

SERVICE AREA	<p style="text-align: center;">Kentucky With providers in the bordering states of TN, VA, WV, MO, OH, IN, and IL</p>		
LINE OF BUSINESS	<p style="text-align: center;">Passport by Molina Healthcare (Passport) Medicaid Members 18 years and older</p>		
EFFECTIVE DATE	<p style="text-align: center;">October 1, 2022</p>		
<p style="text-align: center;">Oncology Medication Scope</p>	<p style="text-align: center;">New Century Health review scope includes the following services ordered by ALL SPECIALTIES New Century Health (NCH) manages approvals and denials</p>		
	DIAGNOSIS CODES	COVERAGE	AUTHORIZATION
	<p>Cancer Related Diagnosis: C00 - D09.0, D37.01-D49.9, D61.810, D61.82, D63.0, D64.0 - D64.81, D70.1, D72.822, D75.81, E34.0</p>	<p>Place of Treatment: 11-Doctor's office 19-Outpatient off campus 21-Inpatient (<i>IP place of treatment will be an option for CAR-T cell requests only-all other IP requests are OOS</i>) 22-Outpatient on-campus 24-Ambulatory</p>	<p>Authorization Required for: Infused and oral** chemotherapy, hormonal therapeutic treatment, supportive agents, and symptom management medications</p> <p><i>**Pharmacy benefit medications, that are part of an infused regimen, are required to be submitted to NCH to allow NCH to review as an entire regimen to make a clinically informed decision. Then pharmacy medication needs to be submitted through MedImpact.</i></p>
<p style="text-align: center;">Radiation Oncology Scope</p>	DIAGNOSIS CODES	COVERAGE	AUTHORIZATION
	<p>Cancer Related Dianosis: (Same as above) C00 - D09.0, D37.01-D49.9, D61.810, D61.82, D63.0, D64.0 - D64.81, D70.1, D72.822, D75.81, E34.0</p>	<p>Place of Treatment: 11-Doctor's office 19-Outpatient off campus 22-Outpatient on-campus 24-Ambulatory</p>	<ul style="list-style-type: none"> • 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

AUTHORIZATION PROCESS	<p>Physician’s office must complete and submit cancer treatment request to NCH for prior authorization.</p> <p style="text-align: center;">Please allow 5 business days for the authorization process</p> <ul style="list-style-type: none"> • Login onto NCH provider web portal at https://my.newcenturyhealth.com • Network Operations: 888-999-7713 - Option 6 • Physician Discussion: 888-999-7713 - Option 5 • Telephonic Intake 888-999-7713 <ul style="list-style-type: none"> ○ <i>Medical Oncology - Option 1</i> ○ <i>Radiation Oncology - Option 2</i> <p style="text-align: center;"><i>NCH Hours: 8:00 a.m. - 8:00 p.m. EST</i></p> <ul style="list-style-type: none"> ➤ Upon entering your member information, the following criteria will be required: MEMBER ID – LAST NAME – FIRST NAME – DATE OF BIRTH ➤ <i>The NCH authorization will start with an “AR” followed by at least 4 digits (e.g., AR1000). It is valid for the duration indicated on the Medication Request Authorization (MRA). Please submit claims to Passport Health Plan by Molina Healthcare KY using the NCH prior authorization number.</i>
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NCH TURN AROUND TIMES (TAT)	LOB	Benefit Type (Purchase Types)	Medical Benefit (Buy & Bill)	
		Request Types	<i>Standard CTR</i>	<i>Expedited CTR</i>
	Passport Health Plan (Medicaid)	NCH TAT		2 Business days

TRANSITION OF CARE	<ul style="list-style-type: none"> • Authorizations issued by Passport before 10/01/2022 will be effective until the authorization expiration date. • Authorizations issued by Passport that expire on or after 10/01/2022 must be submitted to New Century Health to obtain a new valid authorization.
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TRANSPLANT SERVICES	<p>Prior to Mobilization: send all chemotherapy regimen requests to New Century Health.</p> <p>Beginning with Mobilization: all authorization requests for transplant-related chemotherapy should be sent to the Molina Healthcare’s transplant unit.</p>
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RETRO AUTHORIZATIONS	Retrospective authorizations are out of scope; provider to contact Passport.
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OUT OF SCOPE REQUESTS	Out-of-scope requests will be forwarded to Passport.
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<p>REFERENCE DOCUMENTS</p>	<p>Available tools under “Useful Tool/Useful Documents” in the NCH Portal</p> <ul style="list-style-type: none"> ➤ Oncology Supporting Documentation Grid (SDG) ➤ NCH Level 1 Pathways http://pathways.newcenturyhealth.com <ul style="list-style-type: none"> ○ <i>Please share link with your pharmacy and clinical team</i> ➤ Clinical Data Elements: A resource tool to assist answering the clinical questions presented during the prior authorization process ➤ Dose Rounding/HOPA Position Statement: According to 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. If your practice does not currently dose round, the request may not auto-approve and may result in a P2P. ➤ Radiation Oncology Coding Guide
<p>MARKET MANAGER</p>	<p>For questions or training, please contact your dedicated Sr. Provider Solution Manager:</p> <p style="text-align: center;">Name: Rachel Vowels Email: rvowels@newcenturyhealth.com Phone: 562-237-3174</p>
<p>PROVIDER ADDS, TERMS and CHANGES</p>	<p>Please report all provider additions, terminations and/or demographic change requests to Passport by submitting the Provider Information Update Form. This form is available at https://www.molinahealthcare.com/providers/ky/medicaid/forms/fuf.aspx. If provider is not found within NCH portal or when calling NCH, you will be directed to Passport to update provider information and submit your request. New Century Health will not be able to load any provider or practice information into our system unless received directly from Passport.</p>
<p>NCH Clinical Leadership</p>	<p style="text-align: center;">Andrew Hertler, MD, FACP Chief Medical Officer Hugh Wallace, MD Sr. Medical Director Stanley Rubin, MD Sr. Medical Director Joel Schwartz, DO Radiation Oncology</p>

EXCLUSIONS

- Bone Marrow, Stem Cell Transplants
- Inpatient Radiation and Chemotherapy Treatments (IP place of treatment will be an option for CAR-T cell requests only-all other IP requests are OOS)
- Genetic Testing and Laboratory Services
- Pediatric members
- Retrospective Requests
- Surgeries/ Surgical Procedures
- Antibiotics
- Any radiation therapies not included in the list of in-scope services
- CKD/ESRD Patients/Medications (*When submitted with an OOS diagnosis or non-cancer diagnosis*)
- Controlled Substances not included in the NCH HCPCS scope (i.e., Morphine)
- Diagnostic Imaging and Diagnostic Testing
- Diagnostic Radioisotopes
- Equipment Requests (infusion pumps)
- Hemophilia Drugs
- Home Health
- Medical supplies/DME
- Members outside of service area
- Any Specialties, Diagnoses, HCPCS/ CPT Codes, Places of Treatment, and Lines of Business outside defined scope
- Clinical Trials
- Pharmacy benefit requests are out of scope.