

## **Buckeye Health Plan Oncology Pathway Solutions Frequently Asked Questions**

### **Q1: Who is New Century Health?**

**A1:** New Century Health (NCH) is a comprehensive oncology quality management (OQM) company. Its platform optimizes the application of evidence-based medicine in the delivery of adult ambulatory cancer care.

### **Q2: What is the Buckeye Health Plan Oncology Pathway Solutions program?**

**A2:** Buckeye Health Plan's Oncology Pathway Solutions program includes preauthorization management for all oncology-related infused, oral chemotherapeutic drugs, supportive agents and symptom management drugs. The program emphasizes and supports the selection of Preferred Pathways for patient care and is administered by **New Century Health**.

### **Q3: Is this for all Buckeye Health Plan members?**

**A3:** The Buckeye Health Plan Oncology Pathway Solutions program is for Buckeye Health Plan Medicaid and Exchange members of all ages. Precertification, preauthorization and notification requirements all refer to the same process of prior authorization.

### **Q4: When will the Oncology Pathway Solutions program begin?**

**A4:** The expanded program begins June 1, 2021 for Buckeye Health Plan Medicaid and Exchange members of all ages.

### **Q5: How can a physician's office request training for this program?**

**A5:** To request training, contact New Century Health Network Operations at **1-888-999-7713**, Option 6 or by email to [providertraining@newcenturyhealth.com](mailto:providertraining@newcenturyhealth.com).

## **Prior authorization**

### **Q1: What are some key features of the program?**

**A1:** Provider portal is always available at <https://my.newcenturyhealth.com>, 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 Monday – Friday 8:00 a.m. to 8 p.m. ET at **1-888-999-7713**, Option 1 for Medical Oncology.
- Quick turnaround time on authorization requests submitted via fax or phone.
- Peer-to-peer consultations by medical oncologists.
- New Century Health is a National Comprehensive Cancer Network (NCCN) licensee of the Drugs and Biologics Compendia. It uses nationally recognized, evidence-based treatment guidelines.
- A New Century Health provider representative is available for support as needed.

**Q2: What is the transition of care process?**

**A2:** Authorizations previously issued by Buckeye Health Plan **before June 1, 2021** will be effective until the authorization expiration date. Authorizations previously issued by Buckeye Health Plan that **expire on or after June 1, 2021** must be submitted to New Century Health to obtain a new valid authorization.

Valid authorization on file issued by Buckeye Health Plan or Envolve Pharmacy Solutions **before June 1, 2021** for a single drug regimen will remain valid until it expires.

**Q3: Who should obtain prior authorization?**

**A3:** The physician organization ordering chemotherapeutic drugs or supporting agents for the treatment of cancer or related hematologic diseases must request preauthorization through New Century Health.

**Q4: How do I obtain prior authorization?**

**A4:** Submit chemotherapy requests to New Century Health via the following:

- Log into New Century Health’s provider web portal at <https://my.newcenturyhealth.com>.
- Contact New Century Health’s Utilization Management Intake Department at **1-888-999-7713, Option 1** for Medical Oncology , Monday through Friday, 8:00 a.m. – 8 p.m. ET

**Q5: Which drugs require preauthorization?**

**A5:** Buckeye Health Plan’s Oncology Pathway Solutions Program, administered by New Century Health, includes preauthorization management for all chemotherapeutic drugs, symptom management drugs and supporting agents for members with a diagnosis code included in the following range: C00-D09, D37-D44, E34.0, D45-D49, D61.81, D61.2, D63.0, D63.8, D64.2-D64.3, D64.81, D64.89, D64.9, D68.59, D69.41, D69.59, D69.6, D69.8, D69.9, D70, D72.8, D72.9, D73.81, D73.9, D75.1, D75.81, D75.82 and R11 (when cancer related)

**Q6: Which specialties are included in the Buckeye Health Plan Oncology Pathway Solutions program?**

**A6:** Medical specialties providing cancer care and its supportive services, including **Medical Oncology, Hematology, Urology, Surgical Oncology, Neurological Oncology, and Gynecologic Oncology** will submit their chemotherapy pre-authorizations through New Century Health.

**Q7: Who at New Century Health will be reviewing chemotherapy requests?**

**A7:** New Century Health Medical Reviewers are licensed medical oncologists and are not incentivized to issue denials, as they use nationally recognized clinical guidelines when performing reviews. These guidelines are available at <https://my.newcenturyhealth.com> or by contacting New Century Health’s Utilization Management at **1-888-999-7713, Option 1 for Medical Oncology**.

**Note:** If the request does not meet evidence-based treatment guidelines, New Century Health may request additional information or initiate a peer-to-peer conversation with the requesting provider.

**Q8: What will the New Century Health authorization look like, and how long is it valid?**

**A8:** The authorization will start with “AR” followed by at least four digits (i.e. AR1000). Chemotherapeutic drugs and supporting agents will be authorized up to 90 days. Please bill with Buckeye Health Plan prior authorization number provided on letter from health plan. (Buckeye Health Plan number is different from NCH number.)

**Q9: What place of service does this prior authorization review process include?**

**A9:** The Oncology Pathway Solutions program applies to services rendered (e.g. chemotherapy administration) in an outpatient setting, which could include the physician's office, infusion centers and outpatient hospital locations.

**Q10: Are there services and/or other drugs that require authorization from Buckeye Health Plan's Precertification Department?**

**A10:** Yes. Keep in mind that drugs for **non-cancer/non-hematology diagnoses** that are listed on the Medicaid and Ambetter PDLs for pharmacy acquired medications require authorization from Buckeye Health Plan. Provider administered medications that need prior authorization from Buckeye Health Plan are available for Medicaid and Ambetter at [buckeyehealthplan.com/providers/preauth-check.html](http://buckeyehealthplan.com/providers/preauth-check.html)

**Q11: Where do I obtain a prior authorization for inpatient chemotherapy?**

**A11:** Inpatient authorization for chemotherapy remains the same. Please contact Buckeye Health Plan at 1-866-296-8731 for Medicaid members.

**Q12: Where do I obtain a prior authorization for pharmacy dispensed chemotherapeutic and supportive agents?**

**A12:** Requests that were previously submitted to Envolve Pharmacy Solutions or CoverMyMeds should be submitted directly to NCH.

## Claims

**Q1: Where do I submit related claims once prior authorization is obtained through New Century Health?**

**A1:** Submit claims to Buckeye Health Plan either electronically or by mail to the following address:

Buckeye Health Plan  
PO Box 6200  
Farmington, MO 63640

The payer ID for electronic claim filing is 68069. Please refer to the back of the member's ID card for specific instructions.

**Q2: Does a prior authorization guarantee payment?**

**A2:** No, a 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 Provider Manual.

**Q3: Who is responsible for appeals?**

**A3:** Providers can initiate an appeal with Buckeye Health Plan by mail or fax:

Buckeye Health Plan  
Attention Medical Management Appeals Department  
4349 Easton Way, Suite 300  
Columbus, Ohio 43219  
Fax: 866-529-0291

**Q4: What will happen if the physician does not request and obtain an authorization?**

**A4:** If authorization is not obtained for the applicable drugs, Buckeye Health Plan may deny payment for respective drugs. Members cannot be held responsible for denied charges/services.