

North Carolina Medicaid Utilization Management (UM)

QUICK REFERENCE GUIDE



WellCare of North Carolina Medicaid Prior Authorization Phone and Fax Numbers

For Expedited Requests: If the Standard time frame for making a determination could seriously jeopardize the life and/or health of the member or the member's ability to regain maximum function, please call **1-866-799-5318** to submit request.

Department	Phone	Fax
All Medical	1-866-799-5318	Inpatient: 1-800-678-3170 Outpatient: 1-866-319-2691
Behavioral Health	1-866-799-5318	Inpatient: 1-866-587-1383 Outpatient: 1-800-551-0325

Prior Authorization (PA) Requirements

Providers must obtain authorization for certain services and procedures. Authorizations can be requested via the secure online Provider Portal, by fax, or by phone.

A searchable Authorization Lookup Tool is available on our website at [wellcare.com/North-Carolina/Providers/Authorization-Lookup](https://www.wellcare.com/North-Carolina/Providers/Authorization-Lookup). The online authorization lookup **tool** is available for general information. It does not take into consideration a specific member or contract agreement. WellCare of North Carolina (WellCare) Providers are advised to use the **Secure Provider Portal** which takes into consideration all factors, including the specific member, in order to determine whether a prior authorization is required for certain services or procedures.

URGENT AUTHORIZATION REQUESTS AND ADMISSION NOTIFICATIONS: CALL 1-866-799-5318 AND FOLLOW THE PROMPTS.

- ✓ **All services rendered by non-participating providers and facilities require authorization.** Primary Care Physicians (PCPs) must refer members to participating specialists. It is the responsibility of the provider rendering care to verify that the authorization request has been approved before services are rendered.

WellCare supports the concept of the PCP as the “medical home” for its members. PCPs may refer members to network specialists when services will be rendered at an office, clinic, or free-standing facility.

The PCP should communicate the reason for the referral to the specialist, as well as sharing any relevant clinical information the specialist may need to best treat the member. The name of the specialist must be documented in the medical record. The specialist must document receipt of the request for a consultation and the reason for the referral in the medical record. **No communication with WellCare is necessary.** Specialists may not refer members directly to other specialists.
- ✓ **Inpatient hospital admission notification** is required on the same or next business day following admission (except delivery admissions). WellCare will accept Admission, Discharge, and Transfer (ADT) notification from NC HealthConnex, North Carolina's Health information Exchange (NC HIE) via their NC*Notify service, or by phone, fax, or provider portal when ADT is unavailable. **For all admissions, clinical information must be submitted** to initiate the inpatient authorization process. Phone authorizations must be followed by a fax submission of clinical information. **For inpatient hospital admissions that were pre-authorized, additional clinical information must be submitted after admission begins** to both verify notification from ADT and facilitate the ongoing review process.

- ✓ **Outpatient authorizations** for urgent and time-sensitive services may be submitted by phone when warranted by the member's condition. Please add Current Procedural Terminology (**CPT®**) and **ICD-10 diagnosis codes** with your authorization request. Standard authorization requests may be submitted online via the **WellCare Provider Portal** or via fax to the numbers listed above. Prior Authorization Request Forms can be located on WellCare.com under **Forms**.
- ✓ **Web submissions** are faster, and if the procedure requested meets clinical criteria, the Web provides an approval that can be printed for easy reference.
- ✓ Obtaining authorization does not guarantee payment, but rather only confirms whether a service meets WellCare's determination criteria at the time of the request. WellCare retains the right to review benefit limitations and exclusions, beneficiary eligibility on the date of service, the medical necessity of services and correct coding and billing practices.

WELLCARE UM PARTNERS

eviCore

eviCore is our in-network vendor for the following programs and clinical criteria can be accessed through the corresponding program links: **Lab Management** and **Sleep Diagnostics**.

Contact eviCore for all authorization-related submissions for the services listed above rendered in outpatient places of service (including the home setting*). Please click on the hyperlinks above for a list of the specific services and related criteria included in the eviCore programs.

Web submissions are faster and if the procedure requested meets clinical criteria, the web provides an immediate approval that can be printed for easy reference. Member eligibility and authorization requests may be submitted via the **eviCore Provider Web Portal**. A searchable **Authorization Lookup** and Eligibility Tool is also available online and criteria can be accessed through the program links above.

URGENT AUTHORIZATIONS AND PROVIDER SERVICES: 1-888-333-8641

Evolut

Evolut – formerly NIA (National Imaging Associates) and New Century Health – is our in-network vendor for the following programs and clinical criteria can be accessed through the corresponding program links:

Advanced Radiology; **Advanced Cardiology**; **Orthopedic and Spinal Surgery**; **Pain Management**; **Physical, Occupational, and Speech Therapy**; and **Radiation Oncology**.

Contact Evolut for all authorization-related submissions for the services listed above rendered in inpatient or outpatient places of service (including the home setting). For Inpatient services or hospital admission, health plan notification is required on the same or next business day following admission. Please click on the hyperlinks above for a listing of the specific services and related criteria included in the program. Web submissions are faster and if the procedure requested meets clinical criteria, the web provides an immediate approval that can be printed for easy reference. Member eligibility and authorization requests may be submitted via the **NIA Provider Web Portal** or **New Century Health Portal**. A searchable Authorization Lookup tool is also available online and criteria can be accessed through the program links above.

URGENT AUTHORIZATION AND PROVIDER SERVICES:

1-888-999-7713 (Cardiology – Option 1; Radiation Oncology and all other specialties – Option 3)

CONTRACTED NETWORKS



Centene Vision Services

Customer Service and Claims

Phone: **1-833-678-1324**



Non-Emergency Medical Transportation (NEMT) Services

Phone: **1-877-598-7602**

mtm-inc.net

WellCare has partnered with MTM, a transportation broker, to provide Non-Emergency Medical Transportation services. Members contact MTM at **1-877-598-7602** no later than two business days before their appointment. Normal business hours are 7 a.m. to 6 p.m. EST Monday through Saturday. Members can also contact the WellCare of North Carolina Member Services department at **1-866-799-5318** select «Transportation» to be connected to MTM.

BEHAVIORAL HEALTH SERVICES

WELLCARE SECURE PROVIDER PORTAL

For Urgent and Inpatient Hospitalization Authorizations and Provider Services:

Phone: 1-866-799-5318

Please **log in** to submit your Outpatient Authorization Requests and Inpatient Clinical Submissions. Please access our forms **here** to request a fax.

In order to obtain authorization, notification of an Inpatient admission is required on the same or next business day following admission. NOTE: Admission, Discharge, and Transfer (ADT) notification from NC HealthConnex, North Carolina's Health Information Exchange (NC HIE) via their NC*Notify service does not serve as notification of behavioral health admissions.

- Inpatient concurrent review is done by phone, but a fax option is available, and the forms and fax numbers can be found on our website. All other levels of care requiring authorization can be submitted online.
- For more information on Authorization Requirements click **here** and select the “**Behavioral Health Authorization List**” PDF under **Authorization Resources**.

OUTPATIENT SERVICES AND DISCHARGE PLANNING

WELLCARE SECURE PROVIDER PORTAL

Please **log in** to submit your Authorization Requests and Inpatient Clinical Submissions.

To fax a request, please access our forms **here**.

Pharmacy Medical Requests Fax: 1-866-269-6535

Discharge planning requests for Home Health and DME should be submitted separately using one of the methods outlined above.

Procedures and Services	Authorization Required in OP setting	Comments
Select Outpatient Procedures	Yes – See Comments	Please refer to the <u>Authorization Lookup Tool</u> for prior authorization requirements.
Advanced Radiology Services: CT, CTA, MRA, MRI, Nuclear Cardiology, Nuclear Medicine, PET and SPECT Scan	Yes – See Comments	Contact <u>Evolent</u> for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Abortions (Therapeutic and Non-Therapeutic)	No	Note: Therapeutic Abortions require submission of Abortion Statement.
Air Ambulance	Yes	Prior authorization not required for emergent transport.
Cardiology Services: Cardiac Imaging, Cardiac Catheterization, Diagnostic Cardiac Procedures and Echo Stress Tests	Yes – See Comments	Contact <u>Evolent</u> for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Child Medical Evaluation and Medical Team Conference for Child Maltreatment	No	
Children's Screening Services	No	
Chiropractic Services	Yes	Authorization is required after the first three chiropractic services for any combination of CPT codes 98940, 98941, 98942. See "Chiropractic Services" Clinical Coverage Policy for applicable benefit limits. Providers are responsible for tracking units of service rendered.
Circumcision	No	

Procedures and Services	Authorization Required in OP setting	Comments
Cochlear Implants, Auditory Brainstem Implants, and Implantable Bone Conduction Hearing Aids (BAHA)	Yes	
Cochlear, Auditory Brainstem Implant, Soft Band and Implantable Bone Conduction Hearing Aid External Parts Replacement and Repair	Yes for all parts not covered under warranty	
Dialysis	No	
Durable Medical Equipment Purchases and Rentals	Yes – See Comments	All DME rentals require authorization. DME purchases reimbursed at OR below \$500 per line item do NOT require authorization. If Total Cost of the DME item and quantity requested is greater than \$500 (Quantity x Price on fee schedule = Total cost > \$500) Item will require authorization.
Family Planning Services	No	
Hospice	Yes	
Implantable Bone Conduction Hearing Aids (BAHA)	Yes	
Investigational and Experimental Procedures and Treatment	Yes	
Laboratory Management (Certain Molecular and Genetic Tests)	Yes – See Comments	Contact eviCore for authorization: <u>eviCore Provider Web Portal</u> Phone: 1-888-333-8641 <u>WellCare Lab Management</u> <u>Program Criteria Molecular and Genetic Testing Quick Reference Guide</u>
Non-contracted (nonparticipating) Provider Services	Yes	
Non-Emergency Air Ambulance	Yes	
Non-Emergent Medical Transportation	Yes	>75 miles, out of state (40+miles from state border), and trips requiring air travel, lodging, and/or meals
OB Ultrasounds	No	

Procedures and Services	Authorization Required in OP setting	Comments
Orthopedic Surgery	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Orthotics and Prosthetics	Yes — See Comments	Purchase items reimbursed at or below \$500 per line item do NOT require authorization.
Out-of-State Services	Yes	
Pain Management Treatment (Certain Pain Management Treatments)	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Physical and Occupational Therapy (including home-based therapy)	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Physician Fluoride Varnish Services	No	
Preventative Medicine Annual Health Assessment	No	
Radiation Therapy Management	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Repair, Fitting, and Molding of Hearing Aids. Assistive Listening Device/ FM System/Accessories	Yes	Codes: V5014, V5050, V5060, V5090, V5110, V5130, V5160, V5240, V5241, V5264, V5266, V5267, V5274, V5299
Sleep Diagnostics	Yes	Contact eviCore for authorization: <u>eviCore Provider Web Portal</u> Phone: 1-888-333-8641 <u>WellCare Lab Management Program Criteria Molecular and Genetic Testing Quick Reference Guide</u>
Speech Therapy	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Spinal Surgeries	Yes — See Comments	Contact Evolut for prior authorization: <u>NIA Provider Web Portal</u> or <u>New Century Health Portal</u> Phone: 1-888-999-7713
Transplants	Yes	Please submit clinical records for prior authorization for all transplant phases.

