



August 2019

NEW UTILIZATION MANAGEMENT/QUALITY PROGRAM FOR CARDIOLOGY SERVICES

Dear Provider,

CountyCare Health Plan is pleased to announce its partnership with New Century Health (NCH) to manage the complexities related to cardiovascular care by reducing variability and ensuring the highest quality to our members. New Century Health will be performing utilization management (UM) services for only members 18 years of age and older. This program will simplify the administrative process and provide a comprehensive solution through physician collaboration in a true peer-to-peer approach.

Beginning September 20, 2019, all clinical cardiology, invasive, diagnostic, EPS, cardiovascular/thoracic surgery services, performed electively will require a prior authorization from NCH when rendered in the physician's office, outpatient hospital, inpatient and ambulatory setting. Prior authorizations are to be submitted via the NCH portal and applies to all CountyCare Medicaid members 18 years and older.

New Century Health's program benefits include:

- The use of clinical criteria based on nationally recognized guidelines, such as the American College of Cardiology (ACC) and Appropriate Use Criteria (AUC), to promote evidence-based cardiac care
- Increased collaboration with physician offices to foster a team approach
- Peer-to-peer discussions with cardiologists who can understand and better discuss treatment plans
- A provider web portal to:
 - Obtain real-time approvals when selecting evidence-based NCH treatment care pathways
 - Determine which clinical documentation is necessary for medical necessity reviews
 - View all submitted requests for authorization in one location, and
 - Check member eligibility.

Pre-Approval Process

The requesting physician must complete an authorization request using one of the following methods:

- Logging into the NCH Provider Web Portal: <https://my.newcenturyhealth.com>
- Calling 888-999-7713 (Monday – Friday 7 a.m. - 7 p.m. CT)
- Faxing the authorization form to 877-624-0611



Timeframe for Approval

Real-time approval is given for NCH recommended treatments. Timeframes for review of treatment regimens are as follows:

- Standard requests – four (4) calendar days.
- Expedited/urgent requests – 48 hours.

Authorizations issued by CountyCare before September 20, 2019 are effective until the authorization end date. Subsequent authorization requests must be submitted to NCH. If continued authorization is not obtained from NCH, affected claims may be denied.

An NCH representative will contact you shortly to schedule an introductory meeting and coordinate training. Should you have any questions prior to the introductory meeting, please contact NCH Network Operations at 888.999.7713 Option 6.

We look forward to offering this program and hope it will enhance your experience in providing value-based, high quality care.

Sincerely,

CountyCare Health Plan