions by cardiologists
- Evolent provider representatives are available for support as needed

Q: What is the transition of care process?

A: Authorizations previously issued by Molina Healthcare prior to 09.01.2025 will be effective until the authorization expiration date. Request for new treatment and/or changes in treatment on or after 09.01.2025 must be submitted to Evolent for preauthorization.

Q: Which specialties are included in the Molina Healthcare's Pathway Solutions Program?

A: ALL medical specialties providing cardiology services must submit prior authorizations through Evolent.

Q: Who at Evolent Health will be reviewing cardiology requests?

A: Evolent Medical Reviewers are licensed cardiologists who are not incentivized to issue denials, as they use nationally recognized clinical guidelines when performing reviews. These guidelines are available at https://www.evolent.com/provider-portal or by contacting Evolent's Utilization Management at 1-888-999-7713. If the request does not meet evidence-based treatment guidelines, Evolent may request additional information or initiate a physician discussion with the requesting provider.

Q: What will the Evolent authorization look like, and how long is it valid?

A: The Evolent authorization will start with "AR" followed by at least four digits (e.g., AR1000). It is valid for the duration indicated on the Medication Request Authorization (MRA). Typically, 90 days.

*Claims submitted to Molina Healthcare may use the Evolent authorization number or the Molina Healthcare prior authorization number provided in the letter from Molina Healthcare.

Q: What place of service does this prior authorization review process include?

A: Outpatient setting, which could include the physician's office, infusion centers and outpatient hospital locations. Includes inpatient setting for cardiology professional services only.

Q: Does prior authorization guarantee payment?

A: No, prior authorization does not guarantee payment for services. Payment of claims is dependent on eligibility, covered benefits, provider contracts, and correct coding and billing practices. For specific details, please refer to your Molina Provider Manual.

Q: What will happen if the physician does not request and obtain an authorization?

A: If the required authorization is not obtained, Molina Healthcare may deny payment.