Frequently Asked Questions (FAQ)
Medical Oncology and Radiation Oncology
Pathway Solutions - Molina Healthcare of Iowa, Inc.

Q: Who is Evolent?
A: Evolent, formerly known as New Century Health (NCH) is a comprehensive oncology and cardiology quality management (OQM) company. Its platform optimizes the application of evidence-based medicine to the delivery of ambulatory cancer care, radiation oncology 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. Oral chemotherapy agents are out of scope for Evolent and should continue to be managed through Molina Healthcare. Radiation oncology 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 Oncology 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 Diagnosis Codes:
- Medical Oncology
  - Cancer-related diagnosis for infused, injectable and oral (when part of an infused regimen) chemotherapy, hormonal therapeutic treatment, supportive agents, and symptom management medications for the following diagnosis codes:
    - C00-D09.0, D37.01-D49.9, D61.810, D61.82, D63.0, D64.0-64.81, D70.1, D72.822, D75.81, E34.0
- Radiation Oncology Services
  - Same above diagnosis range
    - Brachytherapy
    - Conformal
    - IMRT (Intensity-modulated radiation therapy)
    - SBRT (Stereotactic body radiation therapy)
    - IGRT (Image-guided radiation therapy)
    - 2D, 3D (2 or 3 dimensional)
    - SRS (Stereotactic radiosurgery)
    - Radiopharmaceuticals
    - Proton and Neutron Beam Therapy

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

Prior authorization

Q: Who should obtain prior authorization?
A: The physician organization ordering chemotherapeutic drugs, supporting agents or radiation oncology for the treatment of cancer or related hematologic diseases must request prior authorization through Evolent.

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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 https://www.evolent.com/provider-portal

Q: How do I obtain prior authorization?
A: Submit chemotherapy or radiation oncology requests to Evolent via the following methods:
Log into Evolent provider web portal at https://www.evolent.com/provider-portal
Contact Evolent's Utilization Management Intake Department at 1-888-999-7713
Medical Oncology - Option 2 Radiation Oncology - Option 3
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 medical oncologists and radiation oncologists
- 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 cancer care, radiation oncology must submit prior authorizations through Evolent.

Q: Who at Evolent Health will be reviewing chemotherapy and radiation oncology requests?
A: Evolent Medical Reviewers are licensed medical oncologists, radiation oncologists 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. The Molina Healthcare authorization number will begin with "OP" followed by 10 digits.

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.

Q: Where do I obtain a prior authorization for pharmacy dispensed chemotherapeutic agents?
A: Oral chemotherapy agents should be submitted to Molina Healthcare for authorization.

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.